

“Medical Humanities” in the age of technological and informatics medicine

We must take note of the radical changes in the medical profession: tumultuous development of technology, computerization, procedures, corporatization, financial repercussions.

The human dimension has been reduced to apparatuses, cells and chemical reactions. But the physician can not be reduced to a graph reader and the unwell are not just a mass of molecules. Today, every effort must be made to recover the plurimillennial agreement between the physician and the patient.

Human sciences allow us to rediscover the psychological dimension and the spirituality of the sick. A necessary return to the immutable foundations of “medical art” “art of medicine”. Each patient has a history that goes beyond the symptoms. The patient’s bed should return to the center of work. No doctors who graduate are taught how to deal with the patient and his family members.

Serious illness threatens the integrity of the unwell, with the collapse of identity accompanied by anxiety, depression and despair. Therefore, it is necessary, with the participation and involvement of the patients - in scientific terms “engagement” - to create an emotional and relational bond: empathy. The term “therapies”, care, must regain the original meaning of service. This is the task of the “Medical Humanities”, disciplines that offer a valid help to communicate humanity.

Authoritative institutions, societies and science centers hope to reformulate the curricula, extending the set of special biomedical disciplines to such knowledge in degree courses, graduate schools and courses of health professions, in particular nursing. Reference is made to: ethics, anthropology, sociology, psychology, history of medicine, end-of-life problems, palliative care, pain therapy.

Many believe that new students should receive, as a first impact, the teaching of “Medical Humanities” in order to understand better of what is expected of them, once they become doctors: a sort of “baptism of university freshman”. This fundamental formation should be interconnected, in terms of temporal continuity, horizontal and vertical integration with the biomedical disciplines, with a coordinator who follows the humanistic formation in the several years of the course.

In a shared medicine the doctor must explain, listen, communicate; fleeing the ephemeral, giving hope and security. Human medicine must be placed on the agenda of health problems. This need was recently reiterated also by the prestigious medical journal “The Lancet”.

At its last meeting the “Superior Council of Health” unanimously approved a substantial document - with a title equal to this editorial - drawn up by 22 teachers, scholars and scientists of different cultural backgrounds, where the above needs are presented to the Institutional Authorities of reference. For a good medicine.

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