

BIOETHICS AND MEDICAL HUMANITIES (ML000165)

1. language

English

2. course contents

Coordinator: Prof. Dario Sacchini

Academic Year: 2022/2023

Year Course: 2

Semester: 2

CFU/UFC: 6

Modules and lecturers:

ML2288 Medical Anthropology (M-DEA/01) 1 UFC – Prof. Pietro Refolo

ML000114 Philosophical History of Medicine (MED/02) 2 UFC – Prof. Carlo Provenzano

ML000166 Bioethics (MED/43) 3 UFC– Prof. Dario Sacchini

3. bibliography

ML2288 Medical Anthropology

- Wiedebach H. Some aspects of a medical anthropology: pathic existence and causality in Viktor von Weizsäcker. *History of Psychiatry* 2009; 20(3): 360-376.
- Sgreccia E., *Personalist Bioethics. Foundations and Applications*. Philadelphia: NCBC, 2012.

ML000114 Philosophical History of Medicine

- Gorton DA. *The History of Medicine. Philosophical and Critical, from Its Origin to the Twentieth Century*, GP Putnam's Sons, New York and London 1910.
- Guthrie D. *A History of Medicine*. Thomas Nelson, New York 1945.

ML000166 Bioethics

- Sgreccia E., *Personalist Bioethics. Foundations and Applications*. Philadelphia: NCBC, 2012.

4. learning objectives

Throughout the Course, the student will reach a better understanding of:

- 1) *Medical Anthropology*, in order to achieve: a. the basic concepts on humanization of medical practice and care; b. the meaning of the medical practice and the anthropological dimensions of health and disease; c. the meaning of patient-physician relationship.
- 2) *Philosophical History of Medicine*: the aim of the Module is to understand how the philosophical and scientific progress influenced the medical art through ages, and the mutual relationship between Medicine and society.
- 3) *Bioethics*: through the study of bioethics, the Module will address the ethical complexity of contemporary Biomedicine, moving from main bioethical frameworks through the ethical issues in the areas of the Beginning of life, Genetics, Human experimentation and Human

reproduction.

In particular, the specific educational objectives of the teaching can thus be interpreted, according to the 5 Dublin Descriptors:

- *Applying knowledge and understanding*: at the end of the Course the student will have to demonstrate to have acquired a wide knowledge related to the basic concepts and the correlations among different Modules (Medical Anthropology, Philosophical History of Medicine, Bioethics) provided within the Course.
- *Applied knowledge and understanding*: at the end of the Course the student, in complete autonomy, must be able to recognize and describe different concepts and contents of the Modules.
- *Making judgments*: at the end of the Course the student, through the information gathered through the classes, must be able to recognize the bioethical frameworks, the basics of Medical Anthropology and to set up an articulate knowledge of different historical ages of Medicine.
- *Communication skills*: at the end of the Course the student will have to communicate what he has learned clearly, exposing the information in a coherent logical sequence, with appropriate technical language and using correct terminology.
- *Learning skills*: at the end of the Course the student, on the basis of the acquired cultural elements, must be able to broaden his / her knowledge and update himself / herself drawing independently on texts, scientific articles and online platforms.

5. PREREQUISITES

No further prerequisites are requested for the students.

6. teaching methods

The Course will be carried out through Lectures, Self-learning, Case studies, Practicals, Group activities. Teaching includes theoretical lectures and guided group work for students in small groups. The lecturers make use of the classic subsidies represented by images and / or videos and will be provided by the teachers to all the students. Furthermore, the student can independently study what he/she has learned in an individual/small group work at different times, in the absence of the teacher. According to the Dublin Descriptors, the following points will be implemented:

- *Knowledge and understanding*: during the lectures, the lecturers will illustrate to the students the main topics studied, educating a study method that integrates the different levels of knowledge (Ethics/Bioethics; Philosophy, Medical Anthropology, History of Medicine) so as to allow on the one hand the appreciation of the theoretical implications of the subjects of study and on the other side the possible applications. The student is encouraged to develop and improve his/her observation, comparison and deduction skills, qualities that will not only be useful to pass the exam, but that will be fundamental to carry out the future medical profession in the best possible way.
- *Applying knowledge and understanding*: during the lectures the students are invited to an active participation, stimulating their ability to observe and deduct and soliciting questions with requests for clarification. This modality applies even more clearly during workgroups.
- *Making judgments*: once again, the critical analysis work on the fundamental concepts underlying the three modules is relevant, since the reflection is not only carried out on theoretical considerations, but also on applied cases.

