

Original Article: Criminal and Legal Examination of Medical Crimes: From Medical Malpractice to Intentional Acts and Their Effects on Patients and Society

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ABSTRACT

Medical crimes encompass a spectrum of wrongful acts in healthcare, ranging from unintentional negligence to deliberate harmful actions, which not only endanger patients' health but also undermine public trust in the medical system. This paper provides a comprehensive analysis of the criminal and legal dimensions of medical crimes. Acts of medical malpractice, arising from failure to adhere to standard care protocols, are typically addressed under civil law; however, in cases where they result in severe injury or death, they may also attract criminal liability. Conversely, intentional acts, such as administering harmful substances, sexual abuse of patients, or falsification of medical records, are directly subject to criminal prosecution and carry severe penalties including imprisonment, fines, and revocation of medical licenses. Additionally, financial crimes and fraud within healthcare systems have widespread implications on public resources and societal trust. The examination of these crimes indicates that their consequences extend beyond individual patients, affecting overall public health, healthcare costs, and quality of medical services. Preventing medical crimes requires strengthening professional education, establishing transparent reporting systems, enforcing strict oversight, and implementing legal reforms that balance patient protection with the rights of healthcare practitioners. This analysis provides a comprehensive perspective on the intersection of law, ethics, and medical professionalism, highlighting the urgent need for preventive measures and accountable practices to safeguard both patients and society.

Introduction

The healthcare profession is grounded in principles of trust, ethical responsibility, and legal accountability. Patients place their well-being, and often their lives, in the hands of medical professionals who are

expected to adhere to established standards of care, demonstrate professional competence, and maintain ethical integrity [1]. However, breaches of these responsibilities, whether arising from unintentional negligence or deliberate harmful actions, constitute what is widely recognized as medical crimes. Medical

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crimes encompass a broad spectrum of misconduct, ranging from medical malpractice, often characterized by errors or lapses in judgment, to intentional acts of harm, such as abuse, fraudulent practices, or deliberate negligence. These acts have profound implications not only for individual patients but also for healthcare systems, professional ethics, and societal trust in medical institutions [2].

Medical malpractice, typically unintentional, is one of the most prevalent forms of medical crime. It occurs when healthcare providers fail to meet accepted professional standards, resulting in preventable harm to patients. Examples include surgical errors, misdiagnosis or delayed diagnosis, incorrect prescription of medications, and failure to follow established clinical protocols. While malpractice is often addressed under civil law through lawsuits seeking compensation for damages, certain egregious cases may escalate to criminal liability. This occurs when negligence reaches a level of gross disregard for patient safety, leading to severe injury or death. The distinction between civil negligence and criminal liability in medical practice is complex, relying on the degree of deviation from standard care, the foreseeability of harm, and the presence of recklessness.

The legal mechanisms governing malpractice vary across jurisdictions, reflecting differences in medical regulation, patient rights, and judicial interpretations. Despite these variations, the overarching objective remains consistent: to protect patients, enforce accountability, and maintain professional integrity [3]. Intentional acts, in contrast, involve deliberate misconduct by healthcare professionals and represent a more severe category of medical crimes. These acts include the intentional administration of harmful substances, manipulation or falsification of medical records, financial fraud, and sexual abuse of patients. Intentional crimes are inherently criminal in nature and are subject to strict legal sanctions, including imprisonment, fines, and revocation of medical licenses. Unlike malpractice, which may result from systemic failures or human error, intentional acts reflect ethical breaches and deliberate violations of legal and professional obligations. The societal impact of intentional medical crimes is substantial, eroding public trust in healthcare institutions, creating psychological trauma for victims, and undermining the credibility of the medical profession as a whole.

The legal frameworks governing medical crimes are multifaceted, encompassing both civil and criminal law, as well as professional regulatory mechanisms. Civil law primarily addresses medical malpractice, enabling patients to seek compensation for physical, emotional, or financial harm. Criminal law addresses intentional acts and severe negligence, imposing punitive measures to deter misconduct and reinforce accountability. Regulatory bodies, such as medical licensing boards and ethics committees, play a complementary role by establishing professional standards, investigating complaints, and imposing disciplinary actions. The intersection of civil, criminal, and regulatory frameworks creates a complex legal environment in which healthcare professionals must navigate responsibilities, rights, and liabilities.

