MEDICAL TRAINEES’ REFLECTIONS ON TREATING CHRONIC PAIN: IMPLICATIONS FOR IMPROVED PATIENT WELL-BEING THROUGH TEACHING EMPATHY

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INTRODUCTION / AIM

The importance of empathy for good clinical practice is widely recognized. While, a growing body of survey data suggests that medical trainees become less empathic towards chronic pain patients over the course of their training, the contextual factors that lead to this decline in empathy remain poorly-understood. As part of an Institutional Ethnography (IE) examining chronic pain care in Ontario, we interviewed thirteen Canadian medical students and residents about their experience treating patients with chronic pain, and their reflections on the importance of empathy for clinical practice.

METHODS

Thirteen ethnographic interviews, collected as a component of an Institutional Ethnography (IE) that examined the coordination of chronic pain in Ontario.

RESULTS

Our findings suggest that trainees find chronic pain patients challenging because the pain experience is subjective, and because chronic pain often cannot be cured. Moreover, a number of trainees reflected that teachers and preceptors had shielded them from exposure to chronic pain patients, and had implied that these patients are not valuable educationally.

DISCUSSION / CONCLUSIONS

We suggest that trainees implicitly learn that chronic pain patients have limited educational value precisely because they often cannot be cured of their pain. As such, they are not useful in teaching the primary goal of medicine, which has historically been to cure. Drawing on both these interviews, and wider data set collected as part of the IE, we take issue with this assumption. Instead, we show that because the pain experience is private, and because pain cannot be cured, chronic pain patients present an excellent opportunity to teach empathy in clinical practice.