## **EDITORIAL**

## **Clinical Empathy in Graduate Medical Education**

Muhammad Shahid Shamim

How to cite this article: Shamim MS. Clinical empathy in graduate medical education. J Dow Uni Health Sci 2018; 12 (2): 31-32.

What is clinical empathy? "Empathy" is defined as the ability to understand the other person's emotions, feelings and reactions and to communicate that understanding to the person effectively. Clinical empathy is then the application of this process of understanding and communicating by a healthcare provider in his/her encounters with patients and their caretakers. The process, on the part of healthcare provider, thus involves thinking and feeling for understanding (cognitive domain), and acting for communicating the felt thoughts (behavioral domain) in a manner that improves patient's emotional state (affective domain). Sulzer et. al. (2016)<sup>2</sup>, in their review of literature on empathy, reported only one out of 109 publications that incorporated all three components (thinking, feeling & acting) of empathy in their definition. This publication defines clinical empathy as "the ability to listen to the patient, understand their perspective, sympathize with their experience and express understanding, respect and support".3

How does empathy help? One may argue that a physician only requires the scientific knowledge and skills for diagnosis and treatment of diseases. It does not matter whether the physician shows (or does not show) empathy to his/her patients if he/she has the required knowledge and skills to do the job. This is not true. The primary purpose of a physician's profession is to enhance patients' well-being, both physical and emotional. Therefore, I believe, a physician who does not

## **Correspondence:**

Professor Muhammad Shahid Shamim

Professor of Surgery and Health Professionals Education,

Dow Medical College & Dow Institute of Health Professionals Education,

Dow University of Health Sciences, Karachi, Pakistan,

Email: doctsaab@gmail.com

satisfy his/her patients' emotional needs cannot be considered committed to professional responsibilities. This does not imply that to show empathy the physician should share patients' emotions (and become anxious if the patient is anxious). It suggests that the physician should "address" the emotions of their patients. For example, there are several ways how a physician can respond to his/her patient who refuses to take medication for illness. One response could be to try to convince the patient with scientific reasoning by giving advantages of taking the medication and consequences for not taking them. Another way would be to try to understand why patient is refusing. Both responses show physician's good intentions towards his/her patient-care. However, the latter method is more likely to emotionally satisfy the patient and have higher chance that the physician may succeed in his/her intentions. Literature on physician empathy also support this view. There is evidence through empirical research that shows empathy to be helpful in improving patient outcomes, not only in terms of patient satisfaction with psychological interventions but also in therapeutic interventions. 4 In addition, empathy has also shown to be a factor for enhancing satisfaction for the medical professionals. Physicians who show empathy towards their patients are found to be more satisfied with their work, are less stressed, and enjoy better overall health.6,7

Empathy in medical education: Effective communication in clinical encounters is one of the primary learning outcomes in graduate medical education. The national and international medical registration bodies consider empathy to be a basic component in the competencies to be acquired in undergraduate medical education. This is reflected in PM&DC curriculum, that deliberates empathy as a vital part of attributes for developing medical professionals. Hence, professional

bodies and medical educators increasingly recognize the importance of empathy. However, consensus is still lacking on how to teach, assess and evaluate empathy in medical education, especially from a culturally relevant perspective. Studies conducted in Pakistan have shown significantly low levels of empathy in our medical students. 10,11 Though the studies are few with small samples, however, the findings are alarming. They reflect on the need to enhance students' learning for empathy in our medical curriculum. This can be achieved if our educators and educationists deliberately focus on the issue of improving the curriculum for ethics and professionalism, that incorporates clinical empathy.

## **REFERENCES**

- Miller-Keane OT, O'Toole MT. Miller-Keane encyclopedia and dictionary of medicine, nursing, and allied health. A Book. 7th ed. Philadelphia: Saunders 2003.
- 2. Sulzer SH, Feinstein NW, Wendland CL. Assessing empathy development in medical education: a systematic review. Med Educ 2016; 50:300-10.

- Shanafelt TD, West C, Zhao X, Novotny P, Kolars J, Habermann T et al. Relationship between increased personal well-being and enhanced empathy among. J Gen Intern Med 2005; 20:559-64.
- 4. Mercer SW, Reynolds WJ. Empathy and quality of care. Br J Gen Pract 2002; 52:S9-12.
- Suchman AL, Roter D, Green M, Lipkin Jr M, The Collaborative Study Group of the American Academy on Physician and Patient. Physician satisfaction with primary care office visits. Med Care 1993; 31:1083-92.
- Roter DL, Stewart M, Putnam SM, Lipkin M, Stiles W, Inui TS. Communication patterns of primary care physicians. JAMA 1997; 277:350-6.
- 7. Halpern J. What is clinical empathy? J Gen Intern Med 2003: 18:670-4.
- 8. PMDC HEC. Curriculum of MBBS. Islamabad: Higher Education Commission 2011; 1-70.
- 9. Shamim MS, Baig L, Torda A, Balasooriya C. Culture and ethics in medical education: The Asian perspective. JPMA. J Pak Med Assoc 2018; 68:444-6.
- Tariq N, Rasheed T, Tavakol M. A Quantitative Study of Empathy in Pakistani Medical Students: A Multicentered Approach. J Prim Care Comm Health 2017; 8:294-9.
- Tariq N, Tayyab A, Jaffery T. Differences in Empathy Levels of Medical Students Based on Gender, Year of Medical School and Career Choice. Journal of the College of Physicians and Surgeons--Pakistan: J Coll Physicians Surg Pak 2018; 28:310-3.