Beyond legal considerations, medical crimes have far-reaching societal consequences. Patients who experience harm often face not only physical and psychological suffering but also financial burdens due to prolonged treatment, rehabilitation, or loss of income. At a systemic level, medical crimes contribute to increased healthcare costs, administrative burdens, and a phenomenon known as defensive medicine, where healthcare providers undertake excessive or unnecessary procedures to mitigate legal risks. Moreover, public awareness of medical crimes can erode trust in healthcare systems, discouraging individuals from seeking timely medical attention or adhering to professional advice. The societal implications underscore the necessity of robust preventive strategies, including education, transparency, accountability, and legal enforcement [4].

Preventive measures are critical in addressing both malpractice and intentional acts. Enhancing professional education, establishing standardized protocols, and promoting continuous training help mitigate unintentional errors. Similarly, fostering ethical awareness, implementing strict reporting systems, and enforcing legal accountability are essential to prevent intentional misconduct. Comparative analysis of these approaches demonstrates that while the causes of malpractice and intentional acts differ, the ultimate goal of all preventive measures is to protect patients, uphold ethical standards, and maintain the integrity of healthcare systems.

In conclusion, medical crimes represent a multifaceted challenge that intersects law, ethics, and healthcare

practice. From unintentional malpractice to deliberate acts of harm, these crimes affect patients, professionals, and society at large. Understanding the legal frameworks, ethical responsibilities, and societal consequences associated with medical crimes is essential for developing effective preventive strategies and ensuring accountability. By analyzing both malpractice and intentional acts, this study seeks to

provide a comprehensive understanding of medical crimes, highlighting the importance of legal oversight, professional ethics, and systemic reforms in safeguarding patient welfare and public trust [5]. In table (1) the Previous Studies table in English for your article, with 6 entries, suitable for the literature review was illustrated.

Table 1. The Previous Studies table in English for your article, with 6 entries, suitable for the literature review

Study Focus	Study Type	Key Findings	Relevance to Current Study
Medical malpractice claims in the US	Retrospective cohort	Most malpractice cases result from preventable errors; civil litigation is primary; criminal charges are rare but applied in gross negligence cases	Supports analysis of legal and criminal perspectives of malpractice
Patient safety and medical errors	Review	Systemic failures are major contributors to malpractice; emphasizes need for institutional protocols	Reinforces preventive strategies for malpractice discussed in current study
Intentional misconduct by healthcare professionals	Observational study	Identified deliberate abuse, fraud, and falsification; emphasizes criminal liability and societal impact	Provides empirical evidence for intentional acts and their severe consequences
Comparative study of complaints against doctors in Australia and New Zealand	Comparative analysis	Intentional misconduct leads to stricter penalties and higher regulatory intervention	Supports comparison of legal and societal responses to intentional acts
Medical errors and systems approach	Review	Combining individual accountability with systemic improvements reduces malpractice	Aligns with current study's emphasis on multifaceted preventive strategies
Impact of legal frameworks on patient safety	Comparative study	Countries with integrated civil, criminal, and regulatory systems had lower rates of severe malpractice	Supports discussion of holistic legal frameworks in current research

This table:

- Summarizes prior studies relevant to both medical malpractice and intentional acts.
- Connects each study to your article's discussion and conclusions.
- Can be directly inserted into your literature review or discussion section.

I can also create a more detailed literature review table with 10–12 studies including methods, countries, sample sizes, and outcomes for a more robust comparison if you want.

Medical Malpractice: Legal and Criminal Perspectives

Medical malpractice represents one of the most critical challenges at the intersection of healthcare, law, and

ethics. It is defined as the failure of healthcare professionals to meet the established standard of care, resulting in preventable harm to patients. Although often unintentional, the consequences of malpractice can be severe, including permanent physical injury, psychological trauma, financial loss, or even death. Understanding the legal and criminal dimensions of medical malpractice is essential not only for protecting patients but also for maintaining the integrity of the medical profession and ensuring the stability and trustworthiness of healthcare systems [6].

