

Review (Narrative)

A Perspective Analysis of Humanity in Medicine

How to Revive? (Part II)

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SUMMARY

Humanity is the fundamental for the originality of medicine. Even with the declaration of the “Oath of Hippocrates” when each medical student starts their medical education, yet a lot of them do not really adhere to what they declared. The need thus arises for inquiry and research into the ways that humanity and medical education are related. Medicine must be re-humanized by addressing the competence and professionalism of physicians in recognizing and understanding their patients. This approach targets attention to medicine as a form of human activity by focusing on the importance of the humanity to medical students, physicians, medical supervisors, policy makers, educators, and medical journals. So a legitimate monitoring system to screen for humanity in daily medical practice should be introduced. Doctors should have a sense of reasoning to focus on what it means to be patient-friendly rather than studying only the theoretical ambiguity. Through the reform, an integrated system that is organized and incorporated to secure the establishment and development of medical humanity is required. ■

KEYWORDS

Educational Technology; Ethics, Clinical; Medicine, Modern; Humanities; Humans Physician-Patient Relations

Sci Insights Med. 2017;2017:e000129. doi:10.15354/sim.17.re066

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The present medical situation is sometimes considered inhumane, with stories of medical horrors becoming common, and as physicians is now becoming dehumanized. We herein focus on determining the extent to which the humanity can provide a long-term impact on medicine in general. We present the significance and relevance of humanity studies to medical education, and the responsibility of medicine-related personnel to incorporate the humanity into medical training (1). We also establish that physicians should adhere strictly to the advice of Hippocrates by paying attention to their patients, not only treating the disease but also giving only treatments that will not harm the patient, and by forming a relationship with their patients to understand their needs and to study their psychology; helping patients in these ways can boost the patient's natural resistance to overcome illness. Physicians should adopt the idea of knowing the people and the world they are in.

HOW TO REVIVE HUMANITY IN MEDICINE?

While it is often difficult to argue or contend with the doctor in a white coat, the need to understand the humanity as a necessity in medical education still exists.

To Medical Students

In ancient times, owing to the level of understanding and development, human life phenomena, disease and the outcome of life and death were mysterious and adequate answers were not available. Thus, people were forced to rely on witchcraft and the power of the gods to gain a sense of control regarding survival and the alleviation of suffering. This was called the spiritualism view of medicine and was based on the intuitive understanding of human life and diseases as rough and primitive, thereby making it difficult to test hypotheses, so that little or no development could be achieved (2).

Teaching of medicine has occurred throughout time, but it began to flourish in the middle ages in Europe with a school of medicine founded in Salerno, then Montpellier, Bologna, and Paris, to mention a few. This allowed many students to study medicine in European universities, and made it a learned profession. Human medicine is constantly developing and the human medical model and view is constantly evolving. Humanity should be an important part of medical curricula all over

the world, to better the development of medical students.

The medical humanistic spirit, concerned with the psychological state of patients and their feelings is also something of which to take special note and students should be surrounded in humane medical practice, recognizing that humans should be treated as social people rather than as organisms. The humanistic approach emphasizes the need for medical students to understand and take the quality of their patients' lives seriously - teaching them the meaning of existence and helping them to understand the real values of humanity (3).

To Physicians

During medical practice, there should be a mutual agreement between the medical humanistic spirit and the medical scientific spirit, the integration of which will reinforce the development of medicine for physicians (4). Medical science deals with treating patients' diseases and finding a solution to their illness, while medical humanity makes a provision for supporting patients psychologically. Physicians need to understand this concept because the integration of these two beliefs is paramount to the development of medicine. While medical science revolves around the physical components of a patient's ailment, the medical humanistic spirit that physicians should exhibit, allows the psychological trauma of the patient to be addressed. A good doctor should possess both spirits.

The development of modern medicine has occurred through the spiritual elements as knowledge, experience, emotion, will, learning, etc. It should be understood that it is only with the consistent integration of the medical humanity ideology into medical science that medical development can be furthered to any great extent. When physicians recognize this patient-oriented approach, which is fundamental for development of human society, then the medical society can attain its full-grown development. Doctors who do not make good clinical decisions do not satisfy society; it is the ones who treat their patients with empathy, put them first and approach them with sensitivity to the diversity of culture that will satisfy society.

