Humanism is the basis of medicine throughout history. It aims to provide health care with honesty, empathy, compassion, altruism, and respect to dignity and beliefs of the patients and their families. Humanistic medical care improved health outcomes and enhances patients to adhere to medical advice and treatment options. Clinicians who are more empathetic towards their patients benefit from higher job satisfaction and less malpractice litigation. A lower level of empathy was associated with higher rate of practical mistakes. During the past four decades new technological devices have been extensively incorporated into medical practice. Physicians emphasized on the disease, use of technology, laboratory investigations, treatment and physical recovery and ignore patient psychological status, ethical and social cultures. These events abolished medical humanistic spirit. Teaching of medical humanities becomes a necessity to help medical students in their future career to do what they are already doing but in a more humanistic and empathic attitudes. Medical humanities can be taught through lectures, role modeling, and training in interpersonal skills, literature and arts study. Multiple tools can be used for assessments of humanistic attitudes and behaviors as observations during patient examination or history taking, simulations and quizzes. Medical organizations must value its members by concern for their well-being, growth, and development. It might employ experts having good humanistic knowledge and experience in interpersonal skills to qualitatively evaluate humanism among medical students.

Keywords: humanism, medical education, medical practice, health care, medical providers and patients. It reflects the respect of the health care members to values, cultural and ethnic backgrounds of others. When dealing with colleagues, humanistic behaviors include personal connections, respect, self-awareness, response to emotional expressions. Sir William Osler (1837-1901); who is considered by many authors as the father of modern medicine, advised his students with these words (Listen to the patient. He is telling you the diagnosis). Sir Osler also stated that (it is much more important to know what sort of person has a disease, than to know what sort of disease a person has).

What are the benefits of humanistic medical practice

Humanistic beliefs are the spirit of professional activity. No physician can be a true profession without having humanistic attitude. A good physician must possess not only accurate medical knowledge and skills but also he/she must have moral judgment and actions, kind attitude, trusting relationship with patients and their families. Physicians must consider that the patient has a body and soul, emotions, feelings, expectations, and fears. Clinicians who are more empathetic towards their patients benefit from higher job satisfaction and less malpractice litigation. A lower level of empathy was associated with a higher rate of practical mistakes.

Pellegrino stated that medical practice is a relationship in which two individuals interact. However one is in a more weak position than the other. The weight of the responsibility rests on the person with the higher degree of power and authority, and who has made a promise to help the other. Consequently responsibility lies upon the physician who can make the promise to the patient.

Humanistic medical care enhances patients to adhere to medical advice and treatment options, resulting in improved health care outcomes.

Sir William Osler stated that the physician-patient relationship could be flourished by good physician’s background in humanistic science. Promoting humanities among the medical practitioners was a battle that they lost. Osler suggested that educating of medical students should combine both medical knowledge and the humanities.

Introduction

The word Humanism is derived from the Latin concept humanities which refer to friendly behaviors and good attitude towards the others without distinction. It is characterized by personal principles and beliefs towards his/her duties and responsibilities when dealing with the others, especially those in need. The humanistic characters include honesty, empathy compassion, altruism, and care of patients with respect to their dignity and beliefs.

Humanism represents the basis of medicine throughout history beginning from the time of Hippocrates and the development of the Hippocratic Oath. Medicine has been regarded as a moral profession and carried out in accordance with a set of morals and ethics.

The first conference concerned with humanism; was held at Chicago University in 1933, recommended considering humanistic science as the basis of morality and decision-making in medical practice.

Arnold P. Gold Foundation reported that humanism is characterized by a respectful and compassionate relationship between the healthcare providers and patients. It reflects the respect of the health care members to values, cultural and ethnic backgrounds of others. When dealing with colleagues, humanistic behaviors include personal connections, respect, self-awareness, response to emotional expressions.

Sir William Osler (1837-1901); who is considered by many authors as the father of modern medicine, advised his students with these words (Listen to the patient. He is telling you the diagnosis). Sir Osler also stated that (it is much more important to know what sort of person has a disease, than to know what sort of disease a person has).
Why calls emerge to re-humanize medical practice?

One century ago the physicians were among the most educated individuals in their communities both in the clinical sciences and in the science of humanities. However the past four decades showed great advances in medical knowledge and new technological devices have been extensively incorporated into medical practice. Physicians emphasized on the disease, use of technology, laboratory investigations, treatment and physical recovery. They ignore patient psychological status, ethical and social cultures. These events abolished medical humanistic spirit. Such dehumanized medicine appears to have no past, no cultural language and no philosophy.

