

Humanism in Medicine¹

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Y: Today the issue we will be discussing is concerned with the humanism in medicine. This issue is not only originated from a variety of puzzles in this special field, but it is also grounded in some wider intellectual tradition and the current status of society. In the present time, some passionate discussions about the health system reform in China are engaged more from the economic perspective and rest on the level of political decision and institutional design, and yet ignore the humanistic dimension in medicine which is arguably of much more importance. Given the dominance of ideas over people's mind and action, it would be seriously incomplete and halfway to ignore the dimension in question while reflecting on and discussing the issues present in the field of medical and health care.

Z: We insist that the health system reform should be reflected from the perspective of the humanism. That insistence is virtually to inquire into the final goal of the reform in question, for example, whether it is to increase the quality of medical service or strengthen the economic management in hospitals, whether it is to decrease the medical cost or improve people's health? Of course, it may be said that all these goals are interrelated to each other. However, we can still subtly discern the value orientation of different reform plans from the arrangement of various actual reforms of health system.

Y: If the establishment and reform of a health system had not yet fully taken into account the special requirements of the humanism in medicine, then it would give rise to huge problems. Now once medicine is mentioned, what one can usually has in mind is the high-tech medical equipments, ICU, laboratories, and so on – in a word, all those things that are brought to close to the field of science and technology. Accordingly, the humanistic dimension is becoming increasingly remote.

The relationships between the humanities and science & technology have incited many

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discussions either at home or abroad. And the humanism in medicine can be understood by placing it into this wide background. An important theme involved in these discussions is the birth and evolution of humanism. It is obvious that the theme cannot be fully covered by the short dialogue between us, and thus what we can do is only sort out several significances from this intellectual tradition of full vital force to discuss the humanism in medicine and its actual absence.

I . Humanitarianism

Z: It seems to me that the first significance, namely, the most general one, is humanitarianism which may be understood as beneficence and universal love. Given the intrinsic nature and purpose of medicine, it may be said that it is a subject full of humanitarian tradition, and practicing medicine is also a profession filled with human kindness. Medicine provides help for people who endure bodily diseases and suffer from mental pains, and doctors' work rescues people from sufferings directly. Therefore, medicine is called "the art of beneficence" from the antique China, and is regarded as "the most beautiful and noble one in all techniques" in the west. The beneficence and universal love embedded in medicine is hardly directly embodied and reached in all other subjects.

Y: Sun Si-Miao, the most famous doctor in the ancient China, holds that a great doctor must first of all possess the deepest and widest heart of beneficence, and that such a doctor must swear to rescue the folk from diseases and sufferings. He feels himself in the same state when seeing that the patient is plagued because of disease, and he holds a deep sympathy for the patient from his inner heart. He must assume a universal love for every patient, whatever position the patient is in, whether rich or poor the patient is, whether beautiful or ugly the patient is. In diagnosing and treating the patient's disease, he should not consider his own gains and losses; instead he should save the patient with his whole-heart and all his skills. These remarks from Sun Si-Miao fully reflect his commitment to and endorsement of the humanitarianism implied in the medical profession.

Z: With the development of industrialization and urbanization, and corresponding growth in population, the beneficence and universal love in medicine is also extended from individuals to groups, from sparse personal service to the development of a social institutionalization. Especially, since the eighteenth century, humanitarianism has played the keynote for the foundation of the health system. The problem concerning the health of citizens was no longer simply a matter of the citizen's own, rather it was incorporated into the range of responsibilities of the state or the society, and thus securing the health of citizens also became a goal the government must seek for. Some scholars have established three most basic ethical principles as those which the state's health system must follow, namely, providing medical services on the basis of the needs, emphasis on securing the interest of the disadvantaged groups with respect to the distribution of medical resources, and respecting the right of citizens to health.

Y: However, I think that the sympathy and beneficence characteristic of medicine are not unlimited too, and in fact cannot be completely well done because of the limited resources.

Insofar as the issue of health is concerned, and especially since many diseases are closely related to the eating habits and the ways of living, it is also very important to insist on the responsibility one should take for one's own health. The new humanist Irving Babbitt once used a quite proper metaphor to describe the fantasy to solve all problems merely relying on the benevolent behavior: Doing so is much like grasping one's own hairs to leave the earth – it is practically infeasible, and it is even incompatible with justice.

Z: However, the modern government's responsibility for the basic medical security for all citizens cannot be weakened. Medical security is an important constituent of the whole system of social security, and it is also the basic precondition for promoting a harmonious society. In fact, according to the German pathologist Rudolf Virchow, politics is, in its widest sense, nothing but medicine.