To Medical Supervisors

Medical schools in Mediterranean Europe have been hampered in development of the essence of medical

humanity in educating their students. However, the students exhibit and display a huge level of enthusiasm when asked if they would like be introduced to medical humanity in medical school. However, the introduction of medical humanity has posed challenges to medical schools (5).

Medical supervisors have a big role to play in integrating humanity into medicine for medical development. Every trainee doctor has a clinical supervisor who oversees his or her clinical work and gives appropriate and constructive feedback during training placements. They are trained to teach, provide competency assessment for trainees and provide feedback. They are also responsible and accountable for the patient's care and the doctor's training. The medical supervisor ensures the trainee doctor:

- Gets adequate and full training in the specific area of clinical care.
- Has a clear understanding of the safety of patients in his care as being his responsibility.
- Only carries out tasks without direct supervision until he attains such competence.
- Has enough training in understanding the equality, diversity, and human rights best practice.

The trainee doctor may not be able to do things without his supervisor present because his competence and experience are tailored from the level of supervision.

An enlightened clinical teacher or supervisor must always be encouraged to draw on his knowledge from a variety of subjects without feeling that specialists should have a demarcated job or assignment. Medical educators or supervisors should use their experience to initiate an interest in the humanity in their students. In clinical practice, there is an understanding that medicine has always been a blend of art and science, that the scientific view alone cannot provide effective management and diagnosis of patients, and that the human environment should be involved.

At what level should education in the medical humanity be delivered – during the pre-clinical undergraduate level, during clinical undergraduate level, postgraduate training or during the practice of the profession (6)? Ideally, it should be delivered at all of the stages of medical education as humane care, and is a necessity for all doctors at all stages of their career. As there may be some resistance among older physicians and medical practitioners who thirst for more traditional knowledge-based education in their professional development, this calls for the starting such education at

the undergraduate level. Another question is what professionals should take up teaching in the medical humanity. Experts in the humanity may be the best able to do this, owing to the knowledge they have accrued over time in their profession, although this may not be affordable in all cases.

To Medical Policy Makers

Sociology and cultural anthropology strengthen societal awareness of the importance of popular beliefs about human health and the hazards to health. Policy-makers must take note of this awareness; life and death become an important issue when a meaning is attached to the body. Extra focus should be placed on daily health and beliefs, as well as the healthcare routine in society as a whole. The contribution of policy makers can go a long way toward change, as demonstrated throughout its existence. The social history of medicine is now cognizant of human history and one of the most interesting developments recently has been the attention and concentration on beliefs about the human body, race, gender representations, etc.

Much attention is devoted to the western medicine because of its development that gives it a global uniqueness in several ways and the spread of western medicine doubtless owes much to the western political and economic domination. The politics of medicine has contributed at various times to attention on drugs such as quinine, antibiotics and others. There is every reason to see the future of medicine as an outgrowth of present-day western medicine. The roots of the western medicine can be traced back to the philosophical and religious traditions of the west. Stimulated by economic materialism, the politics surrounding the growth and importance of values from materialism became connected to medical development, its processes and its prospects.

Medical law makers have been striving to create laws that will govern the humanistic relationship in medicine, emphasizing a microcosm/macrocosm relationship, i.e. the correlations between the healthy human and natural harmony. Hippocrates stated that the essence of a balance determined health and suggested hygiene maintains a balanced constitution and it is the role of medicine to restore balance, once it is disturbed.

A greater focus on knowledge than health in medicine began with the emergence of anatomically based

scientific medicine, emerging from the Renaissance universities and the scientific revolution.

To Medical Educators

Over the years, the learning of medicine and the humanity have been tagged as archaic, traditional, overly factual and unable to adapt to the modern methods of education. This is where medical educators can make a change.

The study of humanity is subject to extrinsic pressure and medical educators can assist with this matter. The curriculum needs to be reviewed and examined, the mode of teaching adjusted and the quality of its delivery improved. Of course, the infrastructure also should be worked on to further support realization of these goals.

