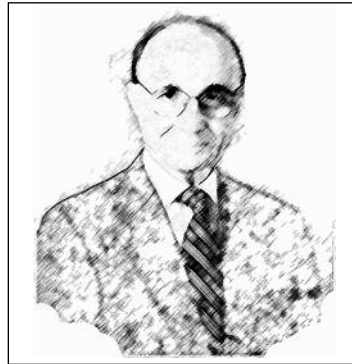


Public Health History Corner

Edmund Pellegrino: a modern day prophet for medical humanities in the US



Abstract

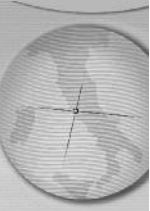
Abraham Flexner lit the fire that freed American doctors from obsolete aspects of their training. Edmund Pellegrino was the prudent fireman who acknowledged the risk of too broad a fire and put in place safe guards to protect those aspects that needed to be saved. The prodigious leap forward in medicine due to the “laboratory centred” training introduced by Flexner’s proposals for medical training began to have negative effects in daily medical practice, particularly with regards to the increasing technological input in medicine and the perception that there was a lack of sensitivity to the humanistic aspects of health. It took a strong and genial personality, no less than Abraham Flexner, to correct the course of medical training in the USA and to restore the balance between these two dimensions.

Introduction

The best description of Edmund Pellegrino was made by an Italian bioethicist, Sandro Spinsanti¹: “Perhaps for his ancient Roman features in dissonance with the typically American gesticulation, Edmund Pellegrino seems really to be the living representation of the marriage between the old and new in medicine. The modern philosophy of medicine, come from the trunk of the tradition and faithful to the solid values of the past but also deeply innovative”. Only a man with the combination of these uncommon scientific and humanistic skills was able to complete the evolution of US medical training with the effects being felt worldwide in both medicine and public health. Edmund Daniel Pellegrino was born in Newark, N.J., on June 22, 1920. He graduated from St. John's University in 1941 and received his medical degree from New York University in 1944. He was a professor and chairman of the department of medicine at the University of Kentucky Medical Center in 1959. He was president of the Yale-New Haven Medical Center and professor of philosophy and biology at the Catholic University of America in Washington. As a member of the Georgetown University faculty since 1982, he is the former director of Georgetown's Kennedy Institute of Ethics. Author and co-author of nineteen books, founding editor of the *Journal of Medicine and Philosophy*, Edmund Pellegrino is now Professor Emeritus of Medicine and Medical Ethics at the Center for Clinical Medical Ethics at Georgetown University Medical Center.

The enduring legacy of Edmund Pellegrino is the founding of medical humanities in the United States. As a tribute to the important role that Pellegrino played in the course of medical history, *The Journal of Medicine and Philosophy* in 1990, devoted an entire issue to the life and work of Edmund Pellegrino in celebration of his 70th birthday.

In his view, it was time to confront the problems arising from the major power that was acquired in biology and medicine. Medicine would have never acquired the characteristics which it has now without the innovative genius and hard work



of Pellegrino.

Medical and other health professionals should recognize that their efforts will be incomplete without the knowledge that arises from the trunk of humanities.

The medical humanities have arisen from the bringing together of complementary needs: to have a guide and make a significant speech. This was clearly illustrated and articulated by Pellegrino who concluded, with a bold image, that Engelhardt was the midwife of medical humanities.

Like the previous great innovator of the faculties of American medicine, the iconoclastic Abraham Flexner, Edmund Pellegrino also travelled tirelessly throughout the entire United States.

Between 1968 and 1978 he visited eighty institutions. He met professors and students, explaining the profound need to introduce medical Humanities into teaching medicine and providing examples of how such teaching could be conducted.

The project was supported by the National Endowment for the Humanities, with substantial funding being made available to promote the reestablishment of a balance between humanistic and technological training.

Pellegrino provided a conceptual rigor that was able to be applied to the humanities in medicine.

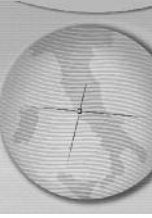
The analysis that underpinned the actions of the "National Fund" was founded on the discrepancies between the scientific-technological culture and the humanities: the first seemed to go on his own account, without any need for conceptual analysis and verification of its purpose and compliance with ethical requirements; the humanities, for their part, were completely isolated, unable to influence society, and unwilling to engage in any close interaction with the aims, methods and scientific practices of medicine.

All of this was deeply disturbing to the medical profession. Knowledge and power have grown so rapidly that it had marginalised its capacity for reflection. Therefore bridging the gap between science and humanities in American medicine was identified as an important priority, and Pellegrino has spent a large proportion of his time fostering the resurgence of the humanist tradition in US medical schools.

The starting point was the conviction that the two forms of knowledge should not simply be juxtaposed, but rather encouraged to rediscover the ties between them. An expression of Pellegrino is often cited, dating from the early '70s: "The medicine is the most human of sciences, the most empirical of the arts and the most scientific of the humanities." His entire ethos was summarised in this sentence; but some possible misunderstandings must be clarified. One of these was linked to the use of the imprecise term humanities. The medical humanities have in fact the need for rigor and not for approximations.

An example is the case of the expression "to humanize the medicine", mainly used in Italy: The humanism could be understood in the philanthropic and compassionate significance, without precise demands of intellectual competence. The medical humanism - noted Pellegrino - has become almost a place to absolve the 'sins' of modern medicine. The list of these sins is long, varied and often contradictory: technicality; excessive professionalization, sensitivity to personal and social values; narrowing of the role of the doctor; too 'cure' and not 'care', inadequate attention to prevention; low education and participation of the patient in the decisions that concern him; too much economic incentive, a mindset typical of 'trade schools'; insensitivity to the poor and the marginalized in society and over-medicalization of everyday life deficiencies in verbal communication and non-verbal communication.

Pellegrino endorses a strict relation between medicine and the humanities, based on the possibility that they have to answer fundamental questions, in particular those which are caused by suffering from disease, the search for healing and limiting the use of technology on humans.



The medical humanities by recovering ethics, philosophy, history and literature, aim to rethink human existence under the impact of modern medicine. The reciprocal influences between humanities and medicine can create a new disciplinary field, which is particularly significant for the training of doctors.

As a missionary of the medical humanities Pellegrino has been very successful. He managed to create a consensus to change the curricula of medical students, introducing humanistic disciplines. His intellectual efforts and his active engagement in the "seventies" have done much to address the separation between the "two cultures".

Survey results of human values in medicine show that humanistic education in schools of medicine in the United States is considered to be "very satisfactory". In 1980-81 almost all of the medical faculties had a program that could be classified as human values, ethics or humanities, in sharp contrast to the situation two decades earlier, when such programs were nonexistent. The report, published by Pilgrim, concluded by saying that the introduction of this kind of study was one of the most significant innovations in the training of physicians that occurred in our century.

The passionate and engaging commitment of Pellegrino in the medical humanities didn't make him change his profession. He constantly turned to the practice of medicine and his title of MD, with the typical pride which is a hallmark of American physicians. He refused to embrace, as a bioethicist, that its contribution to the renewal of medical practice should not in fact be entitled bioethics, but rather at most, a philosophy of medicine. He does not claim to have created a new profession, but simply to have dusted off the side of reflection on medicine that is inherent in traditional medicine itself (as illustrated by the Hippocratic aphorism: "The physician is a philosopher of God").

References

Spinsanti S. La bioetica: biografie per una disciplina [Bioethics: Biographies for a Field]. Milano: FrancoAngeli, 1995.

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