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Medical Education in Person Centered Medicine in Italy and its international development *

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SUMMARY***

Person Centered Medicine (PCM) is the foundation of the first paradigm of Medicine and Medical Science, enunciated in 1999 in the " Person Centered Medicine Epistemological Manifesto", an epistemological change from the dominant intrinsic bio-techno-molecular one. The paradigm key words are : Being - person" , Teleonomy, Objective ethics, Interactionism, Indeterminism". The paradigm change event is similar to the Physic's paradigm change from the mechanism to the quantum one at the beginning of the last century. Being -person- teleonomy and ethics -epistemological and teleological roots of the PCM paradigm at philosophical level- are the ancient Greek philosophy, the Hippocratic ethics and epistemology ,the Aristotle's based Roman philosophy of Boethius , (first definition of the person), the Tommaso d'Aquino's medieval philosophy, the Husserl's and Edith Stein's philosophy, the modern personalism, the Popper-Eccles interactionism and Kairology. The scientific theoretical columns of interactionism are : at physiological level : "Allostasis theory"; at genetic level: "Epigenetics" ; at the clinical level: "The Relativity of Biological Reaction to coping possibilities and quality" (RBR Theory) , Psycho-Neuro-Endocrine -Immunology and the "Affects science". RBR theory introduces the concept of "Biological reaction" and into Medicine the concept of "Resilience" like the action of protective factors determined by the person's possibilities and resources for health as product of coping possibility and quality. The person's health is a human holistic constructive concept that can be realized only in a human relationship not a fragmented bio-technological adaptation to scientific theories, built in laboratory, to which a mice can give only a limited contribution. Suffering hides the human being work to reveal to himself the "Being person" , a realized human identity , that is joined to biological reactions at molecular level, determining epigenetic changes. This revolution determined the birth of an indeterministic concept of health, that to date can be defined as " "The best possibilities for the best being an human person", with a shift toward the quality category. The epistemological structure of the new health paradigm is a teleonomic interaction among three order of variables : Subjectivity, Biology, Environment (SBE) where and when (the mystery of a propitious moment), the person establishes a unifying meaning and an "Efficient cause" and "a Final cause" (Aristotle) for explaining and constituting the reality substance. In 1998 the new emergent paradigm, starting from the foundation of "Medical counselling" (1991), lead to the birth of Person Centered Medicine and a rigorous "Person Centered Clinical Method", taught for the first time in the Milan School of Medicine in PG courses, and then to the birth of to the PCM International Program.(2009), the Person Centered Medicine International Academy (2010) and the PCM International Journal on line (2010) . In 2003 the first investigation on PCCM effects in clinical practice resulted in a better comprehension of patients (95%) the improvement of the health and life quality of patients (75%), in avoiding useless examinations and drug prescriptions, (70%) the sparing of unnecessary hospitalizations (55%) but to a more time for patients (55%). PCCM effectiveness in saving useless examinations and drug prescription is significantly associated with the medical role . MP (100%) and Paediatricians (85%) state that PCCM is effective in sparing useless examinations, drug prescription and unnecessary hospitalizations .The PCM revolution calls for a new education of clinical teachers, physicians and philosophy doctors, for finalized research programs , for a spread application of a new curriculum oriented to Person Centered Medicine in Colleges and Faculties, for an international quality certification of Physicians and Medical Education curricula oriented to PCM and for a spread re-orientation of health policies in countries and in international organisms.

KEY WORDS: Person Centered Medicine, Medical Education , Objective ethics, Interactionism, Teleonomy

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