

# Special Issue

## May (Week 1)

### Contents

All about Charak Shapath .....	2
All about the impact of Russian oil sanctions in Europe? .....	5
All about Impact of Russia-Ukraine war on Europe's demography.....	6





## **All about Charak Shapath**

(Source: [Indian Express](#) )

**Context:** *The Dean of Madurai Medical College **was removed** after a batch of new students were administered an oath in Sanskrit attributed to the ancient Indian sage Maharshi Charaka instead of the traditional Hippocratic Oath in English. Following the event, which was attended by Tamil Nadu Finance Minister Palanivel Thiaga Rajan and Commercial Taxes Minister P Moorthy, the Dean, Dr A Rathinavel, was placed on the “waiting list” with no information on his next posting.*

### **What is the controversy over the Charak Shapath?**

- The controversy began after the National Medical Commission (NMC), the regulator for medical education and practices (which replaced the Medical Council of India in 2020) **suggested** to medical colleges on February 7 that the Hippocratic Oath should be replaced by a “Charak Shapath”.
- While some medical practitioners welcomed the proposal, the Indian Medical Association (IMA), the national representative platform of doctors of modern medicine, took up the matter with Health Minister Mansukh Mandaviya.
- In a letter published in IMA News, the IMA’s official publication, the association’s national president Dr Sahajanand Prasad Singh said that at an “interactive meeting” with an IMA delegation on February 21, Mandaviya had “assured that Charak Shapath will be optional and will not be forced to replace the Hippocratic Oath”.
- Subsequently, on March 29, replying to an unstarred question by several MPs on “whether Government intends to replace the Hippocratic Oath with the Charak Shapath”, “whether it is a fact that the National Medical Commission has proposed replacing the Hippocratic Oath with Charak Shapath”, and “whether Government has met with the representatives of the Indian Medical Association (IMA) to discuss their opposition to this proposal”, Minister of State for Health and Family Welfare Dr Bharati Pravin Pawar told Rajya Sabha: “As informed by the National Medical Commission (NMC), there is no proposal of replacement of Hippocratic Oath with Charak Shapath.”
- Days later, however, on March 31, the NMC issued a circular on “Implementation of new Competency Based Medical Education for Undergraduate Course Curriculum”, in which it said: “Modified ‘Maharshi Charak Shapath’ is recommended when a candidate is introduced to medical education”.
- Undergraduates at the country’s premier health institute, AIIMS, have been taking the Charak Oath during their annual convocation for several years now.
- Dr M C Misra, former director of AIIMS, had told The Indian Express earlier that the Charak Shapath was already part of the annual convocation when he took charge in the post in 2013.
- The AIIMS Charak Shapath is: “Not for the self; Not for the fulfilment of any worldly material desire or gain, but solely for the good of suffering humanity, I will treat my patient and excel well.”

### **What is the Hippocratic Oath that the Charak Shapath would replace?**

- The Hippocratic Oath is attributed to Hippocrates of the island of Kos, a Greek physician of the classical period (4th-5th centuries BC), broadly corresponding to the period from the death of the Buddha (486 BC) to the rise of the Mauryas (321 BC) in India.
- Among the great contemporaries of Hippocrates, the so-called “father of modern medicine”, were the Athenian philosopher Plato and his teacher Socrates, and Plato’s student and a tutor of Alexander the Great, Aristotle.
- The Oath is a charter of ethical principles that physicians over the ages have sworn to uphold in the practice of their profession. The earliest available fragments of what is understood to be the original oath date back to the late 3rd century AD, and a millennium-old version is kept in the library of the Holy See.



- To Hippocrates is attributed a collection of 70 books on medicine called ‘The Corpus Hippocraticum’; most scholars, however, agree that the Hippocratic Oath itself may not have been the work of the individual identified as the historical Hippocrates.

### **What does the Hippocratic Oath say?**

- Two translations of the pagan oath from the Greek original, by WHS Jones (‘The Doctor’s Oath’, Cambridge University Press, 1924) and Ludwig Edelstein (‘The Hippocratic Oath: Text, Translation, and Interpretation’, Johns Hopkins Press, 1943), are popular with scholars. According to extracts published in the BMJ, October 1998, the Oath says:
  - “I will use treatment to help the sick according to my ability and judgment, but I will never use it to injure or wrong them.
  - I will not give poison to anyone though asked to do so, nor will I suggest such a plan. Similarly I will not give a pessary to a woman to cause abortion. But in purity and in holiness I will guard my life and my art.
  - I will not use the knife either on sufferers from stone, but I will give place to such as are craftsmen therein.
  - Into whatsoever houses I enter, I will do so to help the sick, keeping myself free from all intentional wrongdoing and harm, especially from fornication with woman or man, bond or free.
  - Whatsoever in the course of practice I see or hear (or even outside my practice in social intercourse) that ought never to be published abroad, I will not divulge, but consider such things to be holy secrets.”

