



Suffering, dying, grief and loss: Medical students' photo-reflections



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Introduction

A well regarded physician once said that recognizing and managing suffering should be the goal of medicine.¹ Unfortunately, suffering is often overlooked or misinterpreted by doctors² and the exploration of suffering with patients is avoided by trainees, in part, because of personal discomfort with the issue.³ To address this gap in undergraduate years, recognition of suffering and introspection should be facilitated. As a first step in helping young doctors come to terms with suffering, dying and loss, this project aimed to investigate third year medical students' perceptions of these issues.

Methods

In the academic year of 2011-12, all 133 Year 3 medical students at the University of Hong Kong participated in formal clinical activities designed to encourage discussion around suffering. Students reflected on this theme through annotated photographs which they took inspired by interactions with patients, reactions to a guided film series, discussions and personal experience. The annotations were analyzed using a grounded theory approach, where recurrent themes were coded and analyzed independently by 2 investigators. Themes were categorized and differences were resolved by consensus.

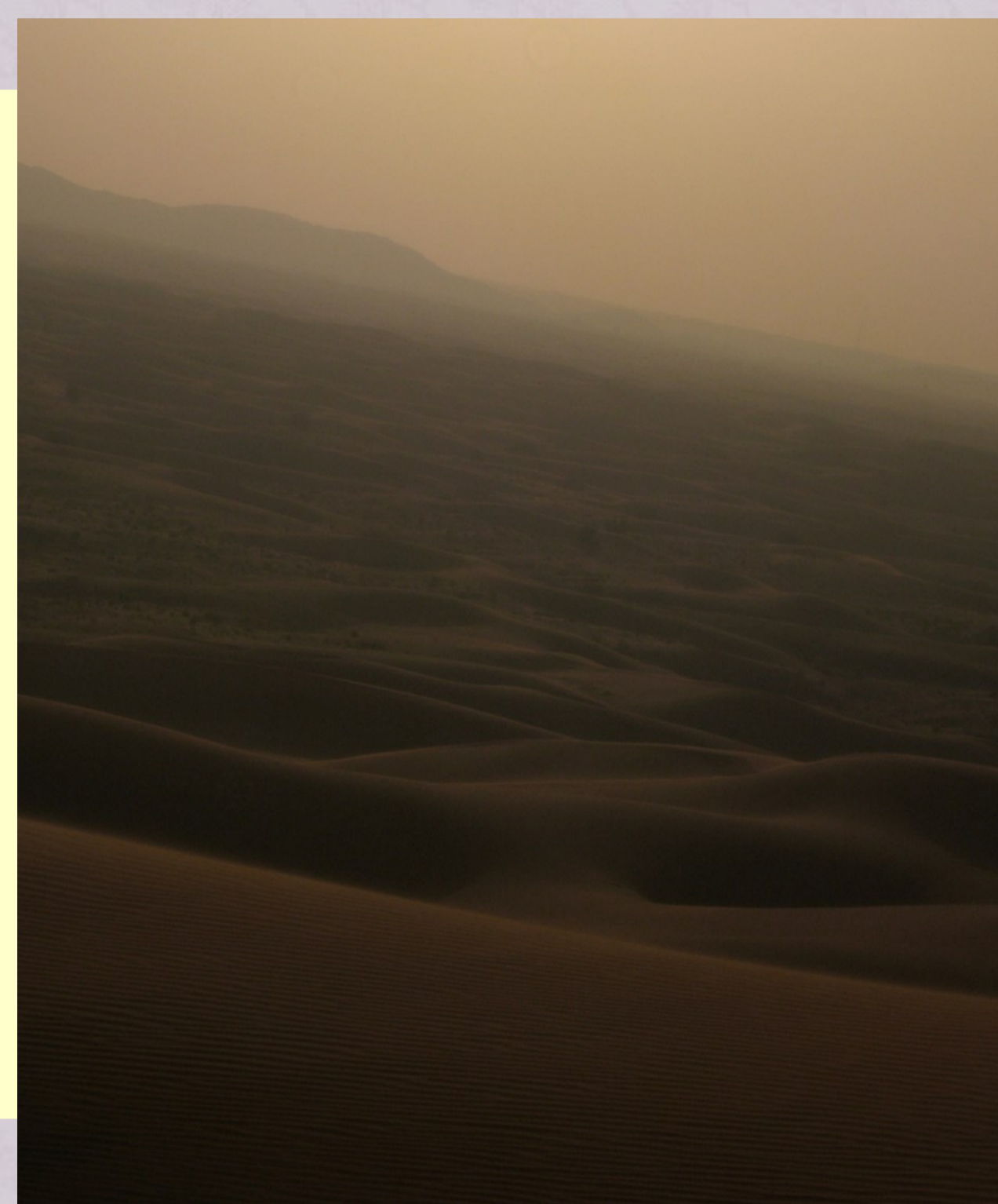
Results

Students considered suffering to encompass issues such as pain, neglect, loss of hope, uncertainty, being misunderstood, lack of control, poverty and stress. They revealed personal experience with suffering including eating disorders, domestic violence, death, bereavement, social isolation. Many concluded however, that it was all a matter of perspective as suffering could be "hidden wellbeing" and bereavement could bring a family closer together. Students' conception of suffering fell within three main themes which are illustrated by specific annotations as follows:

Description

• Condition, Situation, Emotion, Subjective perception

"She had severe social phobia and was trapped in her apartment because of anxiety. To her, even familiar places, friends and colleagues were twisted into strangers. To others, she became the stranger. To me **this psychiatric disease was horrific suffering because it slowly ate away comfort and stability in a person**, like the sands that stealthily covered my feet while I was distracted by the sunset."



"Once a cancer patient told me that the most depressing thing was that **she had to face the illness alone** – although she had support from her family, friends and loved ones, the fact was, nobody would ever truly understand what exactly she was going through, how much pain she was in, and how depressing it was to know that death was approaching..."

