PULCINELLA SECRETS

Pulcinella is one of the most ancient comic characters of the Commedia dell’Arte.¹ He is the stereotypical lazy servant, insolent and chauvinist, sometimes stupid, sometimes clever, always penniless, and absolutely unable to keep any secret. In a typical Commedia dell’Arte plot, the master reveals a secret to Pulcinella, who is under oath never to disclose it. Needless to say, after swearing that he will never divulge it, Pulcinella soon acts in a very different way, telling the secret to everybody he meets. Yet each time Pulcinella discloses the secret, he asks for total confidentiality, pretending that no one else knows it. Sooner or later all characters on the stage know the secret but none of them know that all the others know it. Eventually each one behaves as though she were the sole repository of the secret while the only secret is that there is no secret at all. I often think of the Pulcinella’s secret nowadays, when someone evokes the ‘medical secret’. Since the earliest codes of medical ethics, the duty of medical secrecy – the doctor’s obligation not to disclose confidences revealed by the patient or any other personal details known in his professional capacity – has been considered an essential ethical principle and a legal obligation of medical practice, as the assurance of confidentiality and respect for privacy allow patients to disclose personal information necessary to medical care. Medical students are regularly trained in confidentiality, and respect for medical secrecy is mandated by all medical professional codes. To be sure, medical secrecy is often considered a prima facie obligation, which can be overcome when the goals achieved by disclosure are more relevant than the goals achieved by confidentiality (e.g. prophylaxis of communicable diseases). Yet there is a general consensus about the normative value of medical confidentiality, which can easily be justified by sound deontological, consequentialist and utilitarian arguments.

The time when keepieg drawers closed and not talking in hospital elevators were the golden rules of medical confidentiality is long gone. The traditional account of medical confidentiality was centered on the patient-physician relationship. Today hundreds of individuals

¹ Commedia dell’Arte was a popular form of theatre based on stock comic characters. Originating in Italy during the Renaissance, the Commedia dell’Arte gained great popularity all over Europe. Pulcinella, whose Italian name means little chicken, is known as Polichinelle in France, Mr. Punch in England, Hanswurst in Germany, Toneelgek in Holland, Petrushka in Russia, and Karagoz in Turkey.
noticed – ‘a disclosure regulation’. Today in most western
countries health information may be disclosed for public
health purposes, for law enforcement, for national secu-
rity and intelligence activities, and, in practice, in case of
any emergency declared by relevant public authorities.
As a consequence access control systems to electronic
medical data are designed in a way that can be always
trespassed; they are doors that can be easily unlocked by
a number of public and private actors without patients’
consent and even their awareness.

‘If your data is online, it is not private’, states security
technologist Bruce Schneier. In the post Wikileaks era,
most – if not all – secrets are Pulcinella’s secrets, medical
secrets do not make an exception. Yet it would be mis-
leading to conclude that Pulcinella’s secrets are just false
secrets, a parody of confidentiality. On the contrary, Pul-
cinella teaches us that what makes a secret relevant it is
not its being truly secret, but the way in which it affects
and shapes the social action. What really counts is not
secrecy per se, but who controls information flows and
owns data. Are bioethicists ready to accept this challenge
instead of insisting on defending the empty fortress of
‘medical confidentiality’?

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