

## On medical education and upbringing sensibilities: revisiting Rubem Alves!

### Sobre educação médica e sensibilidades: revisitando Rubem Alves!

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Rubem Alves talks about the Educating the Gaze and its importance in education<sup>1</sup>. He actually tell us that there is no reference to this kind of education. We do not teach the students to perceive the world around them with open and clean eyes. We do not teach the child's gaze; their curious perception, that wonders and muses on everything and everybody; a kind of look that questions, and that recognizes the beauty present everywhere, in everyone; a look that never ceases to be amused and haunted by the world around. Especially in Medicine!

This text makes me think about two situations: one lived by many medical students; the other one linked to my medical semiology teacher training.

We teach skills in medicine; technical skills that are supposed to prepare the student to be the professional skilled to practice good and adequate clinical reasoning, make diagnostics and plan therapeutic courses. Medical semiology is a discipline conceived to train students to take the patient's clinical history into account and to write it clearly. It teaches the fundamental tools to be a doctor. What would become of medicine without training in medical semiology? Nothing! It's the spot where we start medicine practice.

But, what we really teach in medical semiology? Technique? Art? Both?

Assessing these questions in light of the text of Rubem Alves, I can see that, frequently, we teach but the technical skills. We put the teaching of sensibility outside our training framework, and we let our students understand that if they should get involved, if they should be too open to feeling, they would not be able to adequately treat (having had their reasoning clouded by their feelings) their patients. There is a growing body of evidence linking this choice in medical training with the loss of humanity of doctors, and with a distance and loss of connection with the patients<sup>2,3,4</sup>.

In this context, to teach medical semiology skills, I remember that I tell my students: everything starts with the gaze! Look at the person in front of you with intent; see how they seat, walk, talk; which expression is present: fear, angry, anxiety, tranquility. Are they alone or accompanied?

What we see can tell us so many things, it can give us so many answers. Instead, we focus on jaundice, on cyanoses, on the different gait. They are important, of course! However, they – the symptoms – they do not exist alone apart from

the human being. Being affected by what we see and hear from our patients put us within the human dimension and the humane sphere of practice; it allows us to have empathy and see more than the ordinary. In this process of teaching and learning, we have to look at ourselves, within ourselves, to observe our relationship with the patient: are we affected? How so? What do we feel? Which reactions do we have?

Reading Rubem Alves lead me to write this text about the Gaze in medical semiology, about the teaching of the Gaze (with a capital “G”); about a sensibility that the doctor must not suffocate. It compels me to renovate my engagement to not dehumanize the students; to look at them with joy and hope that they will not be lost in the ways of pure harsh techniques. I am left hoping that they will maintain the curious gaze of the children, associated with a sharp mind of the professional, and with this, they will be better people and better practitioners.

A professor who teaches the skills is a regular one. A professor who fosters the sensibility along with the skills ... Well, that could make a real difference on medical education.

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