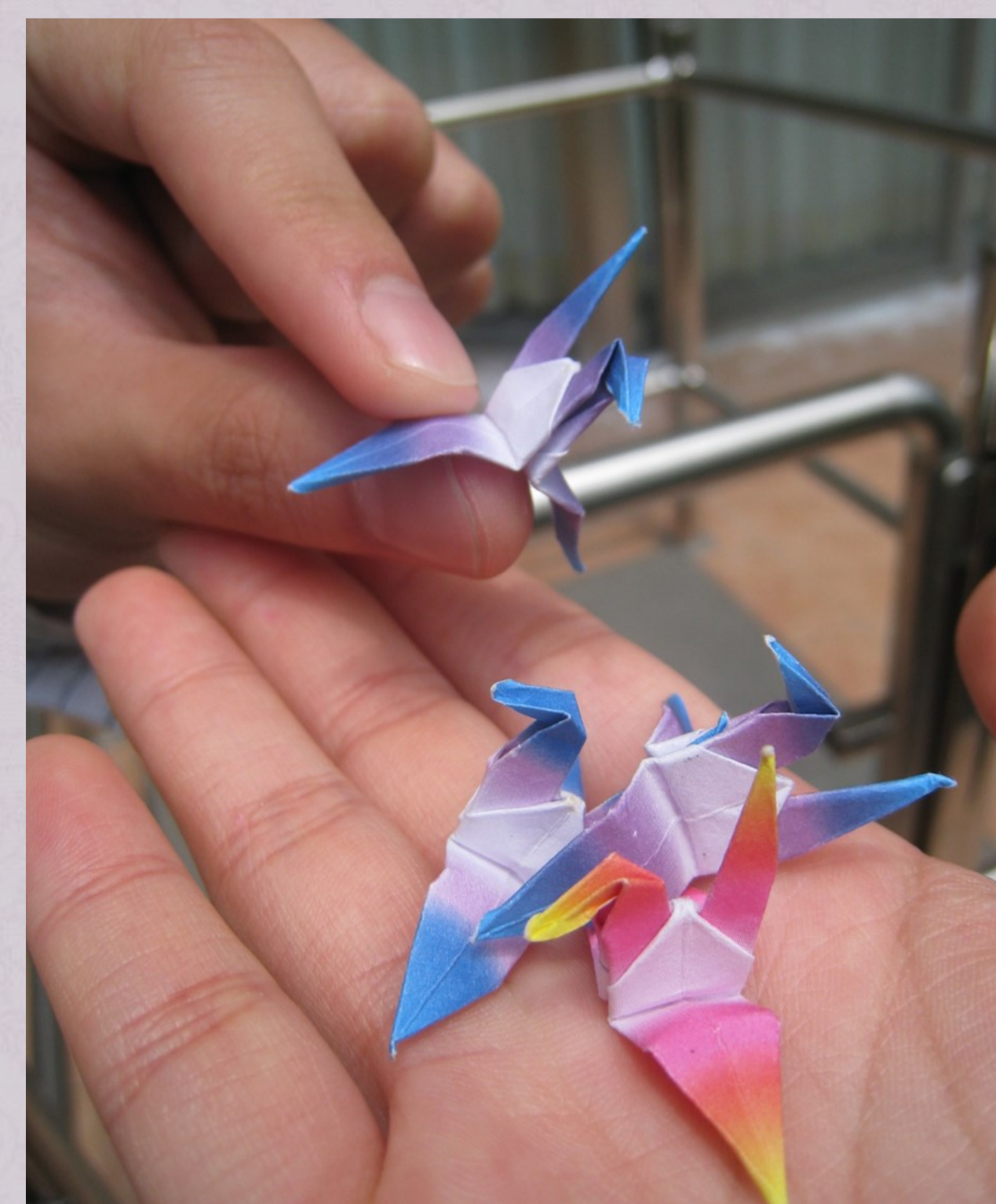
"...the normal housing flats are separated from the outside by a barbed wire fence but for **people with who live with stigmatization** for their lifestyle, sexual orientation, financial status or other reasons, these barbed wire barriers may not be so visible..."



"This is a photo of my grandmother and I...her advanced stage of Alzheimer's prevented her from recalling even having two episodes of myocardial infarction, late stage lung cancer and CHF...simply she woke up everyday just wanting to leave the hospital to be brought back home... **I don't know if she was suffering at this moment but I believe the beauty of it is that it hardly concerned her...**"

Reactions

• Patients, Students' self



"These are hands of a young lady who took nearly two years to independently fold a beautiful origami bird. After a car accident which left her paralysed below the chest, she never thought of giving up on herself; **instead she was grateful that her hands were spared and she started to try things that she had never thought of doing before.**"

"Looking at the young children in distress in the wards and all the patients who have done nothing to deserve having their health taken away, **I cannot help but feel the unfairness and injustice of sickness and disease and also of how powerless we are...**"



Doctors' role

• Behaviour, Personal characteristics, Focus of care



"...the burning of paper money, or 'yuan bao', is an old Chinese tradition to be done during funerals, occasions in remembrance of deceased ancestors and similar ceremonies... burning yuan bao is a form of **respect and hope for a better afterlife for our deceased. Why could the same kind of consideration not be offered before the patient passes away?**"

"My grandfather suffers from various chronic illnesses, suffered a lot during the Japanese occupation, lived in extreme poverty, and lacked the opportunity for education. His experiences are deeply etched into the contours of his feet...reminds me that **the role of doctors is to give mental support, understanding and encouragement to empower the patient with the knowledge and mindset to combat illness and minimize suffering.**"



Conclusion

Though young and with limited life experience, the students were able to conceptualize, through writing and reflective photographs, the suffering of others and of themselves. Exploration of suffering experienced by patients and oneself can be accomplished by combining clinical and humanities-based approaches and might lead to more empathic patient care in future.

References

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