

# The Nursing Code of Ethics Dispels Medical Gaslighting

Maureen Georgiadis, RN

Medical gaslighting is a relatively new phrase in healthcare, and it can have profound implications on medical outcomes. According to the article, *Medical Gaslighting: A New Colloquialism*, "medical gaslighting is defined as an act that invalidates a patient's genuine clinical concern without proper medical evaluation, because of physician ignorance, implicit bias, or medical paternalism. To be clear, unlike other forms of gaslighting, the intent of the "gaslighting" medical practitioner is typically not purposeful manipulation of the patient due to a deceitful motive. On the contrary, "gaslighting" in medical contexts is often due to the physician's lack of awareness or understanding of disease entities, preconceived notions about specific clinical presentations, subliminal/unconscious bias toward certain patient populations, or simply arrogance in presuming physician superiority in clinical knowledge and decision-making (Ng, 2024, October)." The patient feels unheard and minimized and may even begin to question whether their symptoms are real or imagined. Not to mention that patients can be at risk of not getting necessary medical care. Nurses are essential in mitigating medical gaslighting by utilizing and adhering to specific sections of the Nursing Code of Ethics.

Under Provision 1 of the Nursing Code of Ethics, nurses must practice with compassion and respect for every person's inherent dignity, worth, and unique attributes (ANA, 2025). In Section 1.2, *Relationships with Patients and Recipients of Nursing*, we are partners and allies with our patients (ANA, 2025). We listen to them and ensure their concerns and needs are heard. We must recognize and bring to light any biases or prejudices that may arise within ourselves and the external environment. We engage in self-reflection to

realize that biases and prejudices can be explicit or implicit, and we consider and support all cultural, spiritual, lifestyle, and sexual identities. In return, our patients trust in us and feel validated. Moreover, in Section 1.4, *The Right to Self-Determination*, patients have the moral and legal right to determine what will be done to their person (ANA, 2025). If a doctor disregards a patient's right to self-determination, knowingly or unknowingly, we must step in for them and speak up for them.

Under Provision 2, 2.1 *Primary Commitment to Recipients of Nursing Care*, the nurse prioritizes recipients of nursing care over institutions within nursing practice (ANA, 2025). Our patients are our priority, and because we build trusting relationships with them, we recognize when they are frustrated and do not feel heard. It is up to us to escalate concerns when needed (ANA, 2025). As nurses, we support our patients, regardless of their varied backgrounds, and provide them with the education they need so that they can make informed decisions about their healthcare. In doing so, we ensure equitable care for all patient populations.

Provision 3 of the Nursing Code of Ethics states that the nurse establishes a trusting relationship and advocates for the rights, health, and safety of the nursing care recipient(s) (ANA, 2025). In Section 3.2, *Advocating for Persons Who Receive Nursing Care*, nurses are vital in considering a patient's circumstances and recognizing vulnerable individuals and populations (ANA, 2025). A physician may dismiss a patient or their family's concerns due to not fully understanding their cultural beliefs or preferences. Nurses advocate for their patients' cultural beliefs and backgrounds.

Provision 4, Section 4.3, *Ethical Awareness, Discernment, and Judgment* states that ethical judgment is inseparable from

clinical know-how for nurses (ANA, 2025). Our moral and clinical decision-making is intertwined. This section states, "in the nurse-to-society relationship, nurses' ethical awareness, discernment, and judgment engage with social structures that positively affect health and seek to alter forces and uproot structures that damage health" (ANA, 2025). Medical gaslighting is a form of social structure that can cause significant damage to a patient's health and mental well-being. It is the intrinsic nature and the heart of nursing to be aware of when our patients' symptoms are being dismissed.

Nurses are on the frontlines of guiding and navigating patients toward the best possible outcomes. We ensure that every patient is heard and that their symptoms and concerns are addressed. By adhering to the Nursing Code of Ethics, nurses can dispel the gaslight and, in turn, shine the light of hope for our patients and their families. ■

## References.

1. Ng, I., Tham, S., Singh, Gaurav D., Thong, C., Desmond B. (2024, October). Medical Gaslighting: A New Colloquialism. *The American Journal of Medicine*, Volume 137, Issue 10, pp. 920–922. [https://www.amjmed.com/article/S0002-9343\(24\)00396-6/fulltext](https://www.amjmed.com/article/S0002-9343(24)00396-6/fulltext)
2. The American Nurses' Association. (2025). *Code of Ethics for Nurses*. <https://codeofethics.ana.org/provisions>