UNIVERSITÀ
DEGLI STUDI DI MILANO-BICOCCA

COURSE SYLLABUS

Medicine and Society

2122-2-H4102D013

Aims

Society and Health I:

At the end of the course, participants will have an understanding of the Health care systems, of the main determinants of population health and main risk factors of disease, main strategies for promotion and prevention of public health.

Society and Health II:

to provide students with the tools for understanding the cultural and social aspects of modern medicine, through the analysis of its historical and epistemological evolution. The knowledge provided is the basis for knowing how to properly place the activity of the physician in the current socio-cultural context

Behavioral Sciences Communication Skills I-II-III

The aim of the course is to enable students to communicate properly with patients, following the recognized guidelines, with humanity and sensitivity, in the different situations and with different types of patients; students will learn how to manage patients' reactions to the disease and to regulate their own behavior and their emotional reactions in the professional interactions with patients and colleagues and to understand psychological and relational elements in the patient-doctor relationship; disease-centred medicine and patient-centred medicine.

Skills to be acquired:

to manage non-verbal communication, gestures and attitudes in interpersonal relationships;

to be able to regulate the emotions of the patient, of his relatives and of the clinician in the treatment process;

to formulate possible training and communication strategies to improve treatment compliance;

to communicate with patients and relatives taking into account the socio-cultural elements that characterize the relationships between people;

explaining the patient (real or simulated) preventive health contents effectively (smoking, alcohol, psychotropic substances, nutrition etc.

Contents

Understanding the cultural, social and relational aspects of medicine, taking into account its history, evolution, sanitary structure, the main determinants of population health and risk factors of disease and patient-doctor relationship and the psychological variables affecting patient-doctor relationship. This knowledge is the basis for understanding and adequately placing individual medical practice in the contemporary and international social context

Detailed program

Society and Health I:

Introduction to the concept of health and the systems created to provide health care to the population.

Introduction to determinants of and inequalities in population health and risk factors of disease;

Epidemiological basis for assessing the determinants of and inequalities in population health and risk factors of disease.

Promotion and prevention of public health, using examples from health behavior change, screening, vaccination

Society and Health II:

the following themes will be dealt with, starting from the history up to the modernity: The concept of health - The understanding of the human body - Hospitals and surgery - Vaccines: controversies and challenges - Fear of Pandemics and the rise of pharmacology – The birth of Public Health - Mental disease -Quackery

Behavioral Sciences Communication Skills I

The module addresses both general aspects related to patient-centered medicine (transition from “to cure” to “to care” and from Doctor centered vrs Patient Centered Medicine); the psychological factors affecting the doctor-patient relationship, psychological response to illness and treatment, including the concept of "therapeutic alliance"; theoretical models and specific communication techniques (verbal and non-verbal) are presented an discussed: the most common and well known existing protocols for communication in the medical field (e.g.the Calgary Cambridge Interview model, the Bukman model for breaking bad news, error disclosure, managing conflict and escalation , communication with children and the family, communication breakdowns and recovery strategies. The role of emotions in communication and in the doctor / patient relationship and strategies and techniques of emotion regulation and self-regulation are presented; a key point is the focus on the doctor emotional for a better clinical efficacy

Behavioral Sciences Communication Skills II

Definitions of placebo and nocebo effect both in relation to treatments and in relational terms; implications in the use of placebo for the relationship with the patient; different mechanisms through which the placebo and nocebo effect act.

The perception of illness.

Basic principles of motivational interview; the five phases of the model of change (precontemplation, contemplation, preparation, action, maintenance).

Behavioral Sciences Communication Skills III

To conduct a motivational interview,

to conduct a clinical interview according to the principles of the Calgary Cambridge model;

Prerequisites

first year courses : humanities

Teaching form

Society and Health I: Lectures and combined individual/group work will be conduct to address the aim of the course

Society and Health II: Frontal teaching, group work on ancient and modern texts with tutored reflexive activity

Behavioral Sciences Communication Skills I: Lectures, reflective activities in small groups, clinical cases., clinical conversations simulations, role-playing

Behavioral Sciences Communication Skills II: Lectures, reflective activities in small groups, exercise on case report

Behavioral Sciences Communication Skills III: Simulated interview; role play

Teaching methods: see details in individual teaching modules

Textbook and teaching resource

Society and Health I:

Handouts and selected paper from international peer-reviewed journal

Society and Health II

Porter R. The Cambridge History of Medicine. Cambridge: University Press, 2006

Behavioral Sciences Communication Skills I

Communication Skills for Medicine, 4e Lloyd et al., Elsevier, 2018 (UK)

Skills for Communicating with Patients, 3rd Edition Jonathan Silverman, Suzanne Kurtz, Juliet Draper, CPD press, 2013 (ITA e UK)

R. Buckmann, Difficult Conversations in Medicine: Strategies That Work in Breaking Bad News, 2010, SAGE (UK)

R. Buckmann, How to Break Bad News: A Guide for Health Care Professionals (UK)

J. Groopman, How Doctors Think, 2008 (ITA e UK)

L. Sanders 2010; Every patient tells a story, Penguin (ITA e UK)

Behavioral Sciences Communication Skills II

Communication Skills for Medicine, 4e Lloyd et al., Elsevier, 2018

The patient's brain: the neuroscience behind the doctor patient relationship, Oxford Press, 2011

Behavioral Sciences Communication Skills III

Semester

I and II term

Assessment method

Final assessment is aimed at measuring:knowledge, inductive and deductive reasoning abilities,problem solving ability.

Society and Health I: multiple choice questions

Society and Health II: Written exam: multiple choice knowledge based questions to assess also interpretative skills

Behavioral Sciences Communication Skills I-II-III: The final test measures the level of knowledge, the level of inductive and deductive reasoning, and problem solving ability. It includes discussion of problems, analysis of clinical cases and open conceptual questions

Office hours

on appointment , see each unit