

Social and Cultural Problems of Bioethics in Modern Times

Mamajonova Gulnoza Karimovna¹

Abstract--- Bioethics is one of the bio-social disciplines that emerged within the boundaries of the natural and social sciences during the time when natural sciences began to evaluate their social effectiveness. In this article, bioethics is discussed as a cultural system. Socio-cultural problems of bioethics are conceptually analyzed.

Keywords--- bioethics, culture, medicine, philosophy, biotechnology, spirituality, corporate mystery

I. Introduction

The word "culture" comes from Latin cultura (agri), which originally meant cultivation. In this sense, the word is used in biology or agricultural sciences when it comes to the bacteria or the "cultures" of certain plants, and the specific ways of their cultivation. In other words, the word "culture" refers to the improvement and humanization of human habits and behavior. Although the word is derived from cultivation, it also applies to habits. This meaning is very common in ancient philosophy, and is still used today in plain language.

Culture can be applied to anything that is created with the purposeful thinking and action of people. Bioethics is consistent with the above definition as it covers all material and intangible values created by man. In this sense, even the simplest of human beings is a very simple weapon, a very simple device, and every thought that arises in the human mind is culturally based. This division of "nature" and "culture" led to the division of sciences into natural and social sciences. Therefore, we regard bioethics as belonging to the category of bio-social sciences, which arose within the boundaries of the natural and social sciences, at the time when the achievements of natural sciences began to be judged on their social effectiveness.

Hereditary bioethics belong to the world of spiritual culture, which has served as the basis for the construction of various idealistic philosophical theories that seek to define the essence of the world of thought, a powerful factor that shapes people's thinking and activity.

In each specific area of culture we see a number of similar basic elements of a culture, large or small, satisfying and creating needs. These form and consolidate efforts, influencing the activities of people, leading to the creation of more complex cultural systems. For example, in modern medicine, the principle of protecting patients' rights is a systemic factor that unites all four models of medicine. This will lead to the reorganization of the health care system in the formation of a consumer culture and provision of medical services and the development of new legislation. In addition, such a system has a direct bearing on the free culture of developed countries. Its international appearance creates interaction in the global health care system. A broader set of examples of objects, institutions, images, ideas,

¹ Lecturer in the Department of Social Sciences, Namangan Engineering-Construction Institute,
Independent researcher of the National University of Uzbekistan

and behaviors that are functionally associated with a particular element can be called cultural. Cultural complexes create a distinctive image of societies, indicating the degree of their manifestation or non-existence. It is possible to distinguish specific complexes in every area of the cultural activities of society: bioethics in medicine and health emerges as such cultural complexes.

Cultural complexes may be integrated into a broader so called cultural configuration. For example, modern society is such a form or form of many cultural systems that are more or less narrowly linked to functional and structural links. If we evaluate such cultural configurations according to anthropological criteria, the emergence of new biotechnologies will be followed by new research directions, new educational standards, new techniques for their distribution, new rules of behavior (policy, law) or unethical behavior. caused the formation of

The cultural space is thus composed of a complex system - elements of culture, cultural complexes (a system of cultural elements formed on a merit basis and their interrelations) and cultural configurations (socially defined systems of cultural complexes). We do not claim that such classification is flawed, nor do we analyze the principles of organization (network or hierarchical). However, we assume that the consideration of bioethics as a cultural complex has an heuristic value for comparing it to the cultural space. The anthropological approach allows us to identify the structural and functional and contextual links between bioethics and the cultural configurations that exist in society. And the most important of them is medicine. In fact, bioethics has "found itself" in medicine, which is not currently being debated by anyone. Some authors use the term "biomedical ethics" to highlight their interrelationships.

We have included medicine as above in cultural configurations. As we try to substantiate this sentence. First, although no one can tell the exact date, it is true that medicine has never existed. It may be that these people stopped treating themselves like animals and started when they sought help from their clan or tribe. In other words, medicine may have emerged at the time of the emergence of doctors, physicians, and others who were helping their brothers in cases of illness or injury. In general, this period has undergone much discussion in the history of medicine.

