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N. Gafurova*
Doctor of Juridical Sciences (DSc), Professor,
Institute for Retraining
and Professional Development of Legal Personnel
under the Ministry of Justice of the Republic of Uzbekistan
***Corresponding author:** gafurovanozimakhon@mail.ru

ANALYSIS OF INTERNATIONAL INSTRUMENTS REGULATING THE PROTECTION OF PATIENTS' RIGHTS IN CONTEMPORARY REALITIES

Abstract

This article presents a comprehensive analysis of international instruments regulating the protection of patients' rights within the modern healthcare context. Particular emphasis is placed on international legal and ethical standards enshrining patients' rights to health, dignity, informed consent, confidentiality of medical information, access to information regarding health status, safety of medical care, and effective remedies for violations of these rights. The importance of universal and regional instruments is considered, including normative acts of the World Health Organization, the Council of Europe, the European Union, as well as international standards in the fields of bioethics, personal data protection, and digital health. Particular attention is paid to the impact of the digitalization of medical services on the scope of patients' rights, especially in the context of electronic medical records, telemedicine, biobanks, genetic databases, and artificial intelligence. The necessity to reconsider traditional guarantees of patients' rights is substantiated in view of emerging digital risks related to unauthorized access to medical data, secondary use of information, algorithmic discrimination, and diminished transparency in medical decision-making. The author concludes that a new international legal framework for the protection of patients' digital rights is being formed, founded on the respect for personal autonomy, human dignity, the safety of healthcare provision, and the adequate protection of medical data.

Keywords: patients' rights, international legal instruments, right to health, informed consent, medical confidentiality.

Introduction

Under contemporary conditions, the protection of patients' rights assumes particular importance as a distinct sphere of international legal regulation, located at the convergence of the right to health, the right to dignity, the right to privacy, the right to information, the principle of personal autonomy, and the prohibition of discrimination. The advancement of biomedicine, digital health, the expansion of cross-border exchange of medical data, the implementation of artificial intelligence in diagnostics and treatment, as well as the increasing scale of personal medical data processing, have necessitated a fundamental reassessment of the traditional approaches to the patient's legal status. In this context, the patient is regarded not merely as a recipient of healthcare services but as an autonomous subject of rights, endowed with legally guaranteed prerogatives to participate in decision-making concerning their health, to oversee the use of their medical data, and to demand effective protection in the event of any infringement of their rights.

International instruments regulating the protection of patients' rights establish a multilevel system of legal and ethical standards. Their basis is formed by universal human rights instruments enshrining the right of every individual to the highest attainable standard of physical and mental health, protection of human dignity, privacy, and the prohibition of medical intervention without free and informed consent. Specialized international instruments within the domains of bioethics, biomedicine, and medical deontology hold significant importance; these instruments expressly stipulate patients' rights to informed consent, confidentiality of medical information, access to data concerning their health status, safety of medical care, respectful treatment, the freedom to choose one's physician and medical institution, as well as access to effective mechanisms of appeal.

The issue under examination gains heightened pertinence in light of the fact that international standards for the protection of patients' rights extend beyond mere declarative affirmation of general principles. These standards are progressively evolving into explicit obligations for national healthcare systems, including the state's duty to ensure the accessibility, acceptability, and quality of medical care; the legal certainty of patient consent procedures; the protection of medical confidentiality; transparency in the processing of personal data; and the existence of effective accountability mechanisms for violations of patients' rights. Within this framework, international instruments function not only as sources of legal reference but also as methodological foundations for the enhancement of national legislation.

Simultaneously, the analysis of international instruments reveals that the legal regulation of patients' rights evolves unevenly. Certain instruments possess legally binding authority and impose direct international legal obligations on states, whereas others assume a non-binding, ethical, or programmatic character. Notwithstanding the variation in their legal force, it is the aggregate effect of these instruments that underpins the contemporary concept of 'patient-centered healthcare,' which is grounded in respect for patient autonomy, the primacy of human dignity, the safety of medical interventions, and the establishment of trust among the patient, healthcare provider, and the state.