Incorporating the humanity into medical training will not be an easy task; much material has to be completed within four years, with curricula that are packed with skills, knowledge and many competencies, leaving little or no time for any other things. However, teaching humanity and human rights is crucial to producing doctors who will care well for all patients. Medical educators should have the goal of showing future physicians and doctors that humanity in medicine is too important to neglect. They should help students succeed in goals that are connected to cultural, social and economic dynamics. Medical educators create awareness for doctors that their patients' health is important and that they have to rise up as activists. It is the duty of medical educators to guide their students in understanding this dynamic and to let them know that taking the humanity into their heart is crucial for them to become competent physicians and compassionate citizens (7).

Syllabuses produced by colleges should outline the level of humanity knowledge expected of their members on examination. Recognizing that the essence of medical school is to train, equipping students with good clinical and other key skills, and to produce competent doctors, more funding is required to provide adequate training materials in the learning of medicine and humanity.

First, students must be willing to learn and receive training once they have the materials at hand. Furthermore, education materials must be provided at reasonable cost, which suggests that medical departments should agree on a link between the educational and financial ties with the departmental hospitals and other medical schools, to effectively organize and fund these materials, providing corresponding materials for medi-

cal humanity education. While there may be some objections that material is not relevant to medical education, if the profession is placing a focus on engaging patient-centered care, this argument must be made convincingly. Doctors are also advocates for the human rights of their patients (7). Educators, physicians, policy makers, and supervisors all need to participate in the preparation and composition of proper educational materials on medical humanity.

To Medical Journals

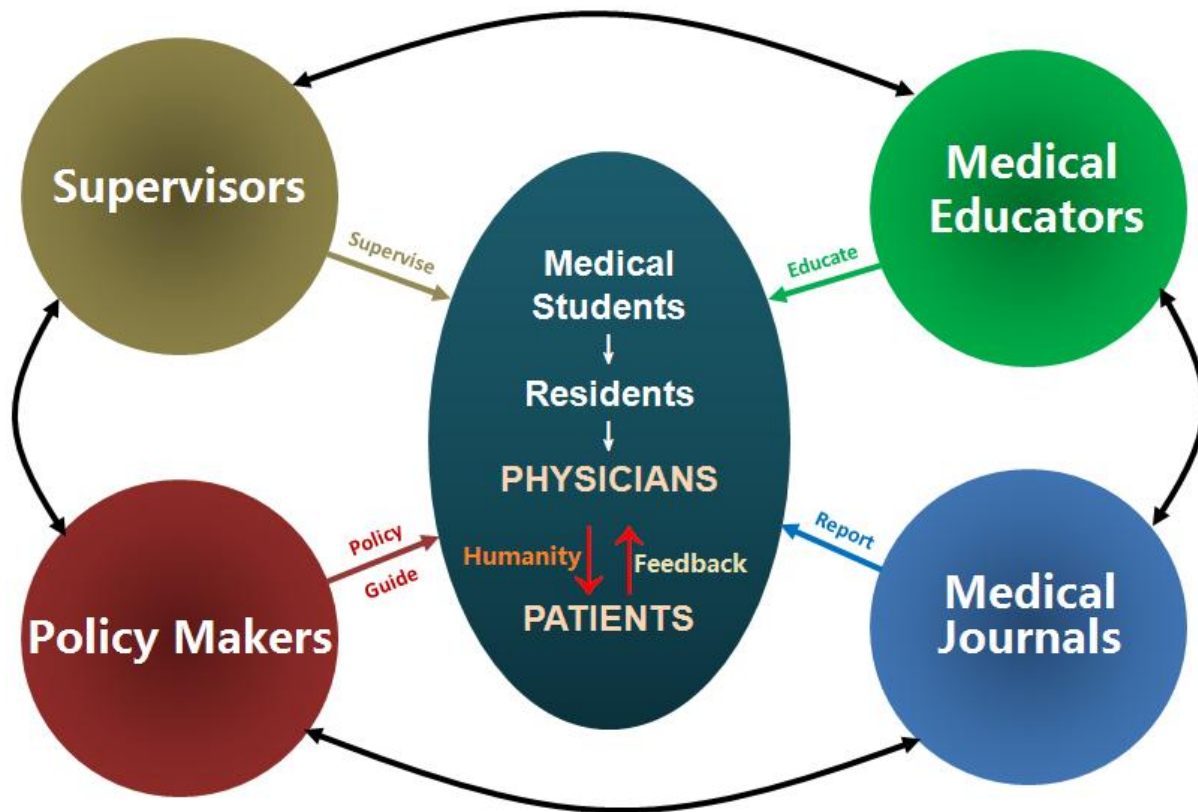
Great science, great exploration, and patients will be casualties unless health data are freely shared around the world. Since specialists practicing in nations with the greatest load of ailments have minimal access to medical journals and types of health data, and furthermore have minimal access to quality undergraduate or graduate preparation, general therapeutic journals must convey material that is of importance to all specialists, whether in rich or poor nations. A general medical journal ought to distribute material that is sufficiently detailed to help specialists and other health experts to practice medicine better. It ought to, as declared by the journal itself, convey instructive papers that provide insight. The journal should also assist in de-bunking approaches that are not evidence-based. While the journal should convey universal exploration, journal papers must be applicable and appealing to localized medical experts (8).

