



Humanistic Aspirations as a Propeller for Palliative medicine Education (HAPPE)

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Introduction

Data on physician burnout rates consistently demonstrate that the medical profession is struggling with decreasing empathy levels, prevalent depression and suicide. There is concern that the dramatic advances in the scientific and technological aspects of medicine have resulted in the de-emphasis of the “art of medicine”, resulting in decreasing empathy in physicians, job satisfaction and increasing depersonalised patient care and burnout. Data suggest that a doctor who finds meaning in his work has higher levels of empathy, is less burnt out and provides care that results in better patient care outcomes and satisfaction. The factors contributing to declining empathy levels are summarized in Table 1.

The medical humanities can be described as the use of methods, concepts and content from disciplines like literature, art and poetry to investigate illness and inform healthcare professionals how to better understand their professional identity with the aim of increasing self-awareness and improving humanistic care. It is hypothesized that narrative medicine, a form of the medical humanities which utilises stories of individuals as depicted in novels, literature, drama and poetry can help in addressing these factors by encouraging deep reflection, providing new perspectives, facilitating meaning-finding and comfort with uncertainty to promote empathy and build resilience.

Table 1: Factors contributing to decline in empathy¹

1. Individual variables	Personality traits, upbringing and experiences during adulthood
2. Individual distress	Burnout, depression and decreased quality of life is associated with decreased empathy levels.
3. Nature of medical practice	Uncertainties increase vulnerability of the medical practitioner and lead to negative coping mechanisms like depersonalisation and detachment from patients.
4. Learning environment	Inadequate and inappropriate role models and the hidden curriculum cause moral distress and reinforce misperceptions about “dehumanism” as an acceptable coping mechanism.

Methodology

Aim: To determine the feasibility, acceptability and efficacy of a humanities program that develops empathy in junior doctors doing a rotation in palliative medicine.

Intervention: All junior doctors (postgraduate years 1 to 5) rotated to the Division of Supportive and Palliative Care at the National Cancer Centre Singapore between July 2018 to June 2019 are invited to attend 2 small-group sessions each of 1.5 hours. The junior doctors have varying levels of prior training and exposure to palliative medicine and work in multidisciplinary teams to assess and manage patients with palliative care needs. The duration of each rotation ranges from 1 to 6 months.

Each session is conducted by 2 clinical psychologists trained in group facilitation. In the first session, the doctors are introduced to the novel “The Death of Ivan Ilyich”, which tells the story of a distinguished lawmaker suffering from severe existential distress at the end of life. Excerpts from the novel are then used to facilitate discussions on personhood, relationship-centered care and empathy. At the second session, the doctors are asked to bring along any arts-based material (paintings, literature, music, drama) and share with the group their reflections on why the material was chosen and how appreciation and/or critique of the art piece helped them develop empathy and patient-centered care.

Assessment: At the end of both sessions, the junior doctors are asked to answer a 5-question survey that elicits the feasibility and acceptability of the novel program via a Likert scale of 0 – 10 (see Table 2). Empathy levels are also measured pre- and post-intervention using the self-assessed Jefferson’s Scale of Physician Empathy and third-party-assessed modified-CARE (Consultation and Relational Empathy) measure which is completed by the team members of the junior doctors.

The proposal of this project received exemption from Institutional Review Board (IRB) review.

Excerpts from *The Death of Ivan Ilyich*

“In the province Ivan Ilych soon arranged as easy and agreeable a position for himself as he had had at the School of Law. He performed his official task, made his career, and at the same time amused himself pleasantly and decorously. Occasionally he paid official visits to country districts where he behaved with dignity both to his superiors and inferiors, and performed the duties entrusted to him, which related chiefly to the sectarians, with an exactness and incorruptible honesty of which he could not but feel proud. In official matters, despite his youth and taste for frivolous gaiety, he was exceedingly reserved, punctilious, and even severe; but in society he was often amusing and witty, and always good-natured, correct in his manner, and “bon enfant”, as the governor and his wife — with whom he was like one of the family — used to say of him...”

“It occurred to him that what had appeared perfectly impossible before, namely that he had not spent his life as he should have done, might after all be true. It occurred to him that his scarcely perceptible attempts to struggle against what was considered good by the most highly placed people, those scarcely noticeable impulses which he had immediately suppressed, might have been the real thing, and all the rest false. And his professional duties and the whole arrangement of his life and of his family, and all his social and official interests, might all have been false. He tried to defend all those things to himself and suddenly felt the weakness of what he was defending. There was nothing to defend.

“But if that is so,” he said to himself, “and I am leaving this life with the consciousness that I have lost all that was given me, and it is impossible to rectify it — what then?”

Table 2: Questionnaire on feasibility and acceptability

1. The time taken to complete the curriculum is reasonable.
2. The assessment of humanistic values before and after the curriculum is easy to complete.
3. The curriculum was useful in the development of humanistic values.
4. You would recommend continuing this curriculum for future junior doctors.
5. The assessment tool accurately reflects your levels of humanism.

Results

A total of 18 junior doctors completed the program. Table 3 summarises the scores of the post-intervention survey and the modified-CARE measure. Results from the JSPE are pending.

Table 3: Results of the survey and modified-CARE Measure

	Full score of questionnaire /scale	Range		Mean	
		Pre-intervention	Post-intervention	Pre-intervention	Post-intervention
Questionnaire on feasibility and acceptability	50	-	18-50	-	37
Modified-CARE measure	50	12-31	17-37	22.9 ± 5.8	28.5 ± 5.8

Conclusion

The novel humanities program to develop empathy in junior doctors doing a palliative medicine rotation appears to be feasible and acceptable. Preliminary data also suggests that the program is efficacious. Further research that includes qualitative data collection and analysis can elucidate conceptual frameworks on how the humanities impact physician empathy levels and allow refinement and development of similar educational programs.

Reference:

1. Neumann M, Edelhäuser F, Tauschel D, Fischer MR, Wirtz M, Woopen C, Haramati A, Scheffer C. Empathy decline and its reasons: a systematic review of studies with medical students and residents. Acad Med. 2011 Aug;86(8):996-1009.