

SUBJECT	HISTORY OF MEDICINE AND MEDICAL ETHICS					
CREDITS	Total	4.5	Theory	3	Practical	1.5

GENERAL OBJECTIVES

The aim of the theory syllabus is to provide a basic understanding of the most important aspects of the history of medicine and medical ethics.

- The development of ideas about disease and illness
- Ideas about treatment
- Progress in scientific knowledge
- Principal schools of thought across history
- The most important figures
- History of clinical practice in the health professions
- History of the social repercussions of disease and medicine
- Sufficient knowledge of current medical ethics as part of bioethics as applied to the doctor-patient relationship
- Sufficient knowledge of the difference between the field of medical ethics and that of the law
- Sufficient knowledge of the terminology, concepts and methodology of current medical ethics and its application to the analysis and discussion of clinical cases
- Sufficient knowledge of the different models and attitudes which may be adopted in the doctor-patient relationship: analysis and evaluation from the perspective of medical ethics
- Sufficient knowledge of decision-making procedures in medical practice in order that the decisions made are also ethically correct
- Sufficient knowledge of the strategies used to resolve ethical conflicts in the doctor-patient relationship

SPECIFIC OBJECTIVES

These are the object of practical work.

- Sufficient knowledge of the bibliographic sources relevant to the history of medicine: works, texts, journals
- Basic knowledge of the historically important medical institutions in our country.
- Sufficient knowledge of the technique for writing a scientific report. Methodology: the main features. The bibliography cited and notes. Introduction to writing a scientific report.
- Ability to write a report about a specific aspect of the history of medicine, whether that in Catalonia or in general
- Basic knowledge of the most important events in the history of Catalan medicine

SYLLABUS

Theory

I. Medicine in the ancient world

1. Medicine in the most ancient periods. Prehistory. Paleopathology. Medicine among primitive peoples.
2. Medicine in the first differentiated cultures. Middle East (Egypt, Mesopotamian peoples). The Far East (China, Indian medicine). American peoples. Others. What remains today of the contributions made?
3. Medicine in the Greek world. First data. The cult of Aesculapius. The beginnings of modern scientific medicine. Hippocratic medicine. The influence of Hippocratic medicine. Ideas about disease and treatment. Hellenistic medicine.
4. Medicine in the Roman world. Importance of the work of Galen: its influence. Ideas about disease and treatment. Other doctors. Low Roman and Byzantine medicine.

II. Medicine in the medieval world

5. Medieval Arab medicine. Description of the main schools: eastern (Persian, Egyptian) and western (al-Andalus). Ideas about disease and treatment. Cultural significance of Arab medicine. The influence of Arab medicine.
6. Medicine in the medieval Christian west. Ideas about disease and treatment. Main writers and schools. The great plagues. Hospitals. Beginnings of standardized teaching and qualifications.

III. Medicine in the modern age

7. The great change in the concept of medicine. The Renaissance. Background. New discoveries. Changes in mentality. The most important contributions of the sixteenth century. Disease (Paracelsus). Anatomy (the work of Vesalius). Surgery (the work of Paré). Other aspects. New diseases and treatments.
8. Progress in physiological knowledge. Harvey's work on circulation. The most important medical contributions of the seventeenth century.
9. Towards a new systemic medicine. Medical ideologies of the seventeenth and eighteenth centuries. Iatrophysics. Iatrochemistry. Influence on the interpretation of disease and treatment. Birth of the clinic and clinical practice.
10. Advances made in the second half of eighteenth century. The Enlightenment. Main lines of progress. The development of science. The bases of subsequent scientific medicine.

IV. The development of current scientific medicine

11. The most important contributions of the first half of the nineteenth century. Changes in mentality. Assessment of social and political medicine. Lines of progress: basic science and the growth of physiology. Clinical practice. New advances in surgery: anaesthesia. Other aspects.
12. Certain systematic ideologies. Ideological impact of the new situation: importance as regards the medicine of their time and subsequently. Phrenology. Magnetism. Homeopathy. Hydrotherapy. Other aspects. Social approaches. Scientific trends.
13. The advance of medicine in the second half of the nineteenth century. Progress in the basic sciences: physiology, histology, the beginning of knowledge of the microbial world. Vaccinations. Applications in clinical practice. Antisepsis: effects on progress in surgery.
14. Social repercussions of medical progress. Ideas about protection and insurance. Ideas about the organization of public and private healthcare. Industrial disease. Prevention. The development of the health professions.
15. The great scientific development of medicine during the first half of the twentieth century. The most important lines of progress: physiology, biochemistry. The fight against infectious diseases. Advances in pharmacological and surgical treatment.

V. Contemporary medicine

16. Medicine in the second half of the twentieth century. Scientific trends. Social trends. The organization of healthcare: financial repercussions. Effect on political ideas. The large health organizations. Current state of affairs.

Medical ethics

Aspects of medical ethics: attitudes, values and priorities; difference between medical ethics, legislation and codes of practice.

The doctor-patient relationship: possible attitudes and models of relationship; analysis and evaluation: description and contextual variables.

Ethical duty to promote health; individual aspect and public health. Concept of the futility of medical intervention.

Ethical duty to do no unnecessary harm or damage to individuals within the health field, in the doctor-patient relationship and in clinical trials, etc.

Ethical duty to respect individual autonomy. Description of and obstacles to autonomy in the health field; situations of reduced or non-existent autonomy. Living wills; self-guardianship; decisions by substitution.

Informed consent.

Ethical duty to respect judicial issues in professional practice; legitimate interests of third parties and of public health.

Conflicts between these duties: hierarchical priorities; strategy for conflict resolution.

Clinical ethics: doctors and death; refusal to provide life support; voluntary active euthanasia and medically assisted suicide.

Seminars

Several topics can be studied as elective seminars:

- Historical basis of alternative medicine
- Outline of the history of Catalan medicine
- Methodology in the history of medicine
- Medicine in the twentieth century