

Review (Narrative)

A Perspective Analysis of Humanity in Medicine: Current Situation (Part I)

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SUMMARY

Humanity is required in every field, whether a science or social science discipline. Medicine is described as a learned profession – an applied science combined with the literature and philosophy that surrounds the practice of the profession. Medical humanity is an essential area of medicine that majorly emphasizes the benevolence the physicians do on their patients. Recently, a decrease in the humanity of physicians and consultants toward their patients has occurred, especially in terms of the money, leading to dishonesty in the profession. The people working in the medical humanity should consider the worth in reviving humanity and promote the establishment of humanistic values through the use of different media, such as medical educational materials, journals, and a patient-centered humanity monitoring system. Such a reform requires an integrated system that is organized and incorporated to secure the establishment and development of medical humanity. ■

KEYWORDS

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

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INTRODUCTION

“**W**herever the art of medicine is loved, there is also a love of Humanity.” –Hippocrates (1).

Medicine, a learned profession, is the science and art of healing. It includes a variety of practice in health care with the sole purpose of maintaining and restoring health through the prevention and treatment of diseases and injuries. Every society has its own beliefs that guide and make provisions for conception, death and diseases. Medicine has always been very close to the arts; many great thinkers, such as Aristotle and Freud were physicians and many physicians from history had eloquence about disease and the practice of medicine, such as Hippocrates, Galen, and Osler. Until recently, healing has been mostly considered an “art”, but some doctors involved in questionable practices have remained prestigious, and some are fallible and fail to help their patients, but their fallibility goes unnoticed.

The humanity considers the stories and ideas that enable humans to make some sense out of our lives, introducing us to people and places that are otherwise unknown to us. The humanity is important in human lives because they help us to decide what is important and how we can make life better (2). The process of meeting people connects us to others, which allows us know what is right in our lives and history. It also enables us to address the challenges that our families, societies and nations bring to us. The humanity, however, should not be confused with "humanism," which is a philosophical belief; neither should it be confused with "humanitarianism," which is a concern for social reform and charity. The humanity emphasizes the analysis and exchange of ideas as a win-win situation as opposed to the creativity of the arts or the quantitative reasoning of science (3).

MEDICAL HUMANITY: A MAJOR BRANCH OF HEALTHCARE

Scribonius Largus (60 BC – 14 AD) provided one of the first descriptions of the nature of medicine and the physician’s duties. He gave the required qualities of the doctor as:

- i. Misericordia (compassion).
- ii. Professio (the intention of the oath).
- iii. Humanitas (kindness to fellow humans) (5).

Even many people in the fields of medicine do not completely understand the potential role of these three qualities or what it can achieve in the development of medical science.

In today's society, we see and define art and literature as tools that help humans connect with other people and

their cultures, something that can help doctors to connect with patients even before they meet (6). The way physicians demonstrate and exhibit empathy is central to the medical humanity and fosters its development. According to the National Library of Medicine, medical humanity is the intersection of medicine and the humanity disciplines, which have the ability to elevate compassion and empathy, along with science and data.

Dr. Helen Shin stated that medicine was a unique profession, and even though it was based a lot on learning science, the essence was interacting with patients who were sick (3). The ability to relate to the stories of people is an essential skill for a physician. Sir William Osler said, “The good physician treats the disease; the great physician treats the patient who has the disease.” Much attention is given to the patient-physician relationship from concerned healthcare organizations, patients, medical educators and others involved. Wilhelm Windellband (1894) described two types of knowledge: nomothetic and idiographic; students in the health profession require both. Nomothetic knowledge describes what is common to all, using general laws, while idiographic knowledge describes a particular event or experience with the historical facts. These two aspects of knowledge are obligatory for any subject. For medical humanity, the nomothetic connotes the general component that should be included in educating and training medical professionals, as students and as clinicians, and this should be a key teaching area presented and discussed in the classroom to help build empathy. The idiographic emphasizes the specialized side of medical knowledge that needs to be discussed with medical professionals throughout their life to ensure compassion is a cornerstone in their medical practice.

Without the humanity, a physician’s medical knowledge is incomplete and the therapeutic regimen will not function as expected. Without humanity study, physicians do not practice in keeping with the oath they make before starting medicine.

SCARCITY OF HUMANITY IN THE CURRENT MEDICAL PRACTICE

Medical professionals save and cure patients, and by this act alone, they are serving humanity at its peak. This profession is honored by all and has its own worth. However, along with the positives, we face many shortcomings of the medical practices based on our observation and routine experience. While many of these are minor, one is major: the scarcity of humanity in the current medical field.

