

Editorial

Human worth in the era of market forces

Human life is precious and beyond commodification. The sojourn from birth to death is full of vicissitudes. Pursuit of happiness is a quality unique to human beings. Sometimes, being alive itself becomes an end. The Kantian principle that human life does not have a price, but rather a dignity that gives it an inestimable value and incomparable worth is challenged in the face of interminable misery due to penury and disease. Man in the terminal phase of cancer with limited therapeutic options finds succor in hope, hope of a miracle drug, technology, or a healing messiah. Man, it is said is one with a sense of the future, a being, and in anticipation of fruition of his visions. Life, free of pain, if not immortality is the eternal quest of human existence. It is the utopian future that man desires which is human dignity and happiness. The life which one thought can never be commodified has a "value" which is always judged by others. We are as good as others think we are. Hence, life, which is deemed invaluable, suddenly starts assuming a price. The planners, economists, insuring companies, and the governments start assigning a numerical value to life. This morally repugnant idea becomes bearable once it is understood that it is about a statistical mean, and not an individual. The vast disparity in economic and social status results in a multiple cohorts of low, high, and very high net worth individuals. However, in the times of adversity, like when diagnosed with cancer, all the individuals deem their lives as equally precious. Patients desperate to salvage their life from clutches of cancer generally do not spare any efforts. Patients pursue therapeutic options which may be proven or unproven, and even esoteric. There are therapeutic options with a poor cost-to-benefit ratio such as Cyberknife and Protons. Many of the targeted therapies and immune therapy also have largely shown poor cost-benefit ratios. The raging debate over proton therapy attests to the above assertion. It appears, as if a snake oil merchants are on a prowl. Proton centers have proliferated, even when the evidence for efficiency is not really forthcoming. India is

planning to set up two or three of their own proton facilities. Ironically, most of the country lacks basic facilities for radiation therapy. The use of erlotinib is deemed to be a standard of care in a pancreatic cancer when the survival benefit is not more than a week. Regorafenib was recently approved for use in metastatic colorectal cancer. The study showed a median survival of 6.4 months with regorafenib versus 5 months was with placebo. This improvement in survival by 1.4 months was statically significant. The additional 1.4 months in a small percentage of patients comes at a huge cost.

These miracle drugs and treatments become a straw to clutch for patients who are fighting an advanced disease. Obviously, not everyone can access or afford these treatments. The disparity of resources inevitably excludes most of low-worth individuals. Those who are excluded are judged as less valuable by the society and market forces. Various agencies such as NICE and NCCN are coming up with ready recliners and calculators to assess the cost-to-effect benefits of various treatment options under different conditions. These efforts should lead to weeding out ineffective and expensive treatment options. This can help re-allocate the resources to most cost-effective strategies. It is time to critically appraise the evidence, assign value, and reign in market forces. It is time to restore dignity to human life even in the face of economic and social disparity. It is time to keep snake oil merchants away from health-care institutions. Human worth is a social construct. It is a value assigned to an individual by others. It is distinctly different from an idea of selfworth. The effort should be not only to consider all equally worthy, but to be so in the face of a challenge. This Cardinal paradigm shift in health-care management is, what is required now.

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Nagraj Huilgol

Department of
Radiation Oncology,
Nanavati Super
Speciality Hospital,
Mumbai, Maharashtra,
India

For correspondence:

Dr. Nagraj Huilgol,
Department of
Radiation Oncology,
Nanavati Super
Speciality Hospital,
Mumbai - 400 056,
Maharashtra, India.
E-mail: nagrajhuilgol@gmail.com

Access this article online

Website: www.cancerjournal.net

DOI: 10.4103/0973-1482.180080

PMID: 27072201

Quick Response Code:



Cite this article as: Huilgol N. Human worth in the era of market forces. J Can Res Ther 2016;12:1.