



Spirituality as the Basis and Foundation of the Medical Profession

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*“Where there is love for medicine, there is love for humanity”
Hippocrates [1]*

Throughout history, humanity has faced many challenges, however, never before have we all found ourselves united against the same adversary [2]. SARS CoV2 pandemic has revealed both the greatest weaknesses and the greatest strengths of human beings; on the one hand, we have experienced disinterest, fragility, fear and social selfishness, while on the other hand, there have been glimpses of the very best of man; the love shown by the vocational work of our health professionals and their personal sacrifices. Perhaps that is why there is no better time to reflect on the profession that Edmund D. Pellegrino called “the most humane of the arts, the most artistic of sciences and the most scientific of the humanities” [3].

What is a Physician?

A physician is any man or woman who, eager for science, wishes to grasp the tragedy in human destiny [4]. The doctor is driven by the desire to put all their talents at the service of mankind, and recognizes that there is no greater honour than being able to serve a sick person in their moment of maximum vulnerability; paradoxically our fragility leads to our greatest strengths. A doctor accompanies, comforts,

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and accepts that alleviating pain and suffering, with all its implications, are an essential and fundamental part of his/her way of life.

A doctor lives a intensified life, with glimpses of both human happiness and life but also human misery, and death. So, it becomes crucial to struggle to recognize the dignity of each person within the patient [5, 6], reflecting deeply on the fact that a human being is a biological, psychological, social and spiritual entity, and perhaps it is not possible to fully accompany any patient on their journey without understanding the essence of our nature. The modern doctor needs to professionally distance themselves from the patient has normalised a dehumanization of the health sciences [7]. It is time to remember that “a good doctor treats the disease; while the great physician treats the patient who has the disease”(William Osler) [8]. Medicine exists because of the patients who, with their individual experience, participate in reality, with their personal history and with a personal sense of transcendence, and reflecting on these aspects is critical to truly promote and experience medical vocation.

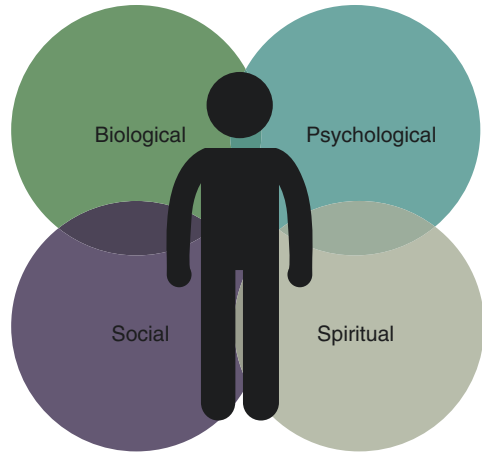
The COVID 19 pandemic has revealed a crucial and sometimes forgotten aspect of the Doctor-Patient relationship [8]. Without doubt this is one of the aspects that has been most affected by the current epidemiological situation, with patients fighting for their lives but distanced from their relatives and only close to nurses and physicians, but not always. This chapter seeks to reflect on these aspects, portraying a new vision of the essential within the Doctor-Patient relationship; the spiritual connection.

Doctor-Patient Relationship

The integral understanding of the human being as a biological-psychological-social and spiritual entity is at the core of the concept of healing. Medicine must not be understood as a rigid branch of knowledge since the accompaniment and healing process is much more complex and dynamic, implying in itself both a wide scientific knowledge and a huge human aspect; dialogue, compassion, suffering and trust. And, above all, we should never forget that the human touch is crucial for a true healing process.

The anthropological concept of great philosophers and authors, from Aristotle [9], Saint Thomas Aquinas [10], Kant [11], Elio Sgreccia [6], and even Saint John Paul II [12], coincide in identifying 3 elementary faculties: (1) Will, (2) Intelligence and (3) Affectivity. These faculties allow the human being to satisfy the teleological aspirations imprinted in the depths of human nature. Man thirsts for eternity; since the beginning of medical history we have seen how Aesculapius defeated death with his caduceus, thus seeking to satisfy the desire for eternity. The human being strives for transcendence, which is only achievable through the holistic experience of the previously described faculties. Man is capable of knowing truth as a scientific construct [12]. Man is capable of choosing and acting well based on natural law [12], and, above all, human beings are capable of achieving love [12] by acting in accordance. The spiritual essence is encountered in the unsatisfied teleological desire; medicine itself arises from the need to transcend time, matter and history [13]. When one human being sees another human being suffering in misery and decides

Fig. 6.1 Integrative anthropological dimensions, by Ana Lucía Sonf Dillmann



to help and accompany them, he/she is demonstrating the pure teleological manifestation of the Healthcare profession.

