MEDICAL VOCATION, BEYOND THE DUTY OF CARE: A REVIEW OF LITERATURE FROM ETHICAL AND PHILOSOPHICAL PERSPECTIVES.

VOCACIÓN MÉDICA, MÁS ALLÁ DEL DEBER DE CUIDAR: REVISIÓN DE LA LITERATURA DESDE EL ASPECTO ÉTICO Y FILOSÓFICO

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ABSTRACT

This review article explores medical vocation as a phenomenon that extends beyond the mere duty of caring for patients, focusing on the significance of ethical commitment, empathy, and resilience in medical practice. The implications for medical training and clinical practice are discussed.

Keywords: Medical Vocation; Ethics; Empathy; Resilience; Medical Education. (Source: MESH-NLM)

RESUMEN

En este artículo de revisión, se examina la vocación médica como un fenómeno que va más allá del simple deber de cuidar a los pacientes y se centra en la importancia del compromiso ético, la empatía y la resiliencia en la práctica médica. Se discuten las implicaciones para la formación de médicos y la práctica clínica.

Palabras clave: Vocación Médica, Ética, Empatía, Resiliencia, Educación Médica. (Fuente: DeCS-BIREME)

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INTRODUCTION

The medical vocation is a widely recognized concept, in the literature and the practice of medicine, as a special call to dedicate oneself to the care and relief of the suffering of patients⁽¹⁾. Since ancient times, this medical profession has been seen as one of the most noble and altruistic, which stands out for its ethical commitment and responsibility to care for those who need it ⁽²⁾. Over the years, this vocation has evolved and adapted to changes in society and medicine, but the fundamental duty to care remains central to the identity and practice of physicians ⁽³⁾.

Despite the historical importance of the concept of medical vocation, the literature suggests that it goes beyond the simple duty of care and encompasses ethical, humanistic, and emotional aspects essential for effective and compassionate medical practice ⁽⁴⁾. In this sense, some authors argue that the willingness to study medicine should be seen not only as a call to service, but also as a commitment to clinical excellence, empathy, and resilience in its practice ^(5,6).

This review presents an overview of the medical vocation literature, in which the importance of ethical commitment, empathy and resilience in the medical profession is highlighted. Likewise, the implications of these findings for the training of physicians and clinical practice are discussed.

METHODS

A literature search was performed in academic databases, including PubMed, Scopus, Web of Science, and Google Scholar. The keywords were used: medical vocation, medical ethics, empathy, resilience, and medical education. The search focused on articles, books, and reviews published in English between 1990 and 2022. Relevant studies were selected based on predefined criteria. Inclusion criteria consisted of studies addressing ethics, empathy, and resilience in medical education and clinical practice. Studies that were not directly related to the medical vocation or did not address the issues of ethics, empathy or resilience were excluded. The selected studies were analyzed and relevant information related to the objectives of the review of the article was extracted. The main findings and conclusions of the studies were identified. The information extracted from the studies was synthesized to identify and discuss key themes and sub-themes related to ethics, empathy, and resilience in the medical vocation.

Medical vocation

From an ethical and philosophical point of view, the medical vocation can be defined as the internal call and inclination towards medicine based on the desire to serve and care for others and on a deep commitment to integrity, compassion, and professional excellence. This vocation implies not only mastery of technical skills and scientific knowledge, but also adherence to ethical and moral principles that guide the doctor-patient relationship and clinical decision-making^(6,7).

Ethical Commitment in medical vocation

Fundamental ethical principles in medical practice Medical ethics is integral to the medical vocation and implies adherence to principles that guide clinical practice. The four fundamental ethical principles are autonomy, beneficence, non-maleficence and justice ⁽⁷⁾. These principles help physicians make ethical decisions in clinical situations and keep the welfare and rights of patients at the forefront.

•Autonomy: It is the principle of respecting the patient's right to make their own decisions about your health care. In some cases, patients may request to limit therapeutic efforts or life support. In such cases, the health team must respect the patient's autonomy and provide them with the information and support they need to make informed decisions about their medical care.

