

33. THE SUBJECT OF MEDICAL TRUTH AND THE PLANNING IN ADVANCE OF THE CARE FOR PATIENTS WITH INCURABLE DISEASES

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Introduction. One of the basic values in the case of patients with incurable diseases is respect for the autonomy of the patient. This study highlights some rules for the medical worker in the evaluation and preparation of the patient, the process of stating the bad news, the support and follow-up of the patient's actions in the procedure of telling the medical truth, and the planning in advance of the care offered to non-curable patients.

Aim of study. The purpose of the study is to present the role of bioethical landmarks in communicating the truth to patients with incurable diseases and the necessity of their application at the stage of advance planning of their care.

Methods and materials Scientific publications from theoretical medicine, oncology, national and international medical protocols, bioethics, medical ethics, empirical data of one's own study, conducted between January and February 2022, have been studied and analysed. Methods used: observation, questionnaire method, description, analysis, the bioethics principles-based methods, etc.

Results. In oncological practice, telling the truth to the patient with an unfavourable diagnosis can lead to the worsening of their health and can complicate the care process. The doctor will have to deliberate thoroughly based on a psycho-medical criteriology, taking into account the social, professional and family status of the incurable patient. It is important to avoid communicating the truth to those who did not suspect the unfavourable evolution of the disease and to those who, at the moment, have a good general condition. The opposite will be done with patients who appreciate truth and sincerity more than tragic subjectivism, have a strong character, as well as with those who have already intuited the sad diagnosis, refusing treatments and saving interventions. The truth can be suggested with great caution, increasing the patient's trust in the oncologist.

Conclusion. Based on the principle of respect for the autonomy of the patient, every patient has the right to decide on his own life regardless of the existential context. In the process of making the moral decision, the doctor must tell the truth under any conditions and circumstances, taking into account another principle – not to harm the patient's health, and all actions to be in the patient's benefit. The application of the rule of autonomy is not always easy to achieve in oncology, but a solution would be to a fully individualised process of informing the patient, adapted to the psychology of each patient.