Throughout the Pandemic, we have seen how health professionals have based their work on these three faculties (Will, Intelligence and Affectivity); working arduously, and at times forgetting about the enormous personal sacrifice [14]. How can we understand this sacrifice if not as a form of love of humanity?

The spiritual nature of the medical vocation and of the doctor-patient relationship is fundamentally understood through its cornerstone: the dignity of the person [15]. The immeasurable value of the human being which inspires and aspires to protect life in all its senses, allows us to transcend, thus -medicine- is both a humane and a humanizing act.

Although not frequently discussed, I believe that the Doctor-Patient relationship is based on the spirituality of human nature. Dignity unites all humanity in spite of racial, religious, gender, and cultural differences, and what distinguishes the individual in each human being is our spiritual essence.

I solemnly swear to dedicate my life to the service of humanity
(Geneva Convention) [1]

The famous Hippocratic Oath [1] shows the necessary and implicit dedication to the profession, dedicating life to the service of humanity in all its spheres, thus promoting a comprehensive vision of our patient (Fig. 6.1).

Biological Sphere

Do you want to be a doctor, my son? Aspiration is this of a generous soul, of an avid spirit of science. Do you want men to consider you for a god who alleviates their ills and drives away fear? (Aesculapius) [4].

The biological integrity of the human being is one of the elementary values on which professional medical practice is founded; thus, doctors exist to alleviate

physical suffering. We cannot deny this integral essence, since the human being, by definition, is the union of body and soul in an individual and indivisible way [10, 16]. The value bestowed by corporeality speaks of the spirituality imprinted into human nature. How many diseases of the psyche are manifested somatically? SARS CoV2 has highlighted once again our biological fragility; generating reflection on the predominant value of the 4 spheres in the integration of the human being. The technical-scientific domain is crucial for a correct professional practice since we cannot pretend to diagnose and treat anyone without first knowing in depth the mysteries involved in human biology. However, unfortunately in the XXI century there is a risk of reducing man to mere biological reality [17], and for this we must continuously reflect on why and how medical service must be centred around the love for our fellow human.

Psychological Sphere

The human being is an animal of rational intelligence.
(Boecio) [18]

Man as an indivisible individual cannot be understood without referring to the psyche; its complexity refers to the thirst for eternity. It is not possible to isolate biology from the psychological reality of the human being since we are biology complemented and shaped by a psychology that must be understood as an integral and integrating part of our nature. This is where medical practice becomes more and more complex since it is not only physical or even technical. When the doctor finally meets the patient, the practice of medicine needs to take into consideration such crucial aspects as emotional, cognitive and interpolative integrity. Medicine and medical education face great challenges in this regard [19]; challenges that the epidemiological reality has highlighted. The development of “soft” competencies is increasingly necessary, so that archaic models such as paternalism can be transformed into a much more integrated and collaborative doctor-patient relationship [20], which highlights patient autonomy, dignity and individual value.

Social Sphere

No man is an island.
(John Donne) [21]

Human beings are gregarious by nature, as humans need society, and the sense of belonging is perhaps one of the most interesting characteristics in human nature, and the social distancing that we have experienced recently has undoubtedly stressed this reality [22]. Medicine must be developed and practiced in this sense. It must be clear that the participation of doctors is crucial in the harmonious development of a society strengthened by anthropocentric senses [23], where the person is the true,

definitive value and end of all social actions. Perhaps never before have we understood the prevailing need for collaborative, interdisciplinary and cooperative work in our globalized reality. This need is fundamental for us to re-emerge from a crisis, such as the current one, strengthened with those elementary values needed for the development of life in society.

Spiritual Sphere

I solemnly promise to watch over human life with the utmost respect.
(Geneva Convention) [1]

This is perhaps the least studied of scientific reality. However, it is critical for understanding how we experience human reality. We have already delved into some characteristics such as the teleological aspiration and dignity of the human person in medical practice, however, we can safely assert that the process of self-knowledge is in itself a life-long process. The doctor-patient relationship -as the basis of medical practice- is a humane and humanizing act, in that it unconsciously reveals the spiritual truth of man, which makes the bond engendered in the medical act palpable.

The current epidemiological situation which has paralyzed the entire world, will hopefully allow us to reflect on the vital importance of basing the doctor-patient relationship on fully humane criteria. Archaic models that do not promote the dignity of the person must in turn give way to increasingly humanized models. The loneliness and isolation that both our patients and our colleagues have experienced [22] cry out for the need to recentre our professional paradigms on the person as the guiding criterion.