Y: Exactly. When we evaluate the success or failure of the health system reform in China, we will have to ask the question: whether the government has taken its own responsibility for the reform or not? Recently the officials in the Ministry of Health acknowledged that the health service in China still doesn't meet the growing demands of people, and the gap between cities and rural areas with regard to the health service is still huge. The development in the cause of health service is seriously left behind the economic and other social causes, and thus faced with serious challenges.

Z: From this it can be seen that in the present discussion of the health system reform in China, the administrative departments in question have come to realize that improving the health of the whole citizenry is an important goal of national economy and social development, and it is also an incumbent and inviolable duty for the cause of health service.

II. Cultivation of Ideal Humanity

Y: In tracing the significances of humanism, we can sort out another meaning of it from the rich and yet confusing literal senses of its Latin's origin word "*humanitas*", namely, recondite learning, good upbringing, delicate taste, balanced awareness, deliberate conduct, and so on.

Z: Hippocrates, the father of medicine, once held that a doctor should possess all the qualities an excellent philosopher has, such as altruism, ardor, noble performance, the ability to do serious thinking and make cool judgment, leading a pure and simple life, having all the knowledge useful and necessary for living, lack of jealousy, and the like.

Y: This is a demand for an integral personality, and also a description of ideal humanity. Then, how can a doctor meet the demand? The answer, I think, lies in the education of the humanities.

In fact, the term '*humanitas*' borrows its very sense from the Greek word '*paideia*' which is related to the upbringing and training of humanity, and somehow similar to the ancient Chinese understanding of the '*Renwen*', which means the cultural cultivation of human beings in Chinese. The appeal to humanism in the Renaissance contains the study and education of classical

humanities. In talking about the term of the humanities, it refers roughly to such subjects as literature, history and philosophy, which occupy a very less weight in the curriculum of the students majoring in science, engineering and medicine in China today. This gives rise to a very serious problem, embodied in the fact that those students do not concern themselves with the relationships between their majors and general culture, and between their majors and social problems. Consequentially, they are universally lacking in the humanistic concern. This problem is especially serious for those who are either medical students or medical professionals, for medicine does not simply have the character of natural science, but it is also filled with the humanistic dimension in itself. In fact, this dimension is internalized in the research and practice of this subject.

Z: It is for this reason that in the recently revised edition of *Cecil Textbook of Medicine*, medicine is described as a humanitarian profession which calls for erudite learning. In the WHO's guidelines for the quality of the education of medical students, medical humanities are listed as core courses in contemporary medical education.

The demands of contemporary medicine for doctors are constantly increasing. Since 1970s, the transformation from biomedical model to bio-psycho-social model has begun to change people's views about health, disease, life and death in a fundamental way. In the scenarios of contemporary medicine, a doctor does not simply plays the role of providing medical and health care, that is, providing medical services on the basis of the diagnosis, treatment and healing of patients. In addition, a doctor should play the following important roles: decision-maker, namely, making comprehensive consideration and rational choice of new medical technologies from the perspectives concerning morality, cost, and so on; health-educator, that is, a doctor is not merely to diagnose and treat disease, but he/she should take the task of health education, effectively strengthening people's awareness of protecting their health; community-leader, namely, the ability to participate in making decisions about community health care, balance and coordinate the requirements of individuals, community and society for health care; service-administer, that is, promoting the development of the cause of health service in conjunction with medical departments and other social institutions.

The "five-star" standard for doctors actually reflects the whole quality the new medical model requires doctors to have. In other words, only those doctors who possess both solid and wide knowledge and humanistic concern can win the patients' trust, and undertake the social responsibility of contemporary medicine.

Y: It is evident that such a "five-star" doctor will not only immerse himself/herself in clinic, sickroom, and labs; instead he/she will be self-consciously concerned with social reality, and has his/her own voice to speak out in such events as the health system reform since it is what he/she is supposed to do.

The change in medical model you just mentioned is indeed an important event in the development of medicine. The new model requires not only that a doctor have the whole quality mentioned before, at the same time it also requires that the doctor regard the patient as one of

integrity to deal and treat with. I remember that Prof. Wu Jie-Ping once said that what doctor seeks to look after is “a *person* with disease”, not merely “the disease a person suffers from”.