- *Communication skills*: students are invited to ask questions and answer questions both in lectures and in workgroups. If the language is not adequate from the point of view of terminology and of description of what has been observed, the teacher corrects it by proposing the correct way to express the concept in order to develop an appropriate technical/scientific language in the student.
- *Learning skills*: the lectures provided during the Course are explanatory of the main aspects related to all the topics listed in the program. However, students are encouraged to learn more about these contents using textbooks, e-learning, or other aids available online and invited to propose doubts and/or questions at the end of the lesson or requesting a personal appointment with the teachers.

7. other informations

Students are requested to attend at least 65% for each of the three Modules (Medical Anthropology, Philosophical History of Medicine, Bioethics & Medical Humanities). Students can access learning evaluation (oral exam and multiple choice tests (MCTs)) only if their attendance is consistent with the above threshold.

8. methods for verifying learning and for evaluation

In itinere, short individual and/or workgroups will be set up for checking understanding and learning on the topics developed up to that moment.

Oral exam or written test through MCTs and open questions. Moreover, short written essays and group presentations, given through the course, will be part of the final evaluation.

During exams, any portable electronic devices, including mobile phones, must be switched off and put over the desk inside an envelope given by the Course Coordinator. The only exception to this rule is if the Course Coordinator gives specific permission to use any device. Violations will be referred to the Disciplinary Committee.

In the case of a MCTs, exam will be passed if students give right answers to at least 60% of the items for each of the three Modules (Medical Anthropology, Philosophical History of Medicine, Bioethics).

In general, the maximum score (30/30 and honors [full marks]) will be awarded in cases where all the evaluation parameters outlined below are fully satisfactory (according to the Dublin Descriptors). In determining the final grade, the Commission will take into account the evaluation obtained in the individual parts. In the event of a clear disparity in the assessment obtained by the student in the individual parts, the Commission reserves the right to proceed with other questions to arrive at a final evaluation that is adequately representative of the preparation achieved by the student. The evaluation parameters according to the Dublin Descriptors are:

- *Knowledge and understanding*: through the examination the student will be able to demonstrate that he/she has acquired adequate knowledge relating to the different Modules of the Course.
- *Applying knowledge and understanding*: through the test the student will have to demonstrate to have acquired an adequate ability to have developed a valid comparative ability and deductive logic so as to independently perform a correct recognition of concepts and practical applications relating to the Modules as well as exposes with appropriate technical language.
- *Making judgments*: During the test, the student has to demonstrate to have developed an evaluative autonomy and an adequate discernment between different concepts and application within different Modules of the Course.
- *Communication skills*: during the workgroup sessions, the examination of the language used by the student will allow us to deduce his/her capacity of exposition and logical integration of the learned contents, as well as the appropriateness of the acquired scientific terminology.
- *Learning skills*: the different ways of exam and will allow the lecturers whether the learning of

knowledge has been sufficiently deepened and guided by a critical spirit, as well as to appreciate if the student has also conducted a in-depth personal work.

9. program

ML2288 Medical Anthropology

- The concepts of anthropology, cultural anthropology, and medical anthropology
- The legacy of V. von Weizsäcker
- The birth of medical anthropology: the historical-cultural background
- What is medicine?
- What makes a human being a person and what is implied in the idea of personhood
- Medicine as place where a culture attentive to the person is built: the anthropology of health and disease, and the importance of the doctor-patient relationship
- The doctor-patient relationship models

ML000114 Philosophical History of Medicine

- The concepts of disease and death from the dawn of humankind to the Hellenic and Roman schools and beyond; the Hippocratic Oath: still actual?
- Arabian and Salernitan schools: observation and deduction replace the "Ipse dixit"
- Caring places: from pilgrim assistance to hospitals and universities; Renaissance and the anatomical studies
- Gross pathology paves the road to etiopathogenesis
- Microscopy and physiology: observing and measuring to understand
- Vaccination precedes Microbiology
- Experience and experimenting: from Claude Bernard to evidence-based medicine
- The technical rise of the XIX century: X-rays, anaesthesiology, workers medicine
- "Homo homini lupus": the ethics and practice of human testing
- Prothesization: from Egyptians to the cyborg
- Asian and pre-Colombian healing: body and spirit are the same
- The XX century's surge.

ML000166 Bioethics

- General Bioethics: The roots of Bioethics in XX century Medicine and the issues that led to the birth of the discipline. Definitions, interpretations and pioneers of Bioethics
- Bioethical frameworks: foundations and models
- Preclinical and clinical trials as a paradigm of bioethical issues
- The status of the human embryo as a paradigm of the debate on the human person
- Beginning-of-life Bioethics issues: Genetics and Prenatal diagnosis, Human sexuality: procreation: contraception, abortion (interception, contragestion), Assisted Reproductive Technologies.