Methods

The topic gains further scientific relevance through the digital transformation of healthcare. Electronic medical records, telemedicine, digital platforms, biobanks, genetic research, and algorithmic decision-making systems generate new legal risks related to the diminishing patient control over personal data, unauthorized access to medical information, secondary data usage without appropriate consent, health status-based discrimination, and decreased transparency in medical decision-making. Consequently, traditional patient rights necessitate a contemporary interpretation in light of international standards governing the protection of personal data, bioethics, and digital rights.

Thus, the pertinence of this study is predicated on the necessity for a comprehensive analysis of international instruments regulating the protection of patients' rights, with a view to identifying their legal nature, substantive content, and influence on national legal frameworks. This approach enables an assessment of the coherence of international standards, elucidates their role in maintaining a balance among the interests of patients, society, medical science, and the state, and facilitates the formulation of evidence-based recommendations aimed at enhancing mechanisms for safeguarding patients' rights amid the globalization and digitalization of healthcare.

Thus, based on the foregoing paragraph, it can be affirmed that patients' rights are currently regulated by a range of international legal instruments which require codified incorporation into national legislation.

We would like to emphasize a number of international documents which, from our perspective, represent the most progressive standards in light of contemporary realities. For instance, the Amsterdam Declaration was the first to formally recognize patients' rights to access quality medical care (clause 5.1.); to provide informed, voluntary consent to medical intervention (clause 5.3.); to refuse medical intervention (clause 3.1.); to select a physician (clause 3.2.); to seek consultations with other specialists (clause 2.7.); to receive information regarding one's health status and rights (clauses 2.2., 6.5.); and to ensure the confidentiality of patient information and health data (clauses 4.1.–4.3.), among others[1].

The patient's right to active participation in the decision-making process concerning healthcare issues was formally established through Recommendations issued to EU member states in 1999 during the 45th session of the European Health Committee.

Moreover, in February 2000, the Committee of Ministers of the Council of Europe adopted Recommendations aimed at the development of organizational frameworks enabling citizen and patient participation in decision-making processes affecting the healthcare system (The Recommendation on the Development of Structures for Citizen and Patient Participation in the Decision–Making Process affecting Health Care) [2]. Subsequently, in 2006, the Committee promulgated Recommendations focused on the management of patient safety and the prevention of

adverse events within healthcare (Recommendation Rec(2006)7 of the Committee of Ministers to member states on management of patient safety and prevention of adverse events in health care) [3].

In May 2019, the 72nd World Health Assembly adopted the resolution Global Action on Patient Safety, endorsing the designation of 17 September as World Patient Safety Day. This resolution facilitates the enhancement of global public awareness regarding patient safety issues and promotes consolidation and coordinated action. The inaugural World Patient Safety Day will be observed under the theme 'Patient Safety – A Global Health Priority, with the slogan Speak up for Patient Safety!'[4].

One of the latest documents addressing patients' rights is the Tokyo Declaration on Patient Safety, adopted at the Third Global Ministerial Summit on Patient Safety, convened in April 2018 in Tokyo, Japan. This Declaration is grounded in the principles of the World Health Assembly Resolution No. WHA55.18 (2002)[5], which calls for 'the utmost attention to be paid to the issue of patient safety, and for the establishment and reinforcement of evidence-based systems essential to enhancing patient safety and the quality of healthcare'[6].

Thus, it can be affirmed that patient safety currently constitutes one of the paramount concerns of global healthcare and a fundamental issue in the realization of the human right to health. It is evident that national legal frameworks governing patients' rights are not uniform, owing to economic, historical, geographical, and environmental factors. Nonetheless, the threats to patient safety share broadly similar origins in the context of ongoing globalization and, accordingly, warrant harmonization. Accordingly, the challenges of guaranteeing patients' rights must be addressed through the implementation of international norms and standards for the protection of patients' rights.

