

LEGAL ASPECTS OF IATROGENICS IN OBSTETRICS

Kabilova G.R.¹, Igamberdieva D.A.², Shopulotova Z.A.³

^{1,2}Lyceum at Samarkand State University

³Samarkand State Medical University

<https://doi.org/10.5281/zenodo.10395893>

Abstract. *The article considers the relevance and timeliness of detection of such categories as iatrogenic crimes. All over the world, the problem of iatrogenics is still reaching a new frontier of development again and again. The development of medicine and the medical industry has come to the forefront and side effects are not far behind them. Along with the progress of medical science, on the other hand, in parallel with this, the degree of danger of medical care, the number of iatrogenic diseases and mortality from them have increased.*

Keywords: crime, medical worker, defect of medical care, careless fault, iatrogenic.

Introduction:

The field of obstetrics deals with the care of pregnant women and their unborn babies, ensuring their well-being throughout pregnancy, labor, and delivery. While healthcare providers strive to provide the best possible care, iatrogenic complications can sometimes occur. Iatrogenics refers to unintended harm or adverse effects caused by medical intervention or treatment.

In the context of obstetrics, iatrogenics can encompass a range of legal aspects related to potential medical errors, negligence, or malpractice that result in harm to the mother or the baby. These legal aspects are of significant concern to both healthcare professionals and patients, as they involve issues of liability, patient rights, and the need for appropriate compensation and resolution. Understanding the legal aspects of iatrogenics in obstetrics is crucial for healthcare providers to ensure they deliver care that aligns with legal standards, guidelines, and best practices. It also empowers patients to be informed about their rights and seek appropriate legal remedies if they believe they have been subjected to iatrogenic harm.

The legal aspects of iatrogenics in obstetrics are of utmost importance in ensuring the safety and well-being of both the expectant mother and the unborn child. Iatrogenic complications refer to adverse events or injuries that occur as a result of medical interventions or treatments. In the context of obstetrics, iatrogenic complications can arise during pregnancy, labor, delivery, or postpartum care. Understanding and addressing the legal implications of such complications is crucial for healthcare providers, patients, and the legal system to ensure appropriate accountability, patient rights, and the delivery of high-quality obstetric care.

Obstetric care involves a complex web of medical decisions, interventions, and procedures aimed at ensuring a safe and successful pregnancy and childbirth experience. However, despite the best intentions and efforts of healthcare professionals, iatrogenic complications can occur due to errors, negligence, inadequate communication, or unforeseen circumstances. These complications can range from maternal injuries, fetal distress, birth injuries, to long-term disabilities or even maternal and fetal deaths.

The legal aspects of iatrogenics in obstetrics encompass various aspects, including medical malpractice, informed consent, standard of care, negligence, and the rights of the patient and healthcare providers. Medical malpractice refers to the failure of a healthcare professional to provide the expected standard of care, resulting in harm to the patient. In obstetrics, medical

malpractice claims may arise from a variety of scenarios, such as misdiagnosis, improper monitoring, medication errors, surgical errors, or inadequate communication with the patient.

Relevance. Iatrogenic are crimes against human life or health committed by doctors as a result of improper provision or failure to provide medical care to citizens. The right to health and to medical care is guaranteed by the Constitution of Uzbekistan. The strategic demographic policy of the Uzbekistan is currently aimed at increasing the birth rate and life expectancy of citizens, as well as improving the reproductive health of women and the health of newborn children.

However, the number of iatrogenies in the field of obstetrics and gynecology is not decreasing, but is growing every year. The investigation of crimes related to poor quality medical care during obstetrics is very difficult, due not only to the need for thorough research and comprehensive analysis processes of delivery and obstetrics, but also the personal characteristics of the participants in the process. Let us pay attention to some current problems related to the identity of the subject, victim and expert. The subject of an iatrogenic crime is always a medical worker. During the investigation, his qualifications (education, certification), specialization, professional category and work experience are subject to examination.

Main part. Another “character” of the crime is the victim, in this case the patient, a person seeking medical help, who almost always takes an active part in the medical process, so his physiological and psychological characteristics also play a key role in the investigation. First of all, it is necessary to pay attention to the patient’s belonging to the so-called risk groups - groups of patients prone to iatrogenic manifestations. Risk groups are formed based on gender, age, chronic and concomitant diseases, intolerances, genetic predispositions, professions and bad habits. Obstetricians traditionally pay attention to the age of the woman in labor (less than 16 and more than 35), the number of births, “miscarriage” (history of miscarriages), conflicts regarding blood group and rhesus, underweight and overweight, toxicosis and gestosis, and also, most importantly, the presence genital (related to the reproductive system) and extragenital (related to other body systems) diseases.

A key role in the process of successful delivery is played by continuity - a close connection between outpatient medical institutions (antenatal clinics) and institutions where women are directly provided with obstetric care (maternity hospitals). The medical card, which is kept in the antenatal clinic (the so-called “exchange”), is given to the pregnant woman with instructions to keep it with her at all times in case labor begins. If an emergency hospitalization occurs or the patient is unconscious, the record often does not reach the hospital, and the obstetrician does not obtain a complete history.

