

**From:** Roslyn Mackenzie  
**To:** [medboardconsultation](#)  
**Subject:** Concerns regarding revision to the Medical Code of Conduct  
**Date:** Saturday, 18 August 2018 3:24:32 AM

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To the Executive Director,

I am writing in regards the proposed changes in the draft of Good Medical Practice. I have concerns about the section on professionalism (section 2.1) in regards to freedom of speech: "*If making public comment, you should acknowledge the profession's generally accepted views and indicate when your personal opinion differs. Behaviour which could undermine community trust in the profession is at odds with good medical practice and may be considered unprofessional.*"

I think the inclusion of this reference that 'behaviour that is outside the generally accepted views of the profession' creates a dangerous potential that if a doctor were to express opinions outside the status quo that they might be made a target. Patients then may become suspicious and complain about the doctor which draws the attention of the medical board and could even lead to de-registration. This therefore has the potential to limit a doctor's freedom of speech.

The status quo of medical practice is often one of controversy and uncertainty as we try to improve 'best practice', so it is artificial to try to draw a distinction of upholding a single mainstream view. This directive, in restricting freedom of speech, doesn't recognise that the medical status quo is in a state of flux and that controversy is normal. Similarly it doesn't reflect the reality of how medical practice advances but rather seems to be focused on a social objective to control speech. There may be opinions that the directive is seeking to forward evidence based medicine and standardise medical practice, but in reality medical practice and EBM is dependant on the individual circumstances of the patient. So trying to restrict doctors' speech and practice of medicine to status quo is artificial and doesn't reflect reality. It's trying to apply a false status quo which can potentially be used in a damaging way against an individual doctor based on false accusations.

*The art of the practice of medicine lies not just in the application of 'current best practice' but encompasses all aspects of communication and the ability to relate our patients, of which our individual make-up and style of communication and beliefs is a key component. Furthermore, many advances in history have been made by people being able to 'think outside the box' and question previously accepted wisdom, so to take this option away from doctors in only permitting prescribed views to be voiced limits the advance of medicine.*

*For example, much of the information and research circulating about the ketogenic /low carb high fat diet and benefits on health, particularly cardiovascular diseases, doesn't align with conventionally accepted medical wisdom, yet the new evidence and results from these studies and interventions cannot be ignored.*

*People need to be able to speak out and explore new ideas and question conventional wisdom for the good of society and the advancement of medicine.*

*So I would ask that you reconsider this section of the medical code of conduct.*

*With concern,*

*Dr Roslyn Mackenzie*

*(I am sending this from overseas so I'm still within the time frame where I am but it will be the 17th already in Australia)*