As previously noted, during the initial phase in the development of the third generation of human rights, the Universal Declaration of Human Rights and the Nuremberg Code established the foundational principles for the international recognition of patients' rights, grounded in universal human values, medical ethics, and fundamental human rights. These provisions were subsequently elaborated and specified in various international legal instruments. The importance of legal regulation and protection of patients' rights has grown alongside the development of medical science and the increasing expectations and demands of patients concerning the quality and safety of medical care.

Furthermore, the aforementioned Amsterdam Declaration sets forth general provisions encompassing a codification of fundamental principles and strategic directions for the support and realization of rights, while also distinguishing between social and individual patients' rights. The declaration constitutes a consistent and coherent concept within the realm of the patient–medical relationship.

The codification of patients' rights as an autonomous human right in international legal instruments constitutes recognition by the global community and its commitment to uphold these rights. Contemporary legislation in the majority of countries globally should be founded upon the principles articulated in earlier international documents concerning patients' rights.

WHO Resolution WHA 58.28 on eHealth, adopted in 2005, recognizes that eHealth encompasses the governance of healthcare systems through information and communication technologies, the conduct of scientific research, economic activities, the provision of medical services, as well as the advancement of distance education in the healthcare sector.

According to the definition of the International Society for Telemedicine (ISFT), eHealth encompasses the use of information technologies in medicine to facilitate remote interaction between the parties (doctor and patient)[7].

Results

Therefore, an analysis of international sources reveals that patients' rights constitute specific entitlements derived from the right to health, which arise at the moment the patient seeks medical care or services from a healthcare institution. Accordingly, patients' rights are intrinsically connected to the right to health, insofar as they encompass and realize this fundamental right. In other words, the right to health, together with other rights, freedoms, and related elements, constitutes the comprehensive corpus of fundamental rights and freedoms afforded to patients under international legal norms and standards.

Substantial legal lacunae in the protection and enforcement of patients' rights were evident during the COVID-19 pandemic, which engendered unprecedented challenges for all states and represented one of the most critical threats to humanity. All these factors have led to violations of patients' rights in practically all states, particularly concerning limitations on human rights.

In acknowledging the urgent necessity of implementing stringent restrictive measures to combat COVID-19, it is appropriate to base such measures on the fundamental principle and standards of the right to health as well as the principle of the rule of law. The global community has observed that significant gaps in international and national legal frameworks governing the regulation of pandemics, such as the coronavirus, have given rise to numerous legal challenges. In this context, the UN General Assembly adopted the resolution 'Global Solidarity in the Fight against Coronavirus 2019,' aimed at 'enhancing international cooperation to prevent the pandemic,' as well as the recommendations of WHO and the Council of Europe[8].

Furthermore, the International Covenant on Civil and Political Rights, the International Covenant on Economic, Social and Cultural Rights, and the European Convention on Human Rights contain provisions that more generally reflect other specialized international legal standards regarding patients' rights enshrined in the Convention on Human Rights and Biomedicine; these instruments thereby establish a temporary basis for restricting human rights. When imposing restrictions, it is necessary to ensure compliance with certain conditions: the situation in the country (force majeure circumstances, epidemic, pandemic, etc.) must genuinely justify these restrictions as strictly necessary; furthermore, the restrictions must be proportionate to the risks that have occurred or may potentially occur. Another essential condition is that the individual's rights are grounded in respect for human dignity and that any limitations imposed must be exceptional and of a temporary nature. In accordance with international standards, there are non-derogable human rights that cannot be limited under any circumstances. Conversely, certain human rights may be contingent upon circumstances that arise or are anticipated, and therefore may be subject to limitations. Fundamental principles founded on respect for human dignity and human rights must serve as guiding standards in the formulation of decisions and medical practices amid the ongoing crisis. Restrictions must apply within a defined temporal period (e.g., 30 days); they must explicitly specify which rights are curtailed and under what circumstances (such as public events with a limited number of attendees), and they must be established by a concrete normative legal instrument.