Due to the accumulation of sufficient knowledge, this knowledge has been transferred from teacher to student in a purposeful way to systematize this knowledge. The doctors appeared in special places where they could receive patients, they received equipment and began to produce medicines (which later became separated from the medical profession and became pharmacy). Gradually, specialists in the narrow field emerged. Then medical writing resources became part of the culture as well. In other words, medicine has evolved from an element of culture that is simple medicine into a cultural complex with all the elements that can be found in a cultural complex: people, knowledge, technology, and rules. One must pay special attention to the latter. The fact is that the cultural complex is always based on some rules. Otherwise it does not represent integrity.

How and how to convey knowledge, how to choose a profession, how to share activities, and how to distribute resources among participants is what social professionals and their customers are all about - and many more. These standards can be economic, political, legal or even moral. In medicine, from the very beginning of its existence, moral norms can be the main cultural formative phenomenon. Thus, the whole cultural complex of medicine is centered around the idea that life and health are good and illness and death are bad. Also, all the medical activities

of all times are focused on one thing - life and health. All of this has been discussed to the extent that it contradicts or interferes with something, or is expelled from a profession that does not conform to this principle. Ethical evaluation has always been dominant in medicine. Even if a physician is healed by unacceptable or unacceptable methods in the medical community, the doctor's actions have been approved, or, if the patient loses the patient following the rules, his actions have become the subject of deliberation and punishment.

Of course, scientific norms (and sometimes it is worth noting that they were formed much later in medicine), as well as economic and legal norms (no social institutions and cultural complexes exist outside of them), have always been the norm in medicine. However, medicine is completely different from other cultural complexes, because it "works" with living people, and its moral management is more cautious than in other areas of society. Gradually, there was a distinctive normative image of medicine that was designed not only to establish relationships within medicine but also to differentiate it from other systems of culture. This is how the ethics of medicine came into being. It gradually evolved, and the norms contained in it reflected the needs of medicine for self-development and self-preservation, as well as the society's hopes for it.

II. Discussion

The idea that medicine has its own normative base can be justified by the rules set forth in the 11th century Rigveda. There may be sources older than this, but we do not know. There are some principles in Rigveda that define specific forms of physician and patient interactions. For example, it states that a doctor should not "help the hooligans and people who don't like the ruler and the people, because they can lose their friends and profits." On the one hand, it means that medicine was a special profession back then, and on the other hand, it is quite contrary to the current notion that a doctor should help anyone in need. It is also clear that the existence of such an inhumane principle is due to the fact that the profession itself is not yet formed. Those were times of extreme severity, not humanity, but trying to survive. Later, in antiquity, influenced by humanistic ideas, Hippocratic ideas emerged, which form the basic principles of medical ethics that still exist. However, it would be shocking if Hippocrates himself knew that in the 20th century, respect for patient freedom was a fundamental principle in physician-patient interactions. In other words, the doctor can do nothing without the patient's consent, the doctor must inform him of all his actions and agree with the patient on the treatment. This is completely incompatible with Hippocrates spirituality! According to its principles, the physician possessed vast knowledge that ordinary people did not know and had no right to disclose. It was only possible to share the knowledge with the disciples, but with the utmost care.

If we look at the Hippocrates Oath from today's medical point of view, we can see that there is a strong interest in distinguishing the profession. Although Hippocrates ethics are more advanced and more humane than Rigveda ethics, we can say that in modern terms, it is just corporate ethics. Of course, there's nothing wrong with that, almost every branch of human activity - with its own ethics - is called corporate ethics. There is also the ethics of medicine in medicine. Hippocrates ethics have principles for physicians' behavior, but we do not see here any indication that the patient should have some principles of interaction with medical personnel. This ethic also does not promote public attitudes to medicine, nor does it by its standards cover the status of medical science and its

relationship to science in general. That is why it has become apparent that these standards are not sufficient for the advancement of medicine. Consequently, the hippocratic medical ethics became known to be inadequate, and new forms of control, new guidelines and evaluations for medicine began to be sought.

First, society has changed. This is the first reason for the emergence of a new form of normalization of all health-related interventions. This is also the first reason for the emergence of bioethics.

We have already mentioned that even corporate standards of ethics reflect the internal needs of medical self-management and serve as a response to society's expectations. By the time of the war, the society had become more free, democratized and united by the 20th century. Totalitarian regimes and dictatorships have been gradually suppressed by democracies, where human rights were first recognized and then declared as the main values.