Z: This remark is very incisive. In fact, it is common to the ancient eastern and western medical thinking to insist on the integrity of human body, and on the harmonious unification between human body and nature. A doctor not only should take care of the diseased part, but he/she also should promote the healing of the patient from a holistic point of view. Because the discomfort in the patient’s body can also result in mental pains, the patient will suffer from double oppressions both in body and in mind. So, doctor’s comforting of the patient’s mental pressure will also be helpful for the healing of the patient’s bodily disease. Ancient doctors emphasize that curing disease is inseparable from caring for patient. Since medical resources in ancient times are very limited, such emotional concern as sympathy, care and comfort for the patient will be more important.

On the other hand, insofar as diseases are themselves concerned, the factors influencing their occurrence, development and crisis are multiple-dimensional. Hippocrates holds that climates, terrains, and natural environments can have great influences on human constitution and health. In the ancient Chinese medical classics *Huang Ti Nei Ching*, it is also indicated explicitly that diseases are influenced by such factors as seasons, ways of living, emotions, chaos caused by wars, and so on. Thus, Sun Si-Miao holds that one needs to have many-aspect knowledge in order to become an excellent doctor – one needs to have some deep understanding of not only medical classics and herbal books, but also general history, philosophy and culture.

Y: Therefore, in order to increase the integral quality of doctors, at the present, many medical schools in China have begun to put emphasis on the education of medical humanities which include the history of medicine, philosophy of medicine, medical ethics, and so on.

Z: Exactly. However, insofar as the current status of medical education in China is concerned, the education of medical humanities should not be seen as a kind of decoration, instead it should be viewed as something urgent and mandatory. The tensions, controversies and lack of trust between doctor and patient can be attributed to the indifference to the humanism in medicine. The deeper reason of the indifference can be traced back to some philosophical assumptions in modern medicine, which we can make some further inquiry into.

III. The Self-Understanding of Human Beings

Y: By “modern medicine”, it is meant the medicine subsumed under the paradigm of modern science, namely, the so-called ‘scientific medicine’. The Scientific Revolution occurring in Europe during the sixteenth century and the seventeenth century founded the basic framework of modern science, and at the same time offered a mechanized picture of the world. In Newton’s eye, the world is no longer an organism that is in the process of constant change and generation, instead it is a huge machine that operates in accordance with natural laws. This metaphor covers the whole organic world, including human beings.

The Cartesian thesis that the human body is an automatic mechanism and the dual distinctions,

resulted from his dualism, between mind and matter, reason and emotion, freedom and necessity, create a series of philosophical puzzles. However, for the new science built on mathematical and experimental basis, it seems that things are so evident, and human reasons are so thorough in uncovering the secrets of nature. Alexander Pope's exciting poem is repeatedly incited to applaud that the appearance of Newton makes everything evident as light.

Francis Bacon, a forerunner just important as Descartes, proposed the view that the value of knowledge growth consists in its use for human beings. The acquisition of knowledge is not only for the purpose of discovering the secrets of nature, but it also should help human beings to control and manipulate nature, so that it can provide comfortable and pleasant lives for human beings.

Owing to the gradual combination of science and technology after the Scientific Revolution, and the unification and socialization of science and technology brought about by the "big science" of the twentieth century, human efforts to make use of nature by controlling and altering it on the basis of the power of high-techs seem to have achieved unprecedented success.

Z: It is these ideas and practices above mentioned that ground the birth, development and existence of modern medicine: it is a quantified and precise science; it is built on the basis of experiments; it rests on and advocates the power of high-techs. Before that, diagnosis of disease merely drew on doctors' techniques of diagnosis. By contrast, in the last two centuries, huge changes have occurred in medicine, and various modernized instruments have become the foundation of medial diagnosis. Doctors' reliance on these instruments becomes more and more strong, and their focus of attention is transmitted from a holistic person to the local lesion and the related changes in data. The establishment of special disciplines and sub-disciplines in clinical medicine according to different situations or types of disease reduces a integral patient to the impairment or malfunctioning of some part of organism, and thus treats the patient as biological machine which is in the need of repairing and changing components. The reductionist approach of thought makes death seen as the deconstruction of molecules, disease as the abnormality of cells or molecular structures.

The development of specification of medicine is further embodied as the decomposition of medical procedure. In the terminology of modern medicine, the word "patient" is decomposed into such single word factors as causes, characteristics, and symptoms of disease, and the pain of the patient is transformed into quantified data and images in test results. Consequentially, the patient taken as a whole gradually disappears from the procedure of modern medical diagnosis and treatment. Even though the concern for patient is still mentioned, it has become a matter outside of the category of medical sciences. This is the leading reason why the humanistic concern in medicine becomes indifferent or even completely absent.