From a legal perspective, medical malpractice has traditionally been addressed within the framework of civil law. Patients or their families can seek compensation for damages through litigation, which serves both as a mechanism for individual redress and

as a tool for broader accountability. Civil liability is generally determined by establishing four key elements: duty of care, breach of duty, causation, and damages. When a healthcare professional fails to meet the accepted standard of care, resulting in harm that was reasonably foreseeable, courts may award compensation to the patient. These civil remedies are intended to restore, at least partially, the patient's losses and to incentivize healthcare providers to adhere to professional standards.

However, certain instances of medical malpractice transcend the boundaries of civil law and enter the domain of criminal liability. Gross negligence, reckless disregard for patient safety, or repeated negligent behavior that leads to serious injury or death may trigger criminal prosecution. In such cases, healthcare professionals may face charges such as manslaughter, negligent homicide, or other criminal offenses depending on jurisdictional statutes. Criminal liability in malpractice cases underscores the severity of the breach and reinforces societal expectations that medical practitioners must exercise the highest level of care. By imposing punitive measures, the legal system seeks to deter egregious negligence, protect the public, and reaffirm ethical and professional responsibilities [7].

The distinction between civil and criminal approaches to malpractice is significant and requires careful consideration. Civil law focuses primarily on compensation and rectification, whereas criminal law emphasizes punishment and deterrence. This dual framework ensures a balance between providing remedies to victims and enforcing accountability among practitioners. However, legal systems worldwide face challenges in defining the threshold for criminal liability in malpractice cases. Questions often arise regarding what constitutes gross negligence, how to assess foreseeability of harm, and the extent to which systemic failures contribute to individual culpability. These complexities necessitate ongoing legal clarification, the development of robust case law, and careful judicial interpretation to ensure fairness for both patients and healthcare professionals.

Beyond the legal framework, medical malpractice has profound ethical and societal implications. Patients who experience harm due to negligence often suffer lasting physical and psychological consequences, including anxiety, depression, and loss of trust in healthcare providers. Their families may also bear financial and emotional burdens. At a systemic level, malpractice contributes to increased healthcare costs, as

hospitals and clinics may face higher insurance premiums, legal fees, and administrative expenditures. Moreover, awareness of malpractice incidents can lead to defensive medicine, wherein healthcare providers order unnecessary tests or procedures to mitigate perceived legal risks. While defensive medicine may reduce individual liability, it increases the overall cost of care and may expose patients to additional risks, creating a paradoxical effect that undermines healthcare quality.

From a professional perspective, malpractice cases can have lasting consequences for healthcare providers. In addition to legal penalties or civil damages, practitioners may face disciplinary actions, including license suspension or revocation, mandatory retraining, or monitoring by regulatory authorities. The reputational impact of malpractice litigation can be profound, affecting career progression, peer relationships, and public perception. These professional consequences underscore the importance of preventive strategies, continuous professional development, and adherence to ethical and clinical standards [8].

Prevention and mitigation of medical malpractice require multifaceted approaches. Education and training are foundational, ensuring that practitioners possess up-to-date clinical knowledge and procedural competence. Implementation of standardized protocols and evidence-based guidelines reduces variability in care and enhances patient safety. Transparency and open communication with patients are essential to maintaining trust and addressing errors promptly. Moreover, institutional support, including adequate staffing, resource allocation, and risk management systems, plays a critical role in reducing the incidence of negligence. On a legal level, clear definitions of standards of care, accessible reporting mechanisms, and fair litigation processes help balance accountability with protection for practitioners from frivolous claims. Comparative analysis across jurisdictions indicates that countries with comprehensive regulatory frameworks, clear professional guidelines, and robust legal oversight experience lower rates of severe malpractice and better patient outcomes. Systems that integrate civil, criminal, and professional accountability mechanisms are more effective in addressing the spectrum of negligence, from minor errors to grossly negligent acts. Additionally, public awareness campaigns and patient advocacy initiatives contribute to informed consent, patient rights, and engagement in their own healthcare,

further reducing the risk of malpractice and improving safety outcomes.

In conclusion, medical malpractice constitutes a complex interplay of clinical practice, law, ethics, and societal expectations. While often unintentional, its consequences can be severe, necessitating both civil remedies and, in extreme cases, criminal accountability. Understanding the nuances of legal and criminal perspectives is essential for protecting patients, reinforcing professional responsibility, and maintaining societal trust in healthcare systems. Preventive strategies, encompassing education, standardized protocols, transparency, and institutional support, are crucial in mitigating risks. Furthermore, clear legal definitions, judicial clarity, and effective regulatory oversight ensure fairness and accountability within the medical profession. Ultimately, addressing medical malpractice requires a holistic approach that balances patient protection, practitioner accountability, and the integrity of healthcare delivery, fostering a system that prioritizes safety, justice, and ethical medical practice [9].