Today, humanity seems to be worth less. People now place more worth on money than on lives. This leads to numerous issues. Burnout in medical practitioners has reached pandemic levels. When doctors experience burnout, they feel a loss of control and an absence of reward in their commitments. Osler (1849-1919), one of the most

distinguished physicians of the nineteenth and early twentieth century, recognized that only some doctors are happy in their professional lives. When doctors begin becoming burnt out, they no longer function with authority and motivational vitality. Instead, they become despondent and can sap vitality from others in the profession.

A number of reasons for the scarcity of humanity in medicine today can be hypothesized. The quantity of prepared medical services has been consistently deficient, but these deficiencies have increased as numerous nations have encountered monetary and budgetary troubles, and fragmented common administration changes (7). Overall, the ratio of healthcare staff to populace is low and has continued to decrease as new medical staffs have lagged behind population growth. Further, this issue can systematically undercut a whole practice by decreasing essential contact time between the caregivers and patients. Is there more value for money than human life? Greed makes people less humane, since they care only about money.

Lack of understanding by patients may be another cause of the scarcity of humanity. Patients that do not understand their condition and its realities, may assume that the doctor is right and will always cure the patient, but, in extreme conditions, this may not be possible (8). In addition, medical policy does not support or promote humanity. Policy makers may not consider the humanity perspective when they make policies. They only consider that which will benefit them by increasing their profit. Medical school also does not regard humanity as an important part in education. They may not include humanity as part of their program. They only teach physicians to be stubborn and this reduces their attention on humanity in their life. Humanity is too subjective to be monitored in practice (9). This lack of objectivity in monitoring humanity is bad thing and leads authorities to give up on monitoring humanity in medicine without even trying.

ESTABLISHMENT OF THE HUMANITY VALUE

Edmund Pellegrino (1972) recognized that abstract issues of ethics, if given solid and serious focus on the doctor-patient relationship, and incorporated into the basis of the medical knowledge (which are diagnosis and treatment) via the humanity-medicine two-way discussion become the values of the medical humanity (10).

Modern health care is complex and most patients find it difficult to understand, obtain and process, or communicate medical issues, maybe due to health illiteracy or to not understanding their health conditions. The information needed by patients to decide what is best for their personal care and treatment is what many practitioners do not provide sufficiently (11). In fact, when patients get the information, they often lack confidence in their own choices and become overwhelmed, something that does not help matters. The necessity for humanity in medicine can be

found in cases where those with low levels of health literacy are unable to adhere to simple instructions in taking their medications, probably because the practitioners have, in some ways failed to provide assistance, either presuming the patient had enough knowledge already or through a lack of concern (12). This is the case that humanity education should focus on. All health-related issues need to be considered from humanity perspectives to establish health sciences that can be used to guide the healthy lifestyle of all humans. Based on this, we suggest an approach to fostering medical specialists with humanity knowledge that will help them work with compassion. Knowledge of life sciences, basic medical sciences, and clinical medicine is of paramount importance to developing medical specialists, and humanity care is equally essential, and should work together with the textbook knowledge (13).

An important requirement of medical specialists is good education and a high level of humanity. Moreover, to succeed as a medical specialist requires someone who can rapidly incorporate social progress and reforms into their practice, and has a high level of insight and skills as well as the ability to apply them. The common subjects taught in medicine make provisions to assist students in acquiring a broad knowledge through studies of the humanity, along with the central curriculum providing the code of ethics, an essential skill for medical specialists. Therefore, the provision of specialized education and clinical practice in each department is targeted toward developing their insight and increasing their ability to apply skills. Humanity in medicine cannot be achieved simply through lectures or memorizing the norms (14).

Human qualities are the ethics that guide us to consider the human component when interacting with other people. They are the numerous constructive manners that create obligations among individuals and in this way lead us to have esteem for every person. Respect stands out as the most critical human trait for building up relations of peace. Respect is better comprehended when compared with different qualities: it is a manner that is more profound than politeness, near thoughtfulness, and drawing nearer appreciation. Without doubt, to respect somebody, one must have the capacity to welcome some of his/her human qualities, regardless of whether one values his/her feelings or past behavior. Discussions about confirmation, esteem, clinical learning, judgment, honesty and morals have led physicians and medical personnel to stand up to the epistemic premise of the humanity in their daily practice, reframe their examination of long-standing philosophical issues about ways of thinking, science, information and hone the connections among epistemology, morality, ethics and legislative issues. Firm steps should be taken to promote and revive these values in medical humanity.

CONCLUDING REMARKS

There is no single formula of what will make a good physician. Having good grades in science and medicine does not always mean a sense of mission nor does it automatically indicate the interpersonal skills to become a well-rounded and caring healer (13). In general, the best doctors are those with open minds and broad experiences in hu-

manity and science. As an interdisciplinary field, medicine also includes the social sciences and the arts (15), which educate students on how a social way of life interacts with individual experiences of illness and with the practical medicine. ■

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