Y: In fact, in the Renaissance, early in the fourteenth century, Francesco Petrarch, who carried forward the humanistic tide of thought, had indicated in his "Charge of Doctors" that "if you are a machinist, then do what you are supposed to do, go to repair human body, as long as you can succeed." He criticized the doctors' attempt to "make the art of freedom subject to the art of

mechanism.” The hope to have genuine understanding of human beings themselves and the concern with the human experience of living constitute the essential characteristic of early humanists. However, what the new science did is precisely the isolation and abstraction of human beings by means of using its universalized principles and methods and a series of dualist categories. A person is understood as characterized by universal and abstract reason, which is seen as what makes human beings as *human* beings, and which is thought to ascribe human beings the power to manipulate and control nature, human beings themselves included. However, reason is susceptible to becoming a purely instrumental power once reason is separated from special cultural context, and human beings are peeled off from the concrete traditions in which they live and from the emotional attachments which reason despises.

Z: Doctors pay more attention on the body of the patient and ignore the feelings of the patient, precisely because the matters of body can be measured while the matters of emotion cannot. Moreover, doctors believe that if the former kind of issues has been solved, then all other issues will also be solved. Rapidly renewed techniques of diagnosis and treatment make doctors spend more time immersing in labs, instead of listening to the statements of patients and talking with them beside their beds. The operating procedures in hospitals are rarely concerned with the feelings of patients, which may be attributed to the fact that the instruments that can effectively measure fears, plagues and disfavours have not yet invented. Medicine has been transformed from the art of talk into the application of silent skills. Even what are manifested from the patient’s informed consent are also doctors’ skills and strategies, and the written statement of this consent becomes a mere contract written in a paper which provides a procedural protection for doctors. This is the manifestation of the fact that instrumental reason dominates everything, while the so-called value reason is hidden out.

Y: In addition to reason, another key word we need to talk about is ‘progress’. During and after the Scientific Revolution, mathematics, physics, chemistry, and biology all found what Kant calls “the secure path”, and thus alternately step onto the royal road of progress. Scientific medicine, as distinguished from empirical medicine before it, also becomes an exemplar of progress. The world as understood in the ancient civilization is the one which constantly repeats itself in a circle or is in the process of constant degeneration and corruption. When the Scientific Revolution brings a brand-new climate, people feel that they can finally escape from the pessimistic taste which the old worldview brought. Time no longer, as Horace holds, derogates the value of the world; instead it promises a beautiful future for human beings: human beings can constantly make progress along a certain direction by means of their own power, and will finally entertain the conditions of universal happiness. Coupled with some rough and distorted understanding of biological evolutionism and constantly flourishing material life, this prospect ascribes progress with some inherent necessity in history on the one hand, and endows the necessity of progress with the humanity itself on the other. This is a modern understanding of humanity, and this understanding binds human beings to the roaring forward chariot with the sharp arms of science and technology, challenging and conquering nature. However, it can never self-consciously stop for a while, asking about the direction and the aim of going forward and the resulting consequences.

Z: In medical field, we are faced with the same thing. The thesis of technology perfectibilism, which is formed with the rapid development of medical technology, blocks people into the ambitious fantasy of medicine: everything that can be done must be done. It is held that human beings can win over all sufferings, all organs in a human being can be replaced after impaired just as components of a machine, and human being will finally be able to counterme death. In the war metaphor of modern medicine, disease, deformation and death are all enemies. But this metaphor ignores the fact that those things are closely intermingled with life itself, and intrinsic to the natural unfolding of life.

Y: The optimistic idea arose after the Second World War when several kinds of infectious disease were successively controlled under the use of antibiotics and vaccines. It is thought we can acquire the power to destroy disease with the constant progress in science & technology and the constant development in economy. However, the expectation in question, just as other expectations of progress in wider domains, breaks down like soap bubbles.

In the present, the spectrum of diseases has changed a lot. In many areas of the world, the morbidity and mortality of non-infectious diseases such as cancers, hypertension, diabetes, and depression are rising. The appearance of aged society makes it that a large portion of social members is in the state of extending their life with disease. Certain infectious diseases which had been under control now begin to arise from the dead ashes, and at the same time new infectious diseases constantly emerge. Insofar as the prevention and treatment of infectious diseases are concerned, if we were to continue to use the war metaphor, then there would always be some arms race between human beings and pathogenic microorganisms. Given the evolutionary advantage of microorganisms, what we can say at the moment is only that this is a war whose success or failure cannot be foreseen. Modern means of diagnosis and treatment are indeed much richer than before, yet we will still feel our nail-biting in the face of the current status of development in the spectrum of diseases.