•Charity: It consists of promoting the well-being of patients, limiting therapeutic effort or life support, and can be considered a beneficial action to avoid prolonging suffering or pain and allows the patient to die with dignity.

•Non-maleficence: It emphasizes avoiding harm to patients; it is a non-malefic action to avoid exposing them to unnecessary risks and complications associated with procedures or other therapeutic interventions.

•Justice: It is the principle of treating all patients fairly and equitably, without discrimination or bias; decisions should be based on clinical considerations and the best interest of the patient.

The relationship between ethics and medical vocation

Ethics and the medical vocation are closely related since ethical commitment is a fundamental part of being a doctor ⁽⁷⁾. The duty to care for patients in an ethical and professional manner is central to the medical vocation, and ethical practice contributes to a sense of purpose

and satisfaction in the medical profession ⁽⁸⁾.

Ethical challenges in contemporary medicine

Contemporary medicine presents numerous ethical challenges, such as equity in access to medical care, patient confidentiality, end-of-life decision-making, and fair distribution of limited resources ⁽⁹⁾. These challenges require physicians to engage with ethics constantly and reflect on their professional values and responsibilities.

The importance of ethics education in undergraduate medical training

Ethics education is essential to prepare future doctors to face ethical and professional challenges in their practice⁽¹⁰⁾. Ethics training should be an integral part of the medical curriculum, including theoretical teaching and opportunities for reflection and experiential learning in clinical settings⁽¹¹⁾.

Empathy and human connection in medical vocation

Definition and aspects of empathy in medical practice

Empathy is the ability to understand and share the feelings of others, which allows physicians to establish effective therapeutic relationships with their patients⁽⁴⁾; in medical practice, it involves not only a cognitive understanding of patients' experiences, but also the ability to respond emotionally to their needs⁽¹²⁾.

Impact of empathy on clinical outcomes and patient satisfaction

Research has shown that empathy in the doctor-patient relationship is associated with better clinical outcomes, greater patient satisfaction, and better adherence to treatment ^(13,14). Additionally, empathic physicians are less likely to experience burnout and have higher job satisfaction⁽¹⁵⁾.

Strategies to foster empathy in medical education and clinical practice

The teaching and development of empathy in medical education and clinical practice can be addressed through specific pedagogical approaches, such as patient-centered communication, narrative-based education, and mindfulness skills training ^(16,17,18). In addition, feedback and reflection on clinical experiences can help physicians improve their empathic skills and maintain their ability to connect with patients throughout their careers.

Barriers and challenges to maintaining empathy in demanding medical settings

Clinicians may face barriers and challenges in maintaining empathy in demanding medical environments, such as time pressure, burnout, and the emotional demands of caring for seriously ill patients ^(12,19,20). To address these challenges, it is important to encourage self-care and peer support and promote work-life balance with medical personnel.

Resilience and coping in the medical vocation

Definition and components of resilience in the medical context

In the medical context, resilience refers to the ability to adapt and recover from difficulties and stress in medicine ⁽²¹⁾; it includes components such as adaptability, active coping, social support, and self-care ⁽²²⁾.

Importance of resilience in preventing burnout and promoting well-being

Resilience is essential to prevent burnout and promote well-being among physicians, as it enables them to deal effectively with the challenges and demands of their profession⁽²³⁾. Research has shown that resilient physicians have higher job satisfaction, better quality of life, and lower risk of burnout ⁽²⁴⁾.

Strategies to foster resilience in medical education and clinical practice

Resilience can be fostered in medical education and clinical practice through targeted interventions, such as coping skills training, self-care education, and supporting connections with colleagues and mentors ^(25,26). In addition, the development of emotional intelligence skills and the cultivation of mindfulness, too, can contribute to resilience in the medical profession ^(27,28).

Challenges and barriers to developing and maintaining resilience in the practice of medicine

Building and maintaining resilience in medicine can be difficult, due to factors such as high workload, emotional demands, and lack of institutional support. To address these challenges, it is necessary to promote changes in the work environment and in the culture of medicine, such as the implementation of work-life balance policies, the promotion of interprofessional collaboration and the promotion of the importance of well-being among doctors (29).