### **So is there one universally accepted version of the physician’s Oath?**

- There isn’t. Modern codes of medical ethics such as those formulated by the American Medical Association (AMA) and the British Medical Association (BMA) are broadly rooted in the Hippocratic Oath, but they draw heavily from other sources as well.
- Many medical schools around the world hold a ceremony in which graduating doctors swear to a broad charter of ethics that are sometimes customised by individual institutions.
- A version of the ‘physician’s code of ethics’ is commonly displayed in hospitals or clinics in most places, including India.
- The AMA describes its Code of Medical Ethics as a living document that has evolved as medicine and society have changed. The AMA’s Code was adopted in 1847, and underwent updates in 1903, 1949, 1957, and 2008.
- The World Medical Association (WMA) adopted an international code of medical ethics in 1949, which was amended in 1968, 1983, and 2006. In May last year, the WMA published a proposed modernised version of the international code, “outlining physicians’ duties towards their patients, other physicians, health professionals and society as a whole”, according to the WMA website.
- According to the WMA, some of the duties of physicians in general are to:
  - always exercise his/her independent professional judgment and maintain the highest standards of professional conduct;
  - respect a competent patient’s right to accept or refuse treatment;
  - not allow his/her judgment to be influenced by personal profit or unfair discrimination;
  - be dedicated to providing competent medical service in full professional and moral independence, with compassion and respect for human dignity;
  - deal honestly with patients and colleagues, and report to the appropriate authorities those physicians who practice unethically or incompetently or who engage in fraud or deception;
  - certify only that which he/she has personally verified;
  - respect the local and national codes of ethics.



### **Who was Charaka and what is the Charak Samhita?**

- Like several other sages mentioned in the literature of ancient India, the historicity of Charaka is uncertain. The compendium of medicine that carries his name is unlikely to have been the work of a single individual, and not all of it is likely to have been written at the same time.
- The Charak Samhita is a medical pharmacopoeia and collection of commentaries and discussions on medical practices that is historically dated to the 1st-2nd centuries AD.
- Along with the compendium of Susruta (c. 4th century AD), which is about surgery, the Charak Samhita is considered the foundational text of ancient Indian medicine, which was an evolved system of understanding and treating disease that was in several ways ahead of the Greeks.
- The ancient Indian interest in physiology is understood to have drawn from yoga and mysticism, and to have been enriched by the growth and spread of Buddhism to new lands, the arrival of the first Christian missionaries, and the contact with Hellenic practitioners of medicine.

### **And what are the medical ethics of the sage Charaka?**

- The physician was an important and respected member of ancient Indian society, and medical practice followed rules of professional conduct and ethical principles.
- A L Basham ('The Wonder That Was India', 1954) quotes from a part of the sermon that Charaka instructs a physician to preach to his pupils at a ceremony at the end of their apprenticeship.
- "...You must strive with all your soul for the health of the sick. You must not betray your patients, even at the cost of your own life... You must not get drunk, or commit evil, or have evil companions... You must be pleasant of speech...and thoughtful, always striving to improve your knowledge.
- "When you go to the home of a patient you should direct your words, mind, intellect, and senses nowhere but to your patient and his treatment... Nothing that happens in the house of the sick man must be told outside, nor must the patient's condition be told to anyone who might do harm by that knowledge to the patient or to another."
- This ethical code of Charaka is universal, and remains just as relevant and applicable today.

### **What else does the Charak Samhita say?**

- The Charak Samhita underlines the importance of the physician praying, "every day on rising and going to bed for the welfare of all beings", (Basham) and that of debate and discussion among the learned.
- A passage in the Charak Samhita, quoted in Wendy Doniger ('On Hinduism', 'The Hindus') describes a debate among sages who were invited by a king to determine the origin of disease. The sages put forward their theories, which were in several cases the essence of major philosophical and medical traditions of ancient India.
- One said that the individual is born from the soul, so disease too must come from the soul; a second said that the mind, when overwhelmed by energy and torpor, gives rise to both the body and the pathological changes in it; a third said that creatures and disease both come from rasa; a fourth argued that since the individual is created from the six material elements of earth, water, fire, wind, space, and soul, disease too is born of these same elements; a fifth submitted that just as an individual must have a father and mother, so too must disease; but the sixth rebutted that while a blind person isn't necessarily born of another blind person, all creatures are the product of karma, and so is disease.
- As the sages argued, one of them advised the rest not to take rigid positions — typical, Doniger says, of the way all of the shastras strive to be open minded and inclusive. "Not until you shake off the torpor of factionalism from what you want to know will true knowledge emerge."