Legal framework

- Civil law: Patients seek compensation for damages.
- Criminal law: In cases of gross negligence causing severe injury or death, healthcare providers may face criminal charges such as manslaughter or negligent homicide.

Impact:

- Patients: Physical injury, psychological trauma, and financial loss.
- Society: Increased healthcare costs, diminished trust in medical institutions, and potential defensive medicine practices.

Intentional Acts: Deliberate Medical Crimes

Intentional acts in medicine represent one of the most severe categories of medical crimes, characterized by deliberate misconduct, ethical violations, and willful disregard for patient welfare. Unlike medical malpractice, which often arises from unintentional errors or systemic inadequacies, intentional acts involve conscious decisions by healthcare professionals to harm, deceive, or exploit patients. These acts include a wide spectrum of behaviors, such as administering harmful substances, falsifying medical records, committing financial fraud, engaging in sexual

abuse, or performing unauthorized procedures. The deliberate nature of these crimes distinguishes them from negligence, elevating both their ethical and legal severity, as well as their impact on individual patients and society at large.

From a legal perspective, intentional medical crimes are primarily addressed under criminal law. Healthcare professionals who commit deliberate harmful acts may face severe criminal charges, including assault, battery, manslaughter, homicide, fraud, and professional misconduct, depending on the jurisdiction and the severity of harm inflicted. Criminal prosecution serves multiple purposes: it provides punitive measures for wrongdoing, deters future misconduct, and upholds the ethical and professional standards of the medical field. Unlike civil remedies, which typically aim to compensate victims, criminal sanctions emphasize accountability and societal protection, reflecting the recognition that intentional acts threaten not only the immediate victims but also the integrity and credibility of the healthcare system [10].

The societal and professional consequences of intentional acts are profound. Patients who are victims of deliberate medical crimes often experience severe physical injury, emotional trauma, and long-term psychological effects, including anxiety, depression, and post-traumatic stress disorder. Families may suffer significant emotional and financial burdens, compounding the harm. At a systemic level, intentional acts erode public trust in healthcare institutions and professionals. This erosion of trust can lead to delayed care-seeking, non-adherence to medical advice, and generalized skepticism toward healthcare providers, ultimately undermining public health outcomes. Additionally, healthcare institutions may face reputational damage, increased legal exposure, and the financial costs associated with lawsuits and regulatory investigations.

A comparative examination of intentional acts versus medical malpractice highlights critical differences in causation, accountability, and societal response. While malpractice is often mitigated by education, training, and systemic improvements, intentional acts reflect a direct ethical failure that cannot be fully prevented through standard clinical protocols alone. The deliberate nature of these crimes necessitates more stringent oversight, including proactive monitoring, comprehensive ethical training, and robust regulatory enforcement. Legal systems worldwide recognize the severity of intentional acts and impose more severe

consequences, emphasizing punishment, deterrence, and moral accountability. These measures underscore the principle that healthcare professionals bear not only a duty of care but also an ethical obligation to act in the best interests of their patients, with deliberate violations representing a betrayal of this trust [11].

Prevention of intentional medical crimes requires an integrated approach that combines legal, institutional, and ethical strategies. Legal deterrence through criminal sanctions and regulatory oversight is essential but not sufficient on its own. Healthcare institutions must implement strong internal controls, including auditing procedures, whistleblower protections, and transparent reporting mechanisms, to detect and address misconduct promptly. Ethical reinforcement through professional education, codes of conduct, and ongoing training in patient rights and professional responsibilities is critical to shaping a culture of integrity and accountability. By addressing the root causes of unethical behavior, including personal, institutional, and systemic factors, healthcare systems can reduce the incidence of deliberate medical crimes while simultaneously strengthening professional norms.

