Criteria necessary for accreditation of the subject "History, theory and ethics of medicine"

1) Mandatory classes:

 Seminar "History, theory and ethics of medicine", 6th semester, one full day

2) Concordant class

Lecture "History, theory and ethics of medicine", 6th semester, Wed.
11:00am – 12:30pm

3) Record of achievement:

Exam during the 6th semester

4) Learning objective:

Cross-sectional area history, theory and ethics of medicine (GTE)

General information: The over all goal of GTE is to introduce the theoretical, ethical and historical fundamentals of medicine to the students. Additionally to solely gaining knowledge on these subjects the students should be capable to use the learnt information for future critical reflection and evaluation of their own thought process and patient care as a physician. Students should be sensitized to the long-term development and changes of medicine, as well as keeping the historical and cultural fundamentals in modern medicine in mind. They should be more aware of the experiences of patients and their relatives from different social and cultural backgrounds. Furthermore students should have the ability to analyze differing theoretical conceptions, ethical positions and ethically problematic situations, as well as to discuss these.

a) Learning catalog for history of medicine

I. The transformation of body- and disease-understanding since the ancient world (esp. the theory of the four humors; medical astrology; magia naturalis; iatrochemistry and iatrophysics; solidar pathology; clinical medicine and pathological anatomy; cellular pathology; molecular medicine; psychoanalysis; psychosomatics; environmental medicine; alternative medical concepts.

II. History of the most important diseases and their handling (esp. leprosy, cholera, influenza, fever, tuberculosis, cancer, mental disorders)

III: Basics on the history of diagnosis and treatment (esp. taking patient's history and physical exam; history of surgery; history of pharmaceutical treatment; development of diagnostic and therapeutic instruments and machines; advancement of imaging; technicalization

IV. History of the occupation as a physician; physician-patient-relationship; healthcare and the social role of medicine; history of medical ethics; history of medical education; history of hospitals and practices; history of nursing care; long-term development such as professionalization, medicalization, institutionalization, hygienization and genetization

b) Learning catalog for theory of medicine

- I. Fundamentals of philosophical anthropology of medicine and disease; basic terms: "illness"/"disease"; ontological, physiological and semiotics disease models; body-soul problem; phenomenon of disease; pain experience; experience of handicaps
- II. Physicians theory; medical amateur knowledge and subjective experience of a disease; process of medicine becoming popular; medical amateur culure; "semantic networks"; disease and language; subjective amateur theories; models of patient centralized medicine
- III. Fundamentals and vocabulary of a scientific theory of medicine: development and enforcement of scientific revolutions and new paradigms (Fleck, Kuhn); epistemic cultures; incommensurability (esp. somatic vs. psychological approaches; conventional- vs. alternative medicine); theory of medical practice (from the symptom to the diagnosis; form and problems of validating treatment success)
- IV. Illness and culture (cultural influence of body- and disease perception in synchronic and diachronic cross-cultural comparisons; "culture-bound syndromes")

c) Learning catalog for medical ethics

- I. Moral philosophic terms; relationship of moral, virtue, ethos, etiquette, ethics, law and politics
- II. Forms and conceptions of ethical norm- and choice-reasoning and its criticism: deontological approaches (esp. Hippocratic oath, physician's vow and occupational guidelines; paternalism and care ethics, principlism; application of ethical concepts in medicine (esp. Christian beliefs; Kantian ethics; utilitarianism, incl. classic, preference and rule; liberal ethics/judicial ethics); inductive, casuistic ethics
- III. Central questions and problems in currents medic-ethical discussions esp. reproductive medicine and preimplantation diagnostics; stem cell research, gene research, gene therapy and cloning; prenatal diagnostics and abortion; approach with severely disabled newborns; informing and consent; approach to comatose, dement and suicidal patients; organ transplantation; therapy end; assisted death and terminal care; justice in division and ethics in medical research