Editorial

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Why Medicine and Medical Ethics Must be Read Together?

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Medicine is a lot more than just figuring out what is wrong with someone and giving them some pills. It is a job that's all about doing what is right. Every time a doctor sees a patient they have to think about what's the best thing to do not just from a medical point of view but also from a moral point of view. What is the best thing for the patient? How do you make decisions when you are not really sure what to do when you do not have a lot of money to work with when there are risks involved and when people are hurting now? These are the kinds of questions that doctors and nurses think about every day in clinics, hospital rooms, emergency rooms, intensive care units, operating rooms, labs and in the systems that keep us healthy. That is why we need a journal that talks about medicine and medical ethics. Medicine and medical ethics are topics that need to be discussed. A journal, about medicine and medical ethics is really necessary.

Medicine is developing at an incredible pace in today's world. It is the age of precise medicine, artificial intelligence, digital health care, genomic testing, organ support systems, reproduction and more complicated treatments [1,2]. All this technology has made medicine more efficient and provided new possibilities for both diagnostics and therapy, thus changing the field significantly. On the other hand, the advancement of medicine creates ethical questions. The use of technology can make operations more convenient, but will it create any space for the protection of one's dignity? The therapy process may prolong an individual's life span, but what about maintaining their quality of life? When it comes to a data-based model, there is still a person making an assessment.

The split between medicine and ethics is artificial in many ways. Ethics is not an outside commentary on medical practice. It is woven into the fabric of good clinical care. The informed consent procedure is ethical. Confidentiality is an ethical responsibility. End-of-life decision-making poses an ethical challenge. The ethical responsibility of sharing scarce resources. Scientific practice is part of the same continuum as professional conduct, truth-telling, access to equity, respect for autonomy, research integrity and fair use of innovation. Medicine asks what can be done. Ethics asks what should be done. Responsible health care requires that both questions be asked in tandem.

The demand for such a framework is particularly relevant in modern health care. With the increasing emphasis placed on the ethical dimensions of professional practice in health care institutions, clinicians are facing an ever-growing number of challenging moral scenarios that lack clear solutions [3]. Your intensive intervention will save the life of the critically ill patient, but at what price? The relatives insist on doing everything possible, yet the medical staff realize the pointlessness of such measures. You are a doctor with access to high-tech equipment, but not all your patients share such advantages. Artificial intelligence could be used for diagnostic purposes, but might trigger issues regarding potential bias, transparency, and privacy [4]. Although science makes research possible, it cannot ensure that ethical aspects are considered.

A journal like the Annals of Medicine and Medical Ethics is thus envisaged as a meeting point. It is where clinicians, researchers, educators, ethicists, lawyers, policy analysts, and public health practitioners can come together to have substantive discussions. It is a venue where a case report can reveal an ethical issue, where a research article can spark consideration of issues of justice or autonomy, where an editorial can address the ramifications of a new technology, where a personal reflection can remind us of the humanity in the system and numbers. Such a journal does not lessen scientific rigor, but deepens it by recognizing that medicine is practiced in a social and moral world.

There is also a pragmatic reason for uniting medicine and ethics on a single platform. Ethical questions appear to be discussed in the abstract, and clinical questions in technically specialized silos [5,6]. The effect is that crucial discussions continue to be split up. Clinicians don't always read ethics journals. Ethicists may not always be on the ground of the realities of frontline medicine. Policymakers may be presented with evidence that does not have sufficient ethical context. Procedures and protocols may be emphasized without equal emphasis on moral reasoning. Such a journal can bridge the gap between these two fields by producing research that is scientifically valid and ethically conscious at the same time.

In many parts of the world, including healthcare environments in developing countries, medicine and ethics become indistinguishable from one another. They are not theoretical questions of fairness, access, affordability, triage, public trust and professional accountability; they are lived realities. Healthcare Ethics cannot be discussed only in relation to advanced technologies and tertiary care environment. It has to address overburdened systems,

resource constraints, rural access, cultural diversity, public health priorities, vulnerable populations, and the responsibilities of institutions. A journal in this area must be open to grounded scholarship from the everyday practice, not only to philosophical analysis.

The current problems of academic medicine itself are also a strong argument for such a journal. Issues of research integrity, authorship disputes, conflicts of interest, abuse of artificial intelligence, predatory publishing, data manipulation and failures of transparency are increasingly becoming issues of concern. Medical ethics is more than bedside dilemmas. It also incorporates the way knowledge is produced, reviewed, published and applied. An ethically sensitive journal can raise the bar for integrity and promote thoughtful scholarship in the areas of medicine and ethics. In doing so, it can contribute not only to better publications, but to a healthier academic culture.

Medicine at its best is a science of conscience. The clinician needs to know the evidence but also to understand the person. The researcher must seek discovery, but must also remain responsible. The teacher has to teach knowledge but also has to teach character. "The institution must seek excellence, but must also protect justice. These are not different ambitions. They support each other. Ultimately, a medically competent system that is ethically neutral will lose credibility. An ethical system that is scientifically faulty would not provide good services to patients. Both of them are necessary for the development of healthcare in the future.

It is with this conviction that Annals of Medicine and Medical Ethics embarks on its mission. Our journal rests on the belief that academic scholarship needs to address both the capabilities of the profession as well as the way it should serve humanity. We look forward to receiving contributions that are scholarly, medically sound, ethically aware, and socially relevant. We welcome cross-disciplinary and cross-cultural discussions. We value scholarly courage, scholarly responsibility, and scholarly compassion in our contributors. In uniting medicine with ethics, we are not merely building an optional partnership. It is an essential restoration. Medicine cannot be humane, trustworthy, and responsive to community values without a central place for ethics.

Declarations

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