The physician-patient relationship had been broken. Computers no doubt increasingly help physicians to find knowledge quickly and easily. However these tools represented major challenges in current world due to the time pressures that may prevent physicians from listening to their patients and to concern to their problems. Any interpersonal relationship like medicine or education where human is in-between the patient and doctor, or student and teacher respectively, requires time to grow and flourish. However, in the practice of medicine; as anywhere else, the time has become greatly lacking.

As clinicians become time exhausted and overburdened they become multi-tasks (McCartney; 1995). They may do more than one duty at the same time. The quality of everything they do become simultaneously worse and diluted in the expense of the number of tasks they did.

Hunt et al. Serwint noted that physicians burn-out, fatigue, emotional exhaustion, depersonalization and decreased feelings of personal accomplishment can develop due to long working hours. Burnout dramatically affects the physician-patient relationship with consequent loss of empathy and distancing from patients whom feel a sense of abandonment and dissatisfaction with the health care providers.

How to achieve humanism in medical practice?

Since 1970 there was a trend towards incorporating medical humanities modality in undergraduate curriculum both in the United States and Europe and in many parts of the world.

In (1919) Sir Osler described the relations between basic science knowledge and the humanities stating his famous equate (The humanities are the hormones which do for society at large what the thyroid gland does for the individual).

Lewenson & Londrigan reported that modern society cannot flourish without health care professionals exhibiting strong background in medical humanities as they interact with the people from birth to death, in health and illness so they must be reflective, flexible, and comfortable with the care of their patients and communities.

Medical students begin their January in medical schools with great empathy and desire to help others. But the medical schools teach them solid basic sciences and escape the challenges concerned with human issues. Empathy among medical students declines as they proceed in their medical school. Current medical students lack the essential humanistic behaviors, such as empathy and communication skills. Incorporating medical humanities in medical school curriculum helps the students in their future career to do what they are already doing but in a more humanistic and empathic manner. It can foster critical thinking, understanding of personal values, empathy, cultural competence, leadership, and teamwork activities. Thus it prepares medical students to respond appropriately to complicated clinical problems. It advocates the medical students to achieve good behaviors into their future practice. Teaching humanistic values becomes a priority in medical education.

Medical humanities modality is concerned with the understanding of the socioeconomic, ethnic and religious background of patients and their families. In 1993, the General Medical Council in the United Kingdom reported the importance of the medical humanities and released its report; termed (Tomorrow’s Doctors) Downie. This report proposed a curriculum formed from interdisciplinary subjects including philosophy, anthropology, religion, law, history, cultural studies, arts and communication skills. The Council advised integration of this curriculum in the undergraduate medical education to promote skills, ethical and legal issues relevant to clinical practice and rights of patients in all aspects. The curriculum in medical humanities should be longitudinal and expanded throughout all years of undergraduate study as well as in continuing medical education.

Humanism and medical humanities can be taught to medical students through lectures, role modeling, training in interpersonal skills, literature and arts study and listening to video recordings of students encounters with patients. Small group teaching standardized patient exercises, clinical rounds, conversations and service-learning experiences can also be used as learning methods for humanism.

The role model is a term refers to a person or physician who is followed by students or learners to imitate his/her clinical experience, humanistic behavior, and teaching skills. It is a longstanding educational method and has been recommended for promoting humanism in medical students. Positive role models had high degrees of skills and knowledge. They emphasize the psychological and social aspects of medical care. They respect their patients and listen to them with attention and respond to their feelings and emotions. During teaching, they establish a reflective atmosphere with their students and win their trust as they are appropriately interested in and concerned for their students and patients. They can associate the human and moral dimensions of health care in the learning process of basic and clinical medical knowledge.

Assessments of humanism in medical education

Multiple assessment tools can be used for assessments of humanistic attitudes and behaviors among medical students. These methods include observations during patient examination or history taking or objective structured clinical examinations (OSCEs), simulations and quizzes. Qualitative assessment methods are preferred to determine the perception of students in the humanistic values and attitudes. These methods highlight the fact that the professional practice and humanistic values integrate disease and illness, thoughts and feelings. Medical educators must not forget that humanism is an interdisciplinary subject intermingled with the basic biomedical sciences.

Role of the organization and society in maintaining humanism in medical practice

Medical institutions depend mainly on technological principles. They are designed to deal with medical and surgical procedures, infection control, nursing and security. Physicians become humanistically inclined. The medical school must support teaching of humanistic values. Also standards and educational principles of the medical institutions must reflect humanistic values. They also must pay attention to and maintenance of patient satisfaction with the outcome of healthcare services. An organization culture must value its members by showing concern for their well-being, growth, and development. The medical organizations could employ experts with good humanistic knowledge, skills, and experience in the interpersonal skills to qualitatively evaluate professionalism and humanism among medical students.

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Conflicts of interest

The author declares there is no conflicts of interest.

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