The interplay between intentional acts and public trust is particularly significant. Society expects healthcare professionals to act with competence, honesty, and compassion. Violations of this expectation, especially deliberate violations, generate widespread societal concern and public outrage, amplifying the consequences beyond individual cases. High-profile incidents of intentional harm can lead to regulatory reforms, legal precedents, and changes in institutional policies, reflecting the societal demand for accountability and the protection of vulnerable populations. Furthermore, comparative studies indicate that jurisdictions with strict legal enforcement, active regulatory monitoring, and strong institutional ethics frameworks experience fewer incidents of intentional misconduct and higher levels of public confidence in healthcare systems.

Intentional medical crimes also highlight ethical dilemmas and challenges unique to the medical profession. Professionals may face conflicts between

personal interests, institutional pressures, and patient welfare, and in extreme cases, these conflicts manifest as deliberate misconduct. Addressing intentional acts requires not only legal and institutional interventions but also a culture of moral responsibility, emphasizing the core principles of beneficence, non-maleficence, justice, and respect for autonomy. Professional codes of ethics, combined with continuous ethical education, reinforce the imperative that patient welfare must remain the central concern of all medical practice.

In conclusion, intentional acts in healthcare constitute a severe breach of both legal and ethical standards, with far-reaching consequences for patients, professionals, and society. These deliberate medical crimes differ fundamentally from medical malpractice in their intent, severity, and societal impact, necessitating stronger legal sanctions, rigorous regulatory oversight, and ethical accountability [12].

Preventive strategies must be multidimensional, integrating legal deterrence, institutional control, and ethical reinforcement to create a healthcare environment in which deliberate harm is both unlikely and promptly addressed. Ultimately, understanding, preventing, and prosecuting intentional medical crimes is essential for protecting patients, maintaining professional integrity, and ensuring public trust in healthcare systems. By fostering accountability, transparency, and ethical commitment, societies can mitigate the risks of intentional misconduct and promote a healthcare environment grounded in safety, justice, and respect for human dignity.

Legal consequences:

- Criminal prosecution with penalties such as imprisonment, fines, and license revocation.
- Civil claims for damages.

Societal impact:

- Severe erosion of trust in healthcare.
- Psychological harm to patients and families.
- Potential systemic risks if unchecked (Table 2).

Table 2. Comparative Analysis

Feature	Medical Malpractice	Intentional Acts
Intent	Usually, unintentional	Deliberate
Legal Response	Civil law (usually), criminal in severe cases	Criminal law primary
Penalties	Compensation, possible license suspension	Imprisonment, fines, license revocation
Impact on Society	Costs, trust issues, defensive medicine	Severe trust erosion, psychological and systemic harm
Prevention	Training, guidelines, reporting	Strict oversight, ethics enforcement, legal deterrence

Analysis

- Malpractice often stems from system failures, human error, or lack of training.
- Intentional acts reflect ethical violation and personal misconduct.
- Both harm patients, but intentional crimes have more profound societal and legal consequences.

Prevention and Policy Implications

Effective mitigation strategies include:

1. Comprehensive medical training and continuing education.
2. Transparent reporting systems for errors and misconduct.
3. Strong regulatory oversight and legal frameworks.
4. Ethical reinforcement and accountability mechanisms.

Preventing medical crimes requires an integrated approach that addresses both unintentional negligence and deliberate misconduct. Medical crimes, from malpractice to intentional acts, have significant legal, ethical, and societal consequences. While malpractice can often be mitigated through training and systemic reforms, intentional acts necessitate strict legal accountability and ethical enforcement. Comparative analysis highlights that both categories require proactive strategies to protect patients, maintain trust in healthcare, and uphold justice. Strengthening laws, professional ethics, and preventive frameworks is essential for a safer and more reliable healthcare system [13].

Discussion

Medical crimes, encompassing both unintentional malpractice and deliberate intentional acts, represent a significant challenge to healthcare systems worldwide. The findings of this study underscore that while both categories of medical crimes negatively impact patients, professionals, and society, the nature, legal implications, and societal consequences differ substantially. By comparing these two categories, this discussion aims to contextualize the results within existing literature, highlight key insights, and suggest directions for improving legal, ethical, and clinical practices. The analysis of medical malpractice reveals that most incidents result from errors in judgment, procedural mistakes, or systemic inadequacies rather than deliberate harm. Consistent with prior research by Studdert et al. (2005) and Vincent (2010), this study confirms that negligence is often preventable through training, adherence to protocols, and institutional support [14].

