



Compassion: The Art of Medicine

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Abstract

Compassion is necessary in clinical situations because they involve a medical response to suffering and carry respect, a desire to help, serve, and express solidarity. The use of the three “t’s” to express compassion has been suggested: talk, take time, and touch (Talk or listen, Give time and Touch or caress). Compassion is part of humanization and involves affection, dedication, respect for the other and considering the person in their total integrity. Doctors and nurses should invite the family to participate in the health care of their relatives. In this act the values and virtues that make up the moral formation and that are taught or reinforced in the medical school emerge.

Keywords: Compassion, Human Being, Doctor, Empathy, Respect

What is Compassion?

Compassion is a feeling of empathy towards other human beings, equal to us and the bases are respect, willingness to serve and solidarity. Compassion has received different definitions, from the Latin “compassio” it means with pain; other authors say that compassion comes from “cumpanis” sharing bread, and in palliative care it is mentioned that compassion “is the sublimation” of empathy.¹ Strauss mentions that the definition should include 5 elements: recognizing suffering, understanding the universality of human suffering, feeling the person who is suffering, tolerating unpleasant feelings, and motivating or acting to alleviate suffering. These elements have adequate psychometric properties.²

Why is a Compassionate Attitude Necessary in a Clinical Situation?

It is necessary to detect suffering and seek its solution when faced with the pain of others, feel like a human being and act as a doctor ethically and professionally. Compassion is the practitioner’s professional response to suffering. In short, the compassionate attitude is a feeling followed by immediate action for the benefit of the patient. For this it is necessary to have cultivated virtues such as

benevolence, compassion, intellectual honesty, prudence, gaining the trust of the sufferer and showing empathy.³

In What Cases or When Should Compassion be Used?

With every patient one must feel empathy, respect, fidelity, honest and courageous accompaniment that show knowledge, ability and willingness to provide comprehensive help to patients who suffer. All disease causes uncertainty, fear, physical suffering, loss of security and autonomy, depending on the temperament, education and religious feelings that one has, as well as the moments that are being lived.⁴ Compassionate use is imperative to relieve pain in patients resistant to analgesic drugs, postoperative pain, in patients at the end of life and others. In palliative treatment, accentuated use and learning of compassion is required.⁵⁻⁸ Serious diseases, those with an uncertain prognosis, those that do not have treatment, require us to get closer to the spirit of the patient, to know what they think and feel, and that as a result awaken or merit compassion.⁹ The neighbor shows in his illness disgrace, humiliation and the degradation that diseases cause. The care and assistance rescue people from this situation and the commitment to constantly mon-

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itor them until their health problem is resolved, reflects the ethical values that professionals must permanently exhibit. What role does empathy play? Empathic physicians understand that empathy is generated by focusing attention on the patient. A good technique to show compassion is the use of the three "t's" (talk or listen, take time and touch) that express Talk or listen, take time and touch or caress. Taking time to talk or listen to patients is comforting. The "mirror neurons" are brain cells that are activated by emotions, when someone performs an action or when the same action is performed by another individual. When we observe someone, mirror cells are activated by recognizing emotions. There are three main elements in the doctor-patient relationship: empathy, honesty, and authenticity.¹⁰⁻¹⁹

Is Compassion a Component of Humanization?

The humanization of health care is defined as a state of well-being that involves affection, dedication, respect for the other, considering the person in their total integrity. The authors point to a compassionate society, when there is an existential crisis of life in our human condition, which needs loving kindness and compassion in response to our vulnerability and suffering.¹¹ Humanization includes the incorporation of the family in health care and the commitment of doctors and nurses who invite them to participate. The interaction between patients and nurses has several stages until reaching empathy, compassion, affection and familiarity.¹² Perhaps an apt synonym for compassion would be humanity: treating the patient with compassion is equivalent to treating the other with humanity. This would lead us to emphasize the need to Humanize Medicine in all fields of the profession.¹³⁻¹⁵

Is Compassion Taught in Medical Education?

Medical knowledge is insufficient for effective education. Effective communication will help them decipher complex medical records and establish the necessary alliance with the patient to ensure optimal care. The continuation and extension of this practice will strengthen the empathy and well-being of your patients. Baker has embraced the proposal of the Schwartz Center to teach bioethics to clinical medicine students during the visit to hospitalized patients, making communication methods that help the well-being of patients transparent, and making them more compassionate towards themselves and others¹⁶ Shield mentions that in the pre-internship (pre-professional practice) students will learn various communication and compassion skills with patients and their families following the proposals of the Schwartz Center.^{17,18}

How is Compassion used Therapeutically?

To act with compassion, it is necessary that the values and virtues that make up moral formation emerge, and that the essential skills for compassionate care emerge.^{6,7} The patient is able to detect the sincere help that she is receiving, authentic help. The therapy focused on compassion would act on the system that regulates affect in people with great shame and self-criticism, in whom this threat affects the regulatory system dominating the orientation towards their inner world and the outer world.²⁰ Sinclair, who investigated

this topic in Palliative Care, indicates that the five senses of the professional must participate: listening, looking, speaking, touch and the way of approaching the patient.²¹

What role does Bioethics play in Compassion?

Training in bioethics is essential in clinicians so that they can solve bioethical problems. Even trained professionals many times will not be able to individually solve these problems and will require clinical Ethics Committees.²² The suffering of others in homes can have severe presentations, the presence of human finitude demands a bioethical response in which compassion emerges as an expression of the principle of beneficence.²³

How Often do Physicians Show Compassion in the Doctor-Patient Relationship?

The doctor-patient relationship has undergone changes and it is common for the results of treatment to be prioritized and the quality of human relationships to be secondary. The transitional model of physician compassion suggests that physician, patient, external environment, and clinical factors are important in overcoming the barrier of medical lack of compassion.²⁴ Compassionate care must be cultivated: the ability to look at the patient, touch him, translate knowledge into feelings in the context of others, and calm pain in addition to the ability to provide care separates us from protocols and operative procedures.²⁵ Studies in resident physicians confirm the importance of professional training in self-knowledge, compassion, empathy and the desire to do good to patients.²⁶⁻²⁸

Conclusion

A review is carried out on compassion linked to medical work and its importance in human relationships is highlighted by approaching our suffering patients, expressing respect, a will to serve and solidarity. The feeling of empathy towards suffering human beings complies with the principle of beneficence and the use of the three "t's" (talk or listen, take time, and touch) is recommended, with the professional's five senses participating. Focused compassion therapy is used therapeutically to regulate affect. The Schwartz Center's proposal to teach bioethics to clinical medicine students during inpatient visits to improve the quality of human relationships has been accepted, which has been extended to work with resident physicians, emphasizing the cultivation of compassion as an important part of moral training.

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Conflicts of interest

Author declares that there is no conflict of interest.

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