Journals can promote the value of ethics and humanity in the medical field, improving the ethics and related behaviors of those in the medical profession. We argue that it is the duty of journals to promote these activities and values of humanity. Special issues can be released regularly on medical humanity. Journals should cover routine studies relating to humanity and ensure stakeholders work to improve it. In their manuscript instructions, journals can give special notes on medical humanity. By writing special features on this topic, they will promote the importance of humanity to those in the medical field. Medical humanity should be regarded as a medical branch and papers published regularly.

Integrated reviving model of humanity education in medicine is depicted in **Figure 1**.

CONCLUSIONS

Figure 1. Integration of Humanity in the Medical Profession



Revive the humanity in medicine is not a sole task of physicians, rather an integrated responsibility for the whole medicine-related profession. In this modeled education system, every part plays its corresponding role in promoting the development of medical humanity, and communicates each other to forming an intertwining network. Supervisors, policy makers, medical educators, and medical journals are four major compositions of the system to serving and monitoring the establishment of the value of humanity within physicians. All these different parts need to concentrate on the complete system through watching over each other with the help of patients' feedback.

People relate medicine with hope. However, the presence of pessimism, unscrupulousness, deception and deceitfulness will lead to loss of trust and potentially, lives. Therefore, a legitimate monitoring system to screen for humanity in daily medical practice should be introduced. Further, the whole process of medical education and practice should be enlightened to the field of medical humanity. Future, doctors should have a sense of reasoning to focus on what it means to be patient-friendly rather than studying only the theoretical ambiguity. Students trained this way will come to under-

stand the patient language and show adequate empathy. Adoption of this training will add value to the medical education and practice, and give sufficient support to the social and ethical development of the society (9). However, more researches are needed to be carried out to precisely define humanity in medical training, such as studying the effect such training has on the physician's performance beyond medical school and residency (10). This is a reform, which requires an integrated system that is organized and incorporated to secure the establishment and development of medical humanity. ■

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Author Contributions: Dr. Changqing Wang had full access to all of the data in the study and takes responsibility for the integrity of the data and the accuracy of the data analysis.

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Acquisition, analysis, or interpretation of data: All authors.

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Critical revision of the manuscript for important intellectual content: All authors.

Statistical analysis: N/A.

Obtained funding: Bo Xie.

Administrative, technical, or material support: Changqing Wang.

Study supervision: Changqing Wang.

Conflict of Interest Disclosures: All authors declared no competing interests of this manuscript submitted for publication.

Funding/Support: This work was supported in part by the National Natural Scientific Foundation of China (71503040), Postgraduate Education & Teaching Reform Grant of Jiangsu (JGZZ15-010, JGLX15-005).

Role of the Funder/Sponsor: The funding supporters for this work do not have any role in determining and interfering with the publication of the work.

How to Cite This Paper: Mao P, Wang W, Wang Q, Xie B, Shen X, Sun L, Fu D, Guo X, Shen R, Wang C. A perspective analysis of humanity in medicine: How to revive? (Part II). *Sci Insigt Med.* 2017;2017:e000129.

Digital Object Identifier (DOI): <http://dx.doi.org/10.15354/sim.17.re066>.

Article Submission Information: Received, March 16, 2017; Revised: May 20, 2017; Accepted: June 03, 2017.

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