Integration of ethics, empathy and resilience in medical education and clinical practice

Pedagogical approaches and strategies for teaching ethics, empathy and resilience in medical education

Integrating ethics, empathy, and resilience into medical education can be achieved through pedagogical approaches such as case-based teaching, reflective learning, and experiential education ^(30,31). In addition, collaborative teaching techniques such as peer learning and group discussions can facilitate the development of ethical, empathic, and resilient skills among medical students ⁽³²⁾.

The importance of self-care and institutional support in promoting a comprehensive medical practice

Self-care and institutional support are crucial to promoting a comprehensive medical practice incorporating ethics, empathy, and resilience ⁽³³⁾. This includes providing resources and training in self-care, offering opportunities for supervision and mentoring, and fostering a work environment that values the importance of well-being and job satisfaction⁽³⁴⁾.

Evaluation of the effectiveness of interventions to improve ethics, empathy and resilience in medical education and clinical practice

Research on the effectiveness of interventions to improve ethics, empathy, and resilience in medical education and clinical practice is essential to inform and adapt educational and support strategies ⁽³⁵⁾. Assessments can include quantitative and qualitative measures of ethical, empathic, and resilient skills and long-term outcomes related to job satisfaction and well-being ⁽³⁶⁾.

Future challenges and opportunities to integrate ethics, empathy and resilience in medicine

Future challenges and opportunities for integrating ethics, empathy, and resilience into medicine include adapting to changes in medical practice, such as increased use of technology and telemedicine and attention to diversity and inclusion in medical care⁽³⁷⁾. In addition, continued research and development of new educational and support strategies will be essential to address these challenges and seize opportunities to improve ethics, empathy, and resilience in medical education and clinical practice⁽³⁸⁾.

	How do we review it?	What are the challenges?
Medical ethics	Questionnaires and reflections on difficult situations	Making ethics a natural part of medical education and keeping it relevant in an ever-changing medical world.
Medical empathy	Communication practices with patients and self-assessments	Teach empathy in a measurable way, and prevent emotional exhaustion.
Medical resilience	Mindfulness techniques and stress questionnaires	Help clinicians manage stress without ignoring stress-producing health system issues.

Table 1. Evaluation and challenges



The medical vocation has been examined beyond the simple duty of care and has focused on critical aspects such as ethics, empathy and resilience in medical training and clinical practice. We have reviewed the literature emphasizing topics such as the importance of ethics and empathy in the doctor-patient relationship, the implications of resilience on job satisfaction and well-being of physicians, and pedagogical and support strategies to integrate these concepts. in medical education and practice.

Nevertheless, it is essential to recognize that the medical vocation is a constantly evolving field and that future challenges and opportunities must be proactively addressed. For example, the increased use of technology and telemedicine could have significant implications for how ethics, empathy, and resilience are taught and practiced in medicine. Similarly, the recognition of diversity and inclusion in healthcare and medical education is an area in which more attention and a holistic approach are needed.

Ultimately, the purpose of this review article is to highlight the importance of going beyond duty of care and to encourage a more comprehensive approach to

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medical education and practice. By doing so, we can support physicians on their path to a more ethical, empathetic, and resilient medical practice, which in turn can improve the quality of care and satisfaction for both patients and physicians.

The medical vocation is an area of study and practice that deserves continuous attention and commitment from educators, physicians, and health institutions. By proactively and thoughtfully addressing these issues and challenges, the well-being and satisfaction of our physicians can be improved and ensure more compassionate and effective healthcare for patients.

CONCLUSION

The medical vocation goes far beyond the simple duty to care; it implies an ethical commitment, empathy, human connection, and resilience to face the challenges inherent in the practice of medicine. Integrating these components, into medical education and clinical practice, is essential to promote comprehensive and successful medical practice and to ensure that physicians are prepared to address professional and ethical challenges in the care of their patients.

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