Z: This reminds me of the saying that “sometimes to cure, and often to help, and always to comfort”, which got its birth from the past times when the means of diagnosis and treatment are seriously limited, and yet which is, in my view, also applicable to the present. Helping those who are disabled and dying and who are prolonging their lives with diseases to adapt to their limited lives, requires medical workers to give patients emotional care and humanistic concern.

IV. In the Name of Innovation

Y: “Progress” as the inherent historical inevitability is after all a dazzling illusion, just like a beautiful myth. Genocide, power politics, terrorism, ecological crises, social injustice, gap between the rich and the poor still live with us, and even become more and more serious in some aspects. All these aspects constitute direct or indirect threat to human health and life. In 1977, the World Health Conference made the strategic goal of “all people for health in 2000”, and yet the goal is still far way from its realization thus far. The universal happiness promised by the idea of progress is so remote that it has been seen as an idea in its thorough death.

Nevertheless, an alternative surfaced in the last decades of the twentieth century – innovation. In nowadays, information technology and biological technology are two areas with the greatest investment. We are encircled by various new play-things that are highly priced and dazzling so that we cannot recognize ourselves clearly. Elites in these areas drive their chariots rushing forward, seek for such goals as technological breakthrough, stock coming into market, corporation development, and so on. In the field of medicine, companies of biological technology and pharmaceutical ones are being busy in studying high-tech new products. What the brand of innovation brings is a huge space of profits.

Z: Modern health system is transforming itself into “medical-industrial complex” which is controlled by those companies in question together with the medical circle, whose goal is “high-techs – high costs – high profits”. A potential motivation for advocating the high-techs is for the purpose of seeking greater economic profits. Some western scholars point out that medicine is “led by elite that sometimes seems primarily interested in extending its technical prowess, with scant regard for ends and values, or even the individual sufferer”. According to another sharp criticism, just as we don’t believe that ammunition industry is aimed to protect the security of the state, we will also hardly believe that the industry of medical and health care is aimed to promote people’s health.

Y: Recently the question is repeatedly emphasized in the UN Development Report of Human beings: why are the technological improvements and innovations that can help the poor always so sparse? Technological elites seem to have never considered the question; on the contrary, they are quite satisfied to see that the gulf between the need of the ordinary people and technological innovations become more and more huge.

Z: It should be noticed that at the present certain ‘high-techs’ that are extremely cried up are in fact neither brilliant nor highly effective – they are only highly priced. American famous medical scientist Louis Thomas calls them ‘half-way technology’. For example, after a bypassing operation, the coronary artery frequently narrowed down again, thus does not increase the living quality of the patient. According to a report from US, 30% – 40% of the total operations should not have been performed; among thousands upon thousands drugs, only 10% is effective, 30% is dispensable, and 60% is completely ineffective. A similar investigation in UK shows that there are only 15% medicaments that are really effective. The partial propaganda of medical advertisement and the demands under the doctors’ inducement lead to a modern superstition. To break down such superstition, the government’s policy orientation and some necessary protective intervention will be needed in order to assure that the right of the public to basic health care is not impaired.

Y: It is noticeable that relying on medical equipments blindly without undertaking comprehensive examination of patients and inquiring into their medical history often leads to the misdiagnosis. I learn from some statistical data in China that the rate of misdiagnosis is basically ranged between 30% and 40%, which has no big difference from the data one hundred years ago.

Z: In addition, in the face of the patients who are dying in the ward, with artificial respirator and

various catheters inserted to their body, people cannot help but ask: are these costly high-techs prolonging their life or their death? Even if medical cost is positively proportional to the survival time of life to some extent, it will not necessarily improve the quality of life and the conditions of health. Medicine should keep a reasonable tension between overcoming death with any price and accepting the fact that death is the fate of human beings. People have begun to realize that it is flawed to protect and prolong life merely by relying on medical technologies, and doing so will result in the abnormal development of the cause of health care, and creates unbearable economic burdens on the patient and society as well.

Y: We are faced with medical crisis, as Daniel Callahan so calls it: medical costs are running up year after year, while people's demands for health are far away from satisfied. What especially makes people feel uneasy is that the vulnerable groups in the society are not guaranteed with regard to their basic medical care. Loss of universal sympathy, abandonment of responsibility, partial understanding of human nature and so on; all these things suggest that the humanism in medicine is being lost. At the same time, they are revealing some dilemma with which the humanism is faced. We have to reexamine such crucial notions as reason and progress, which bring human beings into the modern era, and characterize this era. We are looking forward to a possible solution to these issues, and perhaps such a solution lies in our ideas and practices.