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## EDITORIAL

# HEALING IN WESTERN MEDICINE

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**W**hile Morbidity and Mortality Rounds take place in most, if not all, medical settings where Western medicine is practiced, have you ever heard of Healing and Transformation Rounds? Probably not. Why not? Of course physicians learn important lessons from medical errors and unfortunate patient outcomes but they can also gain insight from focusing on what went well.

It is striking that when one searches the Internet with the key words 'healing' and 'transformation' what turns up stems from other medical traditions such as Traditional Chinese Medicine, Ayurveda, Yoga, and Native or Aboriginal practices. An editorial published in the *American Journal of Critical Care*<sup>1</sup> describes the historical underpinnings of the split between the art and science underlying Western medicine. The authors state, "We neglect medicine's sacred origins at our peril."

It is for this reason clinicians who practice Western medicine were encouraged to submit to this volume. They too are healers. A decade ago McGill University oriented the medical school curriculum towards physicianship and healing.<sup>2</sup> Boudreau et al. state, "Physicianship, as we understand it, is based on the following premise: the primary goal of medicine is healing. Healing encompasses the entire range of doctor-patient interactions, including treatments aimed at aberrant pathophysiologic mechanisms. Professionalism describes the requisite moral and behavioural attributes of doctors in all their guises, namely, as bedside clinicians, members of the profession, and members of a wider society." Importantly, they point out that it is not only what the healer *does* but who the healer *is*.

Two giants in whole person care, Drs. Mount and Cassell expound upon what promotes healing. In addition to the "10 Commandments of Healing"<sup>3</sup> that is intended for those who tend to the sick as much as those who are sick, Dr. Mount emphasizes that healing occurs in the present tense, in the **now**. Thus, a person is never *healed* i.e. *for good*. It is a dynamic process; an adaptive response shift based on meaning. Mount articulates, "Healing is a shift in our quality of life away **from** anguish and suffering **towards** an experience of integrity, wholeness, and inner peace."<sup>(3 p 50)</sup>

Cassell<sup>4</sup>, who for decades has been writing about the nature of sickness, suffering and healing published a primer in 2013 that encourages physicians to examine daily medical practice in depth. He emphasizes that, “There is only one goal in medicine: the well-being of the patient.” He portends that action in the service of the patient’s well-being is healing. Throughout the book he reiterates, “A person is sick who cannot achieve his or her purposes and goals because of impairments of function that are believed to be in the domain of medicine.”<sup>(4 p xvi)</sup> Cassell debunks the idea that there are two goals in medicine: treat the disease and care for the patient. He is adamant that this dualism is passé. He reminds us that recognizing the whole person is crucial. By listening deeply, acknowledging patients’ uniqueness, their need to belong, to be a part of something larger than themselves, healers help patients reach their goals and fulfill their purposes. Meaning is crucial and the healer is attentive to what the disease or illness signifies for the patient as this will promote or hinder recovery of function. But, as Hutchinson points out in his book review<sup>5</sup> healing may be more than a linear or mechanistic process determined by conscious purposes and goals. It is more likely an iterative progression towards integration.

Three narratives found in this volume – written by a psychiatrist, a pediatrician, and family physician – show how healing is central to their own well-being and that of their patients. What is apparent is that to promote healing in others one needs to attend to one’s own<sup>6</sup>. Their stories display courage and vulnerability. They also are imbued with compassion and are thereby inspirational. Indeed, the authors remind us how rich a profession it is when one tallies the gifts that are freely given.

The commentary written by a medical student and one of her teachers reminds us that the work environments that are designed to give first-hand experience to trainees can facilitate or hinder the transmission of the healing art from teacher to student. Future clinicians need our support to take classroom lessons into clinical settings in a way that is congruent with our aim to promote healing in Western medicine. ■

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