Many rights and freedoms, such as the right to political choice, the right to vote, freedom of conscience, freedom of choice and knowledge, freedom of belief, and more, have been recognized and declared as the core values of a liberal democratic society. But why not have the freedom to choose a doctor? Why not make a decision about your own health? Of course, with the development of democracy, the case has also been recognized as a right to freedom. The relationship between medicine and society has also begun to build on new standards. But on what principles? It was yet to be determined. Indeed, the ancient ethics of medicine had the principle of protecting the patient from danger. In particular, this meant not telling the patient the diagnosis that could be traumatic. The news of the illness should not be worse than the disease itself. Now, this is seen as a violation of the patient's right to complete and reliable information about their health.

If previously a medical secret was considered a corporate secret, that is, for both strangers and the patient itself, he is now entitled to copy the history of the disease and receive advice from another physician that he or she is properly treated. There are many examples of this.

In general, the development of biotechnology has changed the whole picture of medicine. Discovering the secrets of the human genome, the success of organ transplants, the management of vertebral tissues, artificial insemination, nanotechnology How and in what ways? What are the consequences for mankind? Can a person create a clone? Is it possible to grow the fetus in a test tube for up to 12 weeks and then use its "components" to cure other people? Who can be considered the father and mother of the child if he uses artificial insemination and artificial motherhood? Is it possible to get members only with the consent of the donor, or is it freely done in the event of death? If new methods of treatment allow the patient to survive as a result of a stroke but do not help him to recover from suffering or to regain his consciousness, is it possible to kill his euthanasia?

III. Conclusion

As we have seen, there has been an enormous increase in moral problems, the unresolved ones that have completely stopped the introduction of new biotechnologies. The transformation of medicine in the twentieth century has led to the creation of new biomedical ethics accordingly. Therefore, we believe it is necessary to analyze medicine and bioethics in the cultural context, and biomedical and biomedical ethics in the pragmatic sense.

Finally, the third reason for the emergence of bioethics is the "expansion of medicalization." Modern medicalization has significantly expanded and transformed medicine. Bioethics has emerged, which can be

described as a new cultural complex that is functionally related to a particular element and has a wide range of objects, institutions, ideas, and behaviors.

In this connection, there is a need to determine the structural - functional and contextual dependence of bioethics as a cultural complex with existing cultural structures.

References

- [1] Heinrich Rickert, Kulturwissenschaft und Naturwissenschaft VII, 1926.
- [2] .Shamov I.A. Biomedical Ethics: A Textbook. - M.: Publishing House "Medicine", 2006;
- [3] Mamazonova, Gulnoz Karimovna (2019) "ROLE OF BIOETHICS IN THE DEVELOPMENT OF MEDICINE AS A CULTURAL FORM," Scientific Bulletin of Namangan State University: Vol. 1 : Iss. 7 , Article 27.
- [4] Potter V.R. Bioethics: a bridge to the future. Kiev: Sphere, 2002.216 s.
- [5] Kuhse H., Schuklenk U., Singer P. (ed.). Bioethics: an anthology. - John Wiley & Sons, 2015.
- [6] Veatch R. M. The basics of bioethics. - Routledge, 2016.
- [7] Vaughn L. Bioethics: Principles, issues, and cases. - 2010.
- [8] Christoph Rexmann Sutter, Marcus Duwell, Dietmar Mieth Bioethics in Cultural Contexts. Springer . 2006.
- [9] Mukhamedova Zamira BIOETHICS IN UZBEKISTAN: HISTORY, ISSUES, PROSPECTSPhilosophy and life / 1/2 (1) 2018
- [10] Mamazonova GK Bioethics - Institutional Mechanism of Social Control of Criteria for Ethical Choice and Ethical Responsibility // Journal of Sources of Science No. 5/2019 pp. 30-33
- [11] .Nurmatova M. A., Zhabborova Yu. D., Umarova N. Kh., Khudaiberdiev A. K. Some features of the spiritual and moral education of students of medical universities // Young Scientist. - 2014. - No. 6. - S. 868-870. - URL <https://moluch.ru/archive/65/10682/>
- [12] Lopatin P.V. Bioethics. - M .: GEOTAR-Media, 2011.
- [13] Mamazonova, G. K. (2019). The role of bioethics in fostering the family's spiritual foundations. International Journal of Advanced Science and Technology, 28(12), 397-401.