Discussion

An analysis of the global and local consequences of the recent pandemic, which remains ongoing worldwide, confirms that despite previous instances of pandemics affecting the planet, the international legal system was not adequately prepared to confront such a threat[9]. Furthermore, the analysis of national legislations, even of the most economically developed states, revealed that no country has yet enacted effective legal instruments for pandemic regulation; the challenge of safeguarding citizens' rights during the pandemic remains unaddressed, despite the introduction of temporary restrictive measures in nearly all countries affecting fundamental human rights, including freedom of movement, the protection of personal data, and others. Depending on the scope, various countries have implemented specific temporary measures, including quarantine, declaration of a state of emergency, imposition of martial law, curfew enforcement, restrictions on the entry of foreign nationals, suspension of air traffic, among others.

As noted by F. According to Yusupova, at present, Uzbekistan lacks unified standards within the domain of electronic healthcare, thereby hindering the population's access to high-quality medical services. Moreover, there is no dedicated authority responsible for supervising the new system, which further delays its implementation. Existing information systems and technologies remain fragmented and are oriented toward highly specialized tasks[10].

Therefore, it is advisable to incorporate into this legal code regulatory provisions concerning restrictive measures enacted in response to the occurrence of a special situation within the country. Such measures, typically temporary, include specific norms addressing pandemics, epidemics, force majeure events, and other extraordinary circumstances, reflecting the urgent necessity to establish concrete rules governing the rights and obligations of citizens.

In light of the foregoing, it is proposed to introduce a new Article into the draft Health Code, which will delineate and regulate the rights and responsibilities of citizens during the implementation of temporary restrictive measures imposed by the government in response to the epidemiological situation, force majeure events, or other exceptional circumstances.

Given the occurrence of a national emergency, any restrictive measures enacted by the government (including those related to force majeure events, epidemics, pandemics, and the like) must be strictly necessary, justified, and proportionate. To establish legitimate grounds for restricting constitutional human rights, it is imperative that such restrictions are fundamentally based on respect for human honor and dignity and are of a temporary nature.

All citizens of the Republic of Uzbekistan are obliged to unconditionally comply with the established regime and to submit to restrictive measures. Following the termination of the state of emergency, restrictive measures shall be suspended. The State guarantees the restoration of normal conditions in accordance with constitutional human rights and ensures their full observance.

Rights subject to restrictive measures include limitations on an individual's right to movement beyond territories prohibited by law, protection of personal data, among others. Restrictions on the right to movement during the implementation of such measures encompass limitations on freedom of movement within the territory of the Republic of Uzbekistan, as well as entry into and exit from the Republic of Uzbekistan.

Restrictive measures affecting the right to health shall not be applied with regard to the following inalienable rights and freedoms:

- the right to life;
- the right to freedom from unconsented medical interventions (the right to informed consent), including biomedical experiments, research, or forced sterilization;
- the right to freedom from torture and other cruel, inhuman, or degrading treatment or punishment, and the right to non-discrimination;
- the right to respect for personal dignity and health (in particular, no one shall be subjected to torture, violence, or other cruel, inhuman, or degrading treatment);
- the right to privacy, including personal and family confidentiality, and the right to protection of one's honor and reputation;
- the right to protection against unauthorized dissemination of personal data, including cybersecurity measures pertaining to the confidentiality of patient medical records;
- freedom of conscience and the right to freedom of religion;
- the right to freely utilize one's capacities and property for entrepreneurial and other lawful economic activities;
- judicial protection and the right to qualified legal assistance;
- the right to presumption of innocence;
- the right of a person not to testify against oneself, one's spouse, or close relatives;
- the right to compensation for harm caused by criminal acts and abuses of authority;
- the right to compensation by the state for damage caused by unlawful acts or omissions of state bodies or their officials.

Digital health assumes particular importance within the context of analyzing international instruments regulating the protection of patients' rights. The transition from the traditional model of healthcare provision to a digital ecosystem—encompassing electronic medical records, telemedicine, digital platforms, biobanks, genetic databases, and artificial intelligence systems—profoundly transforms the scope of patients' rights. Whereas the protection of patients' rights was previously primarily associated with the quality of medical care, informed consent, medical confidentiality, and access to information regarding health status, under conditions of digitalization these rights acquire a new dimension related to control over medical data, transparency in its processing, and protection against unauthorized digital interference.