Malpractice cases are typically addressed through civil litigation, allowing patients to seek compensation, while criminal liability is reserved for gross negligence or cases resulting in severe injury or death. Our findings align with other studies indicating that civil remedies alone are insufficient to deter extreme negligence; thus, integrating criminal accountability in egregious cases strengthens professional responsibility and protects public safety. Compared with other research, the present study emphasizes the dual impact of malpractice: not only direct harm to patients but also systemic consequences, such as increased healthcare costs, defensive medicine practices, and erosion of trust in healthcare systems.

In contrast, intentional acts demonstrate a fundamentally different profile. Deliberate medical

crimes, including abuse, fraud, falsification of records, and unauthorized procedures, are ethically and legally more severe. Similar to findings reported by Hickson et al. (2007) and Bismark et al. (2013), the study highlights that intentional acts result in profound psychological trauma for patients, significant societal outrage, and regulatory reforms. Unlike malpractice, intentional acts are inherently criminal, necessitating punitive measures to deter misconduct. The data show that legal frameworks addressing intentional crimes are more robust, reflecting the societal demand for accountability when patient welfare is deliberately compromised. Furthermore, intentional acts create long-term reputational damage for healthcare institutions, highlighting the need for proactive monitoring, whistleblower protections, and ethical reinforcement—findings consistent with international case studies in Europe and North America.

Comparative analysis between malpractice and intentional acts illuminates critical distinctions and overlaps. While both categories undermine patient safety and trust, malpractice is often linked to systemic or human errors, whereas intentional acts reflect deliberate ethical failures. This distinction is crucial for developing targeted preventive strategies. Studies by Wu (2000) and Kohn et al. (2000) suggest that effective interventions must address both individual and systemic factors; the current study corroborates this perspective by emphasizing tailored solutions: education, protocol standardization, and institutional support for malpractice prevention, versus strict legal enforcement, ethical training, and monitoring for intentional misconduct [15].

The study also highlights the interplay between legal frameworks, professional accountability, and societal perception. In alignment with research by Levinson et al. (2010), the findings suggest that countries with integrated civil, criminal, and regulatory mechanisms experience lower rates of severe medical crimes and maintain higher levels of public trust. Additionally, comparison with prior works demonstrates that proactive disclosure policies, transparent reporting systems, and patient engagement are effective in mitigating the consequences of both malpractice and intentional acts. Unlike earlier studies that focused predominantly on either civil or criminal outcomes, this analysis emphasizes a holistic approach, integrating ethical, legal, and social dimensions to comprehensively address medical crimes.

Another key insight relates to prevention and mitigation. Consistent with prior research, the findings indicate that malpractice prevention relies heavily on continuous professional education, adherence to evidence-based protocols, and system-level improvements. Intentional acts, however, demand a combination of legal deterrence, institutional oversight, and ethical reinforcement. Comparative studies from the United States, the United Kingdom, and Australia support this multidimensional approach, indicating that institutions that prioritize ethical culture and accountability report fewer incidents of deliberate harm. The current study reinforces the necessity of integrating legal, educational, and systemic strategies to address the full spectrum of medical crimes effectively.

The societal implications of medical crimes are profound. Both malpractice and intentional acts contribute to decreased trust in healthcare, financial burdens, and psychological harm, but intentional acts generate heightened public concern due to their deliberate nature. As reported by Vincent and Amalberti (2015), intentional misconduct can trigger widespread policy changes and regulatory scrutiny, often beyond the immediate cases [16].

The comparative perspective of this study underscores that while malpractice may erode trust gradually, intentional acts can lead to abrupt and systemic distrust, amplifying the importance of preventive measures and proactive ethical governance. Finally, the study highlights the importance of ethical culture within healthcare institutions. Consistent with the work of Berwick (2013), fostering a culture of accountability, transparency, and patient-centered care is critical for reducing both unintentional and intentional medical crimes. Comparative analysis suggests that organizations that integrate ethics training, robust reporting mechanisms, and supportive management structures not only reduce the incidence of medical crimes but also enhance professional satisfaction, patient outcomes, and societal trust.

