ABSTRACT

Background: Defensive medicine is prescribing of unnecessary investigation and procedure and taking measures in order to prevent medical litigations. Litigation in medicine is generally high against doctors in the surgical specialities.

Methodology: Literature search on articles on defensive medicine was done.

Conclusion: Practice of defensive medicine causes more risks on the patient and increases the finance spent on healthcare.

Key Words: Defensive, Medicine, Litigation, Lawsuit.

INTRODUCTION

Defensive medicine takes place when hospital staff performs unnecessary treatment and tests, or avoids high risk patients or procedures to reduce its exposure to malpractice litigation. Doctors in particular prescribe tests, procedures or specialist visits (positive defensive medicine) or alternately avoid high risk patients or procedures (negative defensive medicine). Patients most likely affected by defensive medicine are those requiring surgery and those visiting emergency rooms. Women are more affected by defensive medicine than men. Emergency room and obstetricians and gynaecologists are the most likely to practice defensive medicine. The practice of defensive medicine is the induced primarily by a threat of liability and includes supplemental care such as referral to other physicians and reduced care including referral to treat particular patients.

WHY DOCTORS PRACTICE DEFENSIVE MEDICINE

The number of negligence claims against doctors is continuously increasing. A large number of legal initiatives taken by patients have induced many doctors to adopt a defensive 'strategy' to avoid jeopardizing their litigation constitutes a serious obstacle to improving the reliability of healthcare organizations and patient safety. The fear of litigation is also why some health workers especially doctors practice defensive medicine. Some studies have reported strong relationships between physicians, fear of malpractice litigation and behaviour that may reduce litigation risks such as the use of caesarean section instead of vaginal birth. The goal of defensive medicine is to ensure that if the patient later sues, the physician has gone above and beyond what is required. Surgeons and obstetricians and gynaecologists are the most affected by the threat of lawsuits with 79% and 83% respectively having been named in lawsuits.
Fear of litigation has been cited as the driving force behind defensive medicine. Defensive medicine is the damaging effect of medical litigation. Some of the factors that influence the adoption of defensive medicine are fear of medical litigation, personal knowledge of a colleague being subjected to medical litigation, fear of a request for compensation, previous experience with medical litigation, fear of negative publicity and reputational loss and fear of disciplinary actions. The psychological repercussions of litigation and in particular the loss of self-esteem are also very important and the anxiety state that is provoked by their attendance in court endures long after the conclusion of the sentence. Defensive medicine is directly traced to medical malpractice law without the threat of litigation; there would be no reason to practice defensively.

ADVERSE EFFECTS OF PRACTICE OF DEFENSIVE MEDICINE
Defensive medicine is a damaging effect of medical litigation. It increases the costs of the healthcare system and exposes patients to unnecessary risks. Unnecessary and invasive diagnostic procedures examples biopsies constitute additional and unnecessary risks for patients. Defensive medicine could cause a reduction in care; rising malpractice liability could discourage physicians from accepting certain high risk or uninsured patients. It is fiscally and physically counterproductive to employ defensive medicine factors to avoid attacks by the legal enforcers of alleged negligent care. The concept of defensive medicine is closely related to the issue of medical errors.

CONCLUSION
Defensive medicine is medicine practiced not for the benefit of the patient but to protect the doctor from medical litigation. This has caused a rise in rate of caesarean births. The cost of litigation is high and physicians try to avoid it by all means.

REFERENCES
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