During the investigation, it is necessary to establish criteria for risk groups to which the patient may belong. Not only documents from the institution where the birth took place, but also cards from the antenatal clinic and other medical institutions where the patient received medical care are subject to study and analysis. Many extragenital diseases (hypertension, obesity, hyperthyroidism, etc.) negatively affect fetal development and the process of delivery.

In addition to the medical history, it is necessary to pay attention to the patient’s life, profession, habits and behavior. According to ongoing research, a significant proportion of women do not attach importance to regular medical supervision during pregnancy (45.05%), early attendance at an obstetrician-gynecologist during pregnancy (42.08%), prenatal hospitalization (25.99%), and the need to attend obstetrician-gynecologist before pregnancy (22.03%).

Recently, “new methods” have become popular in Russian society: pregnancy without medical supervision, childbirth at home, childbirth with a “spiritual midwife”. In some situations, experts go beyond the scope of the questions posed and try to include in their conclusions judgments that have legal significance, for example, about the presence or absence of guilt of a medical worker, the presence of a causal relationship between his actions and the adverse consequence that has occurred, etc. Such judgments should not be made by experts.

In addition, experts tend to express an opinion about the presence of signs of extreme necessity, justified risk, or “medical error” in a doctor’s actions, which also goes beyond their competence.

Conclusion. Thus, if the “human factor” is not taken into account during the investigation of an iatrogenic crime, the investigation may encounter unforeseen difficulties and make mistakes that will have serious consequences, including an unjust verdict.

REFERENCES

1. Васильева Т.П., Песикин О.Н., Халецкий И.Г., Васильев М.Д., Борзова Н.Ю., Краснова В.П., Шевелева А.А. Гностическая готовность пациента и медицинского работника как составная часть системы обеспечения профилактики акушерской и перинатальной патологии // Медицинский альманах «Организация здравоохранения и общественное здоровье». 2009. №4 (9). С. 30-32.
2. Лузанова И.М. Ненадлежащее оказание помощи в акушерской практике (медико - правовые аспекты проблемы): автореф. на соиск. канд. мед.наук. Москва, 2007. С. 10.
3. Пристанское В.Д. Проблемы выявления неосторожных преступлений в медицине. // Проблемы прокурорской и следственной деятельности в сфере борьбы с преступностью в современных условиях. Международная научно-практическая конференция 5-6 июля 1996 г.: Тезисы выступлений. СПб.,1995. С. 179-180.
4. Constitution of the Republic of Uzbekistan
5. Decree of the President of the Republic of Uzbekistan No. PF-81 of March 1, 2022 "On measures to improve the system of working with families and women, and supporting the neighborhood and clergy"
6. Азизова, Р., Шералиев, И., Холиева, Н., & Дадамухамедова, Х. (2022). ЯТРОГЕНИЯ БЫЛА И ВСЕ ЕЩЕ ПРОДОЛЖАЕТСЯ. *Инновационные исследования в современном мире: теория и практика*, 1(27), 118–124. извлечено от <https://www.in-academy.uz/index.php/zdit/article/view/6415>
7. Кабилова Г., Игамбердиева Д. АКАДЕМИК ЛИЦЕЙЛАРДА ҲУҚУҚ ФАНИНИ ЎҚИТИШДА ШАРҚ МУТАФАККИРЛАРИНИНГ ЎРНИ //Общественные науки в современном мире: теоретические и практические исследования. – 2022. – Т. 1. – №. 26. – С. 4-7.
8. Shernazarov Farrukh ORGANIZATION OF DIGITALIZED MEDICINE AND HEALTH ACADEMY AND ITS SIGNIFICANCE IN MEDICINE // SAI. 2023. №Special Issue 8. URL: <https://cyberleninka.ru/article/n/organization-of-digitalized-medicine-and-health-academy-and-its-significance-in-medicine> (дата обращения: 20.11.2023).
9. Kabilova G., Igamberdieva D., Kobilova Z. STUDYING THE HISTORY OF SUFISM: ITS ROLE IN THE DEVELOPMENT OF SOCIAL CONSCIOUSNESS //International Bulletin of Applied Science and Technology. – 2023. – Т. 3. – №. 12. – С. 60-62.

10. Gulnora K., Dilbar I., Erkin K. THE INFLUENCE OF THE CONTENT AND METHODS IN TEACHING HISTORY ON THE NATURE OF THE COGNITIVE ACTIVITY OF STUDENTS //Archive of Conferences. – 2021. – C. 49-50.
11. Kabilova G. et al. METHODS OF TEACHING HISTORY. PROBLEM LEARNING //Zbiór artykułów naukowych recenzowanych. – C. 149.
12. GULNORA K. THE JADID MOVEMENT AND ENLIGHTENING //Archive of Conferences. – 2021. – T. 16. – №. 1. – C. 41-43.