In conclusion, the discussion emphasizes that understanding medical crimes requires a nuanced approach that considers intent, legal frameworks, professional accountability, and societal impact. Comparison with prior research confirms that while malpractice and intentional acts differ in severity and causation, both necessitate comprehensive strategies that combine legal oversight, ethical reinforcement, and systemic improvement [17].

By synthesizing findings across studies, this analysis provides a robust framework for policymakers, healthcare administrators, and legal professionals to mitigate medical crimes, safeguard patient welfare, and strengthen public trust in healthcare systems. Future research should focus on longitudinal studies assessing the effectiveness of integrated legal and ethical interventions and exploring cross-cultural differences in medical crime prevention, contributing to the development of globally relevant best practices [18].

Conclusion

Medical crimes, encompassing both unintentional medical malpractice and deliberate intentional acts, represent one of the most complex and significant challenges in modern healthcare systems. These crimes not only harm individual patients but also have far-reaching consequences for healthcare institutions, professional ethics, legal systems, and societal trust. The current study has explored the legal, criminal, ethical, and societal dimensions of these medical offenses, emphasizing the differences between negligence-based malpractice and deliberate harmful actions, while also highlighting their interconnected impacts.

Medical malpractice, typically unintentional, arises from errors, omissions, or systemic inadequacies in patient care. Surgical errors, misdiagnoses, medication mistakes, and procedural failures are common examples. While malpractice often falls under civil law for the purpose of compensation, severe cases involving gross negligence can lead to criminal liability. The legal framework surrounding malpractice serves multiple functions: providing remedies to harmed patients, enforcing accountability among healthcare providers, and promoting adherence to professional standards. Moreover, malpractice has broader systemic consequences, including increased healthcare costs, defensive medicine practices, and erosion of patient trust. Preventive strategies, such as continuous professional education, standardized protocols, risk management systems, and transparent reporting, are essential to reducing the incidence and impact of malpractice. Intentional acts, by contrast, involve deliberate actions by healthcare professionals that harm, exploit, or deceive patients. These include administering harmful treatments, falsifying records, engaging in fraud, or committing abuse. Such acts are inherently criminal and carry severe legal sanctions, including imprisonment, fines, and revocation of

medical licenses. Intentional crimes have profound ethical implications, reflecting a breach of the fundamental duty of care and professional integrity. They also have wider societal repercussions, including public outrage, diminished trust in healthcare institutions, psychological trauma for victims, and increased regulatory scrutiny. Compared to malpractice, intentional acts are more likely to trigger systemic reforms and highlight the need for proactive institutional oversight and ethical enforcement.

Comparative analysis between malpractice and intentional acts reveals both distinctions and overlapping consequences. While malpractice is often preventable through systemic improvements and education, intentional acts require legal deterrence, ethical reinforcement, and strong institutional governance. Both forms, however, emphasize the critical importance of accountability, transparency, and patient-centered care. Prior research corroborates these findings, indicating that countries and institutions with integrated legal frameworks, effective regulatory oversight, and ethical training report lower rates of medical crimes and higher levels of patient trust. This study also underscores the interconnectedness of legal, ethical, and societal dimensions. Legal accountability, through civil and criminal mechanisms, protects patients and reinforces professional norms. Ethical oversight, including codes of conduct, ethics committees, and ongoing professional development, fosters a culture of integrity. Societal trust, in turn, is maintained when healthcare systems demonstrate both competence and accountability. Preventing medical crimes requires a holistic approach that addresses individual responsibility, systemic support, and organizational culture, recognizing that errors and misconduct rarely occur in isolation.

In conclusion, medical crimes, whether unintentional or deliberate, pose significant risks to patients, healthcare professionals, and society at large. Addressing these crimes effectively requires a comprehensive strategy integrating legal enforcement, ethical reinforcement, institutional oversight, and preventive measures. Medical malpractice highlights the need for systemic improvements, education, and risk management, while intentional acts demand strict legal deterrence, ethical accountability, and proactive monitoring. Together, understanding, preventing, and addressing these medical crimes ensures patient safety, strengthens professional integrity, and maintains societal trust in healthcare systems. Ultimately, fostering a healthcare

environment grounded in competence, ethics, and accountability is essential to mitigating the risks and consequences of both malpractice and intentional misconduct, promoting a safer, more reliable, and trustworthy healthcare system.

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