The general consensus around the prevailing need to rehumanize the medical sciences [24] will be incomplete if we do not integrate all the component spheres of anthropological reality. We cannot deny the spiritual essence of human nature; on the contrary, we must be aware of the high degree to which the medical act contributes to a full experience of spirituality manifested in the thirst for eternity that is engendered in the dignity of the person. Human spirituality transcends religious and cultural characteristics, and we must be aware of this.

I will not allow considerations of age, illness or disability, creed ... to come between my duties and my patient
(Geneva Convention) [1]

Patient Spirituality

For us to fully understand this spiritual connection, we should also analyse and study the spiritual reality in our patients and in ourselves as eventual patients since it is undeniable that sickness is a path all humans will sooner or later have to cross. However, it is a much more complicated situation because in this sense we should

not only comprehend the human nature related with one profession, but we should also understand it as the whole of human life.

Suffering (sickness) is an essential element of life, as Victor Frankl wrote in his book *Man's Search for Meaning* [25], and pain allows us to grow and mature by facing ourselves -in this way- with a much broader reality of “transcendence”. Throughout history philosophers have concluded that tragedy (sickness, pain, suffering...) is the true source of personal humanization and solidarity [26], and by facing this reality we can glimpse our neighbour's experience, which will give us the opportunity to actively participate in the construction of a more harmonious society through the living exercise of empathy and generosity.

Unfortunately, twenty-first century hedonism, relativism and superficiality have distorted the comprehension of this crucial aspect, and the ideological preponderance for the rejection of pain has led us to the dehumanization of this sense. Suffering and Happiness are just two different sides of the same coin (life), there cannot be one without the other. At this moment, it is important to establish that, with these words, I do not wish to add “exalted” value to suffering, but only emphasise that we must know how to face and experience it as a complementary part of our lives. We must learn to perceive pain as an ordeal that may allow us to continue in the constant work of improving our human nature.

As stated we (humans) have been given three great tools, Will, Intelligence and Affectivity, and only through them we will be able to satisfy our teleological desire. This is ample reason why we should be compelled to live with them in wellness and sickness since it is only then that we will complete (in a more rounded way) our vision of life, and find meaning to one of the unsolved mysteries of human history: our own existence.

Practice Time

Since the experience of spirituality is of a personal and individual character, the following questions are proposed as a concrete means to reflect - at any time - on the foundation of the medical vocation “human contact” person to person, heart to heart.

The reader may find in the following section a space that favours inner knowledge and the deepening of the unexplored reality, but undoubtedly lived on a daily basis.

Physicians

- Why did I study medicine?
- Have my reasons changed with time?
- What is the current status of love for the profession?
- Do I live the Hippocratic Oath in my daily practice?
- Have I lost the person within the patient?

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- Why and Where?
 - Do I thirst/wish for transcendence?
 - Do I transcend space and time with each of my patients?
 - Do I fulfil my thirst for eternity?
 - What am I missing?

Patients

Have you experienced true suffering in my life? (pain may be “physical, psychological or social and spiritual”).

- How have you experienced this suffering?
- Were you alone?
- Have you found an opportunity in this suffering?
- Have you found meaning through pain?
- Have you had the opportunity to accompany someone in suffering?
- How was that experience?
- How do you feel about the reality of pain and happiness being two different sides of the same coin (life)?
- Can we transcend suffering?
- What are you missing to find full meaning in your life?

Conclusion

Love for medicine shows a great love for humanity, in all its aspects. The COVID 19 Pandemic and the reductionism inherent in the twenty-first century possibly presents the greatest challenge to medical education and practice. For this reason, I believe that we must focus on the prevailing need to re-humanize the healthcare sciences.

The spiritual connection in the medical act is undeniable; the aspiration and the thirst for transcendence are intrinsically manifested examples. If we are able to promote this characteristic we will in turn find an enormous sense of belonging and teleological satisfaction that will contribute to the harmonious process of social construction within the medical profession. The struggle between life and death will cease to be accidental and will take on a greater meaning in the defence of human dignity, which in turn will revive the love that is inscribed in the heart of every spirit that generously wishes to dedicate their life to the service of humanity.

Your office will be for you a robe of Nessus. In the street at banquets, in the theatre, in your own home, strangers, your friends, your relatives will tell you about their ills ... your life will no longer belong to you ... Think about it while you have time. But if indifferent to ingratitude, if knowing that you will see yourself alone among human beasts, you have a soul stoic enough to satisfy you with the duty fulfilled without illusions, if you judge yourself paid enough with the happiness of a mother, with a face that smile because he no longer

suffers, with the peace of a dying man from whom you hide the arrival of death; if you yearn to know man and penetrate all that has been brought about by his destiny, then become a doctor, my son (Letter from Aesculapius to his Medical Son) [4].

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