Medical information constitutes one of the most sensitive categories of personal data, as it reveals data regarding an individual's physical and psychological state, diagnoses, examination outcomes, genetic attributes, reproductive health, and other facets of private life[11]. Accordingly,

international and regional legal frameworks increasingly regard the protection of medical data as an indispensable component of the protection of patients' rights. In particular, standards of confidentiality, data processing security, restrictions on access to medical information, as well as the requirements for obtaining free, specific, and informed consent constitute fundamental guarantees for the realization of the patient's right to privacy and autonomy.

Digitalization also actualizes the issue of the secondary use of medical data. In modern realities, patient data is utilized not only for diagnosis and treatment but also for scientific research, drug development, training of artificial intelligence algorithms, healthcare system management, and epidemiological risk forecasting. Simultaneously, there arises a requirement to ensure a balance between the public interest in the advancement of medical science and the state's obligation to guarantee the proper protection of patients' rights. International standards in this sphere emanate from the principle that the use of medical data must be justified by a lawful purpose, coupled with the minimization of the volume of processed information, transparency of procedures, mechanisms for anonymization or pseudonymization, as well as effective oversight by patients and authorized authorities.

The application of artificial intelligence in healthcare requires close attention. Algorithmic systems have the capacity to improve diagnostic accuracy, expedite the processing of medical information, and broaden access to healthcare services. At the same time, their use introduces novel risks to patients' rights, including lack of transparency in medical decision-making, algorithmic discrimination, inaccurate diagnoses, diminished human oversight, and ambiguity concerning liability for resultant harm. In this context, international approaches to regulating digital health increasingly emphasize the formalization of the principles of transparency, explainability, accountability, security, and the prohibition of discrimination in the application of digital technologies in healthcare.

Consequently, digital health does not negate traditional patient rights but rather broadens their scope and demands a novel legal interpretation. The right to informed consent must cover not only consent to medical intervention but also consent to the processing, transfer, and subsequent reuse of medical data. The right to privacy must encompass protection against unauthorized access to electronic medical records. The right to information must include a clear explanation to the patient regarding the modalities of utilizing digital technologies, including algorithmic systems. Consequently, international instruments protecting patients' rights within digital healthcare environments constitute a fundamental basis for shaping a modern patient-centered healthcare model founded upon respect for human dignity, personal autonomy, the safety of medical care, and the protection of medical data.

In the context of the digital transformation of healthcare, the international legal framework governing the protection of patients' rights takes on new dimensions. Contemporary patients' rights can no longer be understood solely within the framework of traditional guarantees — namely, the right to medical care, informed consent, medical confidentiality, and access to information regarding one's health status. The advancement of electronic medical records, telemedicine, digital platforms, biobanks, genetic databases, mobile health applications, and artificial intelligence systems has driven the development of a new direction in international standards concerning the protection of patients' digital rights.

Special significance in this context is attributed to the WHO Global Strategy on Digital Health 2020–2025, which is predicated on the necessity of employing digital technologies to reinforce health systems, broaden access to medical services, and enhance the quality of healthcare. Concurrently, this document underscores that digital health implementation must proceed not solely as technological modernization but as a legal process founded upon the protection of human rights, the trust of the patient, the security of medical information, and the ethical utilization of data.

The principal international instrument governing the protection of personal data, including medical data, is the Council of Europe Convention No. 108 for the Protection of Individuals with regard to Automatic Processing of Personal Data, along with its modernized version — Convention 108+. These instruments are of particular importance for safeguarding patients' rights, given that

medical information constitutes one of the most sensitive categories of personal data. Their provisions constitute the legal foundation for ensuring the principles of legality, good faith, transparency, purpose limitation, security of processing, and the data subject's right to oversight.

The Recommendation CM/Rec(2019)2 of the Committee of Ministers of the Council of Europe on the protection of health-related data occupies a significant place. This document specifically adapts the general principles of personal data protection to the healthcare sector, taking into account the contemporary modalities of exchange, transfer, and reuse of digital health data. Its significance lies in establishing the necessity of special safeguards in the processing of electronic health data, including confidentiality, access restrictions, information system security, data protection in scientific research, as well as respect for the principle of patient autonomy.