## **All about the impact of Russian oil sanctions in Europe?**

(Source: [Indian Express](#) )

**Context:** *The European Union has proposed a phased embargo of Russian oil, tightening its sanctions on Moscow for its invasion of Ukraine.*

### **What does the European Union currently import?**

- The European Union imported 2.2 million barrels per day (bpd) of crude oil and 1.2 million bpd refined oil products before the war in Ukraine, according to the International Energy Agency (IEA).
- **Cars:**
  - Filling up your car will probably get more expensive. Europe imports not only crude oil from Russia but also refined oil products, such as diesel to fuel industrial and passenger vehicles. Importing diesel from further afield than Russia will mean increased freight costs and thus higher prices at filling stations. In Germany, for example, 74% of diesel imports before the war came from Russia, data from consultancy FGE Energy shows.
- **Refineries depending on Russian oil:**
  - Russian oil makes up a fifth of oil refined in Europe, according to the IEA.
  - Some refineries producing fuel from gasoline to jet fuel such as Germany's PCK Schwedt and Leuna as well as refineries in the Czech Republic, Hungary, Slovakia and Poland get fed Russian crude oil via the Druzhba – or “Friendship” – pipeline.
  - Supplies along Druzhba have been fluctuating sharply in recent years with deliveries running as high as 1.5 million bpd while declining in recent months including February to around 0.8 million bpd.
  - Poland can switch to seaborne supplies from places like Saudi Arabia or Norway via the Gdansk port in the Baltic Sea.
  - PCK Schwedt, which supplies cars and airports in Berlin and the region, and Leuna near Leipzig could get some oil from the German Baltic sea port of Rostock – much less of a crude oil hub than Gdansk – but not enough for them to run at full capacity.
  - Poland, itself trying to replace all Russian crude in its refineries, could route some of the oil arriving in Gdansk to these two German refineries, but the details have not been worked out yet.
  - Changing these supply routes will most likely mean higher feedstock prices for two of Germany's biggest refineries, feeding into higher prices for end consumers.
  - For all the refineries in landlocked countries, making up for zero oil via Druzhba will be a mammoth task. It is likely to involve more expensive and less efficient transport via trucks, railways, rivers or the future extension of other pipelines such as TAL going from the Mediterranean via Austria to Germany. Such an extension still needs approval from southern German authorities.
  - Slovakia, Bulgaria and the Czech Republic are seeking exemptions from an imminent EU ban on Russian oil to sort such alternatives, while Hungary does not support the plans out of fear for its energy security.

### **Can they replace Russian oil with any other oil?**

- Refineries are typically set up to run on a specific type of crude oil, such as Russia's prime export grade Urals.
- Other types of crude from Norway, the Middle East, the United States or West Africa can be blended or the refineries revamped, but this can change the yield of a refinery and cost more money in addition to higher freight costs.
- Traditional consumers of Russian oil will also now have to compete not only with each other for alternative oil imports but also with existing customers in Asia.





### Reduced refining runs?

- An oil refinery cannot simply be switched off as a restart is expensive and complex.
- Globally, refining capacity is shrinking as the world tries to reduce its dependence on oil-based fuels. Morgan Stanley estimates that capacity has shrunk by as much as 2.7 million bpd since the onset of the coronavirus pandemic.
- With the re-emergence of economic growth as lockdowns come to an end, refining margins have skyrocketed, meaning refineries will try to squeeze as much fuel as possible into the market.
- Refineries that have the toughest supply issues, however, are likely to see lower margins because their crude costs will rise, so operators may slow processing.
- Countries and refiners typically also have storage tanks which they can tap in case of short-term disruptions.
- EU countries have until the end of the year to prepare for the disruption and would likely fill storage in areas near refineries that might struggle.
- It would cause more severe disruptions, if Russia cuts supplies first.
- Germany has warned of a recession without Russian oil and gas.

