Despite increasing interest in incorporating Medical Humanities in undergraduate medical education, the discipline often suffers from a lack of clear definition in terms of scope, purpose and clinician engagement, and as yet rarely attracts the degree of postgraduate and research activity generally associated with substantive academic disciplines. This confusion is reflected by high degree of variability in the range of topics included under the rubric. One Irish University includes global health as a part of Medical Humanities, possibly to the detriment of the definition of each discipline - and there is tentative investment at best by Irish universities in the infrastructure of such courses.

Without a clearer focus, the project risks marginalization, as outlined by the critique of the American poet Raphael Campo: "no conception of the medical humanities compels, caught somewhere between manifesto, mushiness, and marketing lingo. Without a clearer focus, the project risks marginalization, as outlined by the critique of the American poet Raphael Campo: "no conception of the medical humanities compels, caught somewhere between manifesto, mushiness, and marketing lingo. Without a clearer focus, the project risks marginalization, as outlined by the critique of the American poet Raphael Campo: "no conception of the medical humanities compels, caught somewhere between manifesto, mushiness, and marketing lingo.

Medical Humanities – Serious Academic Pursuit or Doorway to Dilettantism?

Abstract:

The development of medical humanities will generally be within the following rubric of teaching professionalism, within which is included clinical ethics and the medical humanities. Within this framework the medical humanities provide not only content but also helpful educational tools. Much of the practice of medicine is complicated and rich in ambiguity. Metaphors are a good medium for explaining complexity, and artists often provide the best metaphors; examples include illuminating professional etiquette, dignity in disabling illness and the challenges of apparent in health care.

The medical humanities can also benefit from newly evolving research and academic debate on the Medical Humanities, including reflection on its content, who determines the curricula, who teaches this curricula and to what ends. This body of knowledge can facilitate curriculum design which incorporates medical students' interests of existing programmes, including content (perceived relevance and consistency), teaching (credibility of teaching staff and perceived personal intrusiveness) and positioning with related topics within the curricula.

Careful linking with physicians in practice is absolutely critical to ensure relevance and avoid a disconnect between what is taught and what is practiced. last students and staff become cognizant of the gossips. A helpful model has been developed in Ireland for the teaching of medical humanities, which is based on a template, and physician leadership is likely to be vital in the development of curricula for both professionalism and the medical humanities. A major challenge to developing a Medical Humanities programme is the persisting perception of a dichotomy between the practice of medicine and the humanities.

Although there are clearly strong elements of the basic sciences inherent in the practice of medicine, there is an increasing awareness that medical students and doctors are not an inarticulate group of aesthetic illiterates. A number of studies have shown that a high proportion of doctors are interested in the arts and humanities, but there is no evidence that humanities training is associated with any improvement in patient care. However, we can be heartened in our pursuit of critically informed and relevant medical humanities programmes by emerging research that doctors who pursue cultural pursuits are more likely to display vocational engagement – a key indicator of professionalism.

References

14. O’Neill D. Hanging on to the trust of patients is no laughing matter. The Irish Times 2011 5 May
21. The development of medical humanities will generally be within the following rubric of teaching professionalism, within which is included clinical ethics and the medical humanities. Within this framework the medical humanities provide not only content but also helpful educational tools. Much of the practice of medicine is complicated and rich in ambiguity. Metaphors are a good medium for explaining complexity, and artists often provide the best metaphors; examples include illuminating professional etiquette, dignity in disabling illness and the challenges of apparent in health care.

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