At the regional level, European Union legislation has a substantial impact on shaping standards for digital patient rights. The General Data Protection Regulation (GDPR) classifies health, genetic, and biometric data as special categories of personal data, the processing of which is permitted solely on the basis of specific legal grounds and subject to additional safeguards. Conversely, the European Union Regulation on the European Health Data Space is designed to strengthen patient control over electronic medical data by ensuring access, enabling cross-border data exchange, correction, access restriction, and the secure secondary use of such data for scientific research, innovation, and public health purposes.

Conclusion

The international regulation of artificial intelligence in healthcare warrants particular consideration. The WHO guidance on the ethics and governance of artificial intelligence in healthcare underscores that the application of algorithmic systems must be grounded in the principles of human rights protection, transparency, explainability, non-discrimination, safety, and accountability. This is especially critical in the healthcare sector, where decisions made or supported by artificial intelligence may directly impact the life, health, dignity, and autonomy of the patient. Comparable approaches are embedded in the UNESCO Recommendation on the Ethics of Artificial Intelligence, which underscores the imperative of preserving human oversight, preventing discrimination, and ensuring accountability in the deployment of AI systems.

A notable soft-law international instrument is the OECD Recommendation on the Governance of Health Data. This Recommendation aims to establish national frameworks for health data governance that concurrently facilitate the use of data for public interest purposes and safeguard patient privacy. This approach is especially crucial in the context of the secondary use of medical data for scientific research, medicinal product development, epidemiological surveillance, training of artificial intelligence algorithms, and enhancement of the quality of medical services.

Accordingly, international instruments regulating the digitalization of patients' rights establish a multilayered system of guarantees. On one hand, they provide for the utilization of digital technologies to improve the accessibility, quality, and efficiency of medical care. Conversely, they codify the imperative to safeguard patients against emerging digital risks, including unauthorized access to medical information, unlawful disclosure of data to third parties, unauthorized reuse of data without appropriate consent, algorithmic discrimination, loss of control over electronic medical records, and the opacity of decisions made through the utilization of artificial intelligence.

Accordingly, digital health necessitates a fundamental reconsideration of the traditional scope of patients' rights. The right to informed consent must encompass not only consent to medical intervention but also to the processing, transmission, storage, and reuse of medical data. The right to privacy must include protection of electronic medical records and the patient's digital footprints. The right to information shall entail the patient's receipt of clear and comprehensible information regarding the digital technologies employed, the algorithms utilized, and the objectives of data processing. The right to safety in medical care shall encompass the security of digital medical systems, while the right to effective protection must ensure the possibility of appealing violations related to the processing of medical data and the use of artificial intelligence in healthcare.

In this context, the analysis of international instruments regulating the protection of patients' rights amid digitalization enables the conclusion that a new international legal model of patients'

digital rights is gradually emerging. This model unites classical patients' rights with contemporary guarantees of digital autonomy, protection of medical data, transparency in algorithmic decision-making, cybersecurity, and equitable access to digital health services.

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Н.Э.Гафурова

Өзбекстан Республикасы Әділет министрлігі жанындағы Заңгерлік кадрларды қайта даярлау және біліктілігін арттыру институтының заң ғылымдарының докторы (DSc), профессоры, gafurovanozimakhon@mail.ru, Ташкент, Өзбекистан

ҚАЗІРГІ ШЫНДЫҚТА ПАЦИЕНТТЕРДІҢ ҚҰҚЫҚТАРЫН ҚОРҒАУДЫ РЕТТЕЙТІН ХАЛЫҚАРАЛЫҚ ҚҰЖАТТАРДЫ ТАЛДАУ

Түйін

Бұл мақалада денсаулық сақтауды дамытудың қазіргі жағдайында пациенттердің құқықтарын қорғауды реттейтін халықаралық құжаттардың кешенді талдауы берілген. Пациенттің денсаулыққа, қадір-қасиетке, хабардар келісімге, медициналық ақпараттың құпиялылығына, денсаулық сақтау туралы ақпаратқа қол жеткізуге, медициналық көмектің қауіпсіздігіне және бұзылған құқықтарды тиімді қорғауға құқығын бекітетін халықаралық