### All about Impact of Russia-Ukraine war on Europe's demography

**Context:** Things began to change radically since **Vladimir Putin decided to invade Ukraine**, with over 5 million people taking shelter in nearby countries. In the weeks since the start of the invasion, all of Ukraine's borders, except those with **Russia and Belarus**, have remained open. Most refugees used one of the 31 border checkpoints in western Ukraine and entered Poland, Slovakia, Hungary, Romania, and Moldova. We take a look at countries which have taken in the maximum number of refugees and how that might have an impact on the demography of the continent.

### Where are the refugees going?

- Some 5.6 million people — the bulk of them women and children — have fled Ukraine since the war began, the vast majority to countries bordering it on the west. **Poland**, which until recently exported more people than it received, has taken in more than half of these.
- The population of Warsaw expanded by 17 per cent in weeks, according to figures put out by the United Nations High Commissioner for Refugees (UNHCR). Hungary, whose population had shrunk from 10.7 million in the mid-1980s to 9.8 million in 2020, has received more than 500,000 Ukrainians.
- For countries such as Poland, the Czech Republic, Slovakia, Hungary and possibly the Baltic states, the crisis is a moment for them to shift from becoming immigration countries rather than outmigration countries.
- Countries to the west of Ukraine look like demographic gainers, although the influx is putting a strain on some, especially Moldova, which has received more than 400,000 refugees — equivalent to 15 per cent of its population. For Poland, where around 1.4 million Ukrainians lived and worked in 2020, the **arrival of millions** more turns the demographic clock back to before the second world war, when the country had a large Ukrainian minority.
- This comes at a time when the ruling Law and Justice Party has been keen to increase the number of Poles. In 2016, it sought to raise the birth rate by giving families 500 zlotys (\$115) a month for every child after the first.
- The effect was mainly to encourage women already planning to have children to have them earlier lest the benefit is withdrawn. The number of births rose in the scheme's first two years, but dropped in 2020 to the lowest level since 2003. The Ukraine war has, however, added more than a million children to Poland's population temporarily.



- Other European countries, especially those with a large Ukrainian diaspora, stand to gain. Around 1.5 million refugees have moved to countries farther west, including Germany, Italy and France, according to an estimate by Gillian Triggs of the United Nations refugee agency.
- Before the war, about 250,000 Ukrainians lived and worked in Italy, where the median age is four years higher than in Europe overall and the fertility rate is among the lowest. In the first three months of this year, Austria's population increased by half a percentage point to more than 9 million — 83% of that growth was from Ukrainian immigration.



### How does it look for Russia and Ukraine?

- It's a demographic disaster, to say the least, for Ukraine which was already fighting a shrink in population thanks to emigration and fewer births. Since February more than a quarter of the population has been forced to move, including 7.7m people displaced within the country.
- With its birth rate already falling, Russia, too, is bound to suffer. Educated Russians have left the country since the invasion as they believe that the current regime has very little to offer. Putin has been splashing out cash to encourage women to have babies.
- In 2020, he extended a one-time “maternity capital” payment worth \$7,600 to families when they have their first baby. Before this, it was available only to those who already had a child.
- Putin hoped to boost the fertility rate from 1.5 to 1.7, but the tumult caused by the war will probably push it in the opposite direction.

### Is the demographic change long-lasting?

- Most of the refugees who have fled Ukraine in the face of the war are women and children as men in the age bracket of 18 to 60 have been compelled by the government to remain in the country. Thus, if the war is short, women and children will probably return quickly to Ukraine to reunite with husbands and fathers.
- However, all of that depends upon how long the war lasts, and on how much damage is inflicted on their home country.
- During the Kosovo war of 1999, when Nato bombed Yugoslavia to prevent the brutalisation of ethnic Albanians who make up Kosovo's majority, hundreds of thousands fled, or were forcibly moved, to neighbouring Albania and Macedonia.
- But it lasted 78 days, after which the Kosovars quickly returned. By contrast, during the Bosnian war, which lasted from 1992 to 1995, around 700,000 refugees fled to western Europe and beyond, and far fewer returned. As such, Bosnia's population now stands at around 3.2 million, down from 4 million before the war.



- If the war drags on, and the Ukrainian economy reaches a point of no return, it would be just a matter of time before the men of the country head westwards to join their wives and children.
- Added to that, if the governments of the countries they move to provide jobs to the newcomers, the migration might become long-lasting.
- Ukraine, thus, is on the brink of where the Balkan states were during the one-year-long war which robbed some of the brightest and best of a generation.

