To relieve patients’ suffering and to do no harm have been two basic tenets of medical ethics since the time of Hippocrates. A third tenet, to respect the autonomy of patient and physician, defines their reciprocal rights and responsibilities (1).

Representatives of the Association of American Medical Colleges have highlighted the importance of a fourth tenet, social justice, which is taught as part of the medical ethics curriculum in the US. They feel that the principle of social justice does not receive enough attention compared to the three other fundamental ethical principles of medicine (1).

Social justice, a fourth pillar of medical ethics that is underemphasised. The authors of this paper, Kirch and Vernon, quote the US philosopher John Rawls, who proposed that justice is based on two major principles: the maximisation of individual liberty must be compatible with the same degree of liberty for everyone; deliberate inequalities are unjust unless they benefit the least well off (1).

The authors regret the fact that the US healthcare system does not adequately emphasise the pursuit of social justice, by not actively doing enough to improve the health of the poorest members of society. In their article, they express concern that certain factors are actually exacerbating this inequality, such as the culture of individualism and the tendency of many doctors to focus on maximising their income (1).

They consider that healthcare professionals can only fully incorporate the principles of medical ethics into their practice if they get involved in policies to reduce injustices, even if it means accepting a lower level of income (1).

Developing the medical community’s commitment to greater social justice. The ability to defend the collective rights of disadvantaged patients requires different skills than those used in clinical practice at the patient’s bedside.

Kirch and Vernon suggest that learning to speak out against unacceptable situations, help formulate solutions and take action should be part of medical training. They note that, at the time of enrolment, 88% of medical students say that they want to get involved in community service or activism. The authors argue that medical training should include the opportunity for students to cultivate this predisposition (1).

All countries could benefit from openly discussing the issue of social justice (2). As a growing body of evidence shows a link between disparities in healthcare and economic and social inequality (including data from the World Health Organization, for example), healthcare professionals need to work for greater social justice if they are to fully incorporate the principles of medical ethics in practice (3).