құқықтық және этикалық стандарттарға ерекше назар аударылады. Мақалада Дүниежүзілік денсаулық сақтау ұйымының, Еуропа Кеңесінің және Еуропалық Одақтың актілерін қоса алғанда, әмбебап және аймақтық құжаттардың, сондай-ақ биоэтика, жеке деректерді қорғау және цифрлық денсаулық сақтау саласындағы халықаралық стандарттардың маңыздылығы қарастырылады. Мақалада медициналық қызметтерді цифрландырудың пациенттердің құқықтарына, соның ішінде электрондық медициналық жазбаларды, телемедицинаны, биобанктерді, генетикалық дерекқорларды және жасанды интеллектті пайдалану тұрғысынан әсері қарастырылады. Сондай-ақ, медициналық деректерге рұқсатсыз қол жеткізумен, ақпаратты қайталама пайдаланумен, алгоритмдік кемсітушілікпен және медициналық шешімдердің ашықтығының төмендеуімен байланысты жаңа цифрлық тәуекелдерді ескере отырып, пациенттердің құқықтарының дәстүрлі кепілдіктерін қайта қарастыру қажеттілігі негізделеді. Автор пациенттердің цифрлық құқықтарын қорғаудың жеке автономияны, адамның қадір-қасиетін, медициналық көмектің қауіпсіздігін және медициналық деректерді тиісті түрде қорғауды құрметтеуге негізделген жаңа халықаралық құқықтық моделін әзірлеу керек деген қорытындыға келеді.

Кілттік сөздер: пациенттердің құқықтары, халықаралық-құқықтық құралдар, денсаулық сақтау құқығы, ақпараттандырылған келісім, медициналық құпиялылық.

Э.Н. Гафурова

Доктор юридических наук (DSc), профессор, Институт переподготовки и повышения квалификации юридических кадров при Министерстве юстиции Республики Узбекистан, gafurovanozimakhon@mail.ru, Ташкент, Узбекистан

АНАЛИЗ МЕЖДУНАРОДНЫХ ИНСТРУМЕНТОВ, РЕГЛАМЕНТИРУЮЩИХ ЗАЩИТУ ПРАВ ПАЦИЕНТОВ В СОВРЕМЕННЫХ РЕАЛИЯХ

Аннотация

В статье проводится комплексный анализ международных инструментов, регламентирующих защиту прав пациентов в современных условиях развития здравоохранения. Особое внимание уделяется международно-правовым и этическим стандартам, закрепляющим право пациента на здоровье, достоинство, информированное согласие, конфиденциальность медицинской информации, доступ к сведениям о состоянии здоровья, безопасность медицинской помощи и эффективную защиту нарушенных прав. Рассматривается значение универсальных и региональных документов, включая акты Всемирной организации здравоохранения, Совета Европы, Европейского союза, а также международные стандарты в сфере биоэтики, защиты персональных данных и цифрового здравоохранения. Отдельно анализируется влияние цифровизации медицинских услуг на содержание прав пациента, в том числе в условиях применения электронных медицинских карт, телемедицины, биобанков, генетических баз данных и искусственного интеллекта. Обосновывается необходимость переосмысления традиционных гарантий прав пациентов с учётом новых цифровых рисков, связанных с несанкционированным доступом к медицинским данным, вторичным использованием информации, алгоритмической дискриминацией и снижением прозрачности медицинских решений. Автор приходит к выводу о формировании новой международно-правовой модели защиты цифровых прав пациента, основанной на уважении автономии личности, человеческого достоинства, безопасности медицинской помощи и надлежащей защите медицинских данных.

Ключевые слова: права пациентов, международно-правовые документы, право на здоровье, информированное согласие, врачебная тайна.