The Therapeutic Importance of Compassionate Care:
The Beneficial Outcomes of Narrative Medicine on Critical Illness
Lysa M Scealf, Undergraduate Researcher
The University of Tennessee at Chattanooga
Abstract
This research studied the benefits and outcomes of the use of Narrative Medicine practices on patients undergoing critical care and cancer treatments. Patients and their caregivers were observed and interviewed regarding the effects of Compassionate Care on their overall health before, during, and after treatments. Medical Staff was also observed applying these therapies steadily over the course of nine weeks. It was determined through preliminary analysis that the use of Compassionate Care, alternatively known as Narrative Medicine, as a practical nursing and medical technique is an effective course of supportive therapy for critical care and cancer treatment as it produces better health outcomes. The patients observed recovered faster with fewer side-effects and less stress-related trauma than those not part of this practice. It was also observed that the caregivers and families of those undergoing treatments suffered less stress and fatigue. These findings are consistent with related research which directly links positive outcomes on health recovery to the use of Compassionate Care over the more mechanical ethics of traditional medical science, (Charon, R., 2006). The results of this research will be used to develop subsequent informational literature geared to the general public as a guide which will familiarize, educate, and advocate the practice of Compassionate Care as a viable option for critical illness treatment.
The Therapeutic Importance of Compassionate Care: The Beneficial Outcomes of Narrative Medicine on Critical Illness

Introduction

Narrative Medicine has been in practice for over three decades in the United States and is now presented as core curriculum in top University Medical Schools throughout the country. At its crux is the method of Compassionate Care, a therapy that has been in practice in nursing practicums for much longer. The idea of something as common as compassion being used as a therapeutic device on something as aggressive as cancer treatments seems unlikely to be an effective supportive therapy, but it is the foundation of Narrative Medicine and it is proving to be more powerful than medicine alone. This research aims to communicate and advocate the benefits of the practice of Compassionate Care and the outcomes of this therapy for those patients undergoing treatment of critical illness, in particular cancer. It will also examine the effect of those outcomes on the patient caregivers. The questions being addressed: How therapeutic is compassion on a practical level? And, specifically; How important is Compassionate Care to critical illness treatment and recovery?

Recent research is demonstrating that through administering doses of kindness, touch, and active listening to the patient’s care, this therapy increases patient comfort when experiencing critical illness and undergoing difficult treatments. Studies continually demonstrate that the efficacy in Compassionate Care cases, show this therapy lowers patient stress and creates a healthy bond with the medical staff resulting in faster recovery times, fewer readmissions, and fewer medical errors. The approach is simple, essentially this method employs listening, reflecting, and responding to patient stories to promote healing. Building bonds through storytelling creates a platform for the physician to recognize patients as people and develop
empathy for them, as opposed to traditional medical practices which deal specifically with a scientific discipline, encouraging distance between doctor and patient (Charon, R., 2006). However, by understanding the patient’s histories, diagnosis and treatment can be based on patient and physician connections producing a more ethically humane level of medical care. Ultimately, the inclusion of the humanities in this predominantly scientific field keeps humanity in the equation.

Methods & Analysis

Setting & Participants

Preliminary research included observing the experiences of my father’s testicular cancer therapy at the Cancer Treatment Center at Erlanger Hospital in Chattanooga, TN., as well as gathering narratives volunteered by other patients (9 men, 2 women) receiving radial and chemical oncological therapy at the same location (no personal identifiers were recorded or shared). I analyzed the methods of Compassionate Care in practice by the medical staff at Erlanger’s Cancer Center over the course of nine weeks and interviewed the physicians, staff, and social worker to obtain information pertinent to this study. I researched current (within the last ten years) medical journal entries on Compassionate Care and on the connecting topics of Narrative Medicine and Cultural Competence. With the professional assistance of the UTC Library’s Health & Science librarian using CINAHL, Pubmed, and PsychInfo databases to dissect the proper articles, books, and literature on these topics, I was able to build on the studies already conducted and expand on that knowledge with new evidence. A detailed journal was archived outlining the positive, as well as any negative (though none were found), outcomes of these practices and this formed the core of my research, the precursory findings of which are reflected in this abstract.
Results

At just nine weeks, my research shows that although differentiated between varied types of critical illness treatments reviewed; cancer treatments - including both chemical and radial oncology for testicular and ovarian types and one case of oxygen therapy and Pulmonary rehabilitation for COPD, it was clear the application of Compassionate Care, in these instances, was well-received and indeed provided more positive outcomes for recovery both in physical and emotional/psychological well-being for the patients observed. More positives were recorded from the medical journals and books found through search results that I have researched to date and are outlined in the References section of this abstract.

Conclusion

The idea of Compassionate Care should be placed into all University Medical school curriculums. It should become common practice, readily recognized as ethical healthcare in the public view in the United States. According to research, the U.S. is behind the curve on this concept, compared to the United Kingdom, Australia, and Scandinavian countries (Aagard, M., 2018), and frequently the U.S. downplays the importance of the concepts of compassion, sympathy, and empathy by comfortably interchanging these key words with the term caring.

There need to be specific protocols in place to ensure the bond created by this practice does not cross lines of ethics but alternatively, creates a new common practice. There should be further literature developed to increase public awareness of the benefits of Compassionate Care, and some argue it needs to be measured so it is identifiable to patients (Burnell and Agan 2013).
Further, Compassionate Care should be routine practice for medical professionals, not as an alternative to traditional medical therapies, but as a supportive care solution.

... early U.S. nurse leaders considered compassion an inherent quality of a nurse and the essence of nursing.

My mission with this research from the beginning has been to help people better understand the connection between compassion and effective healing. I hope to educate people to the advantages of this therapeutic method by creating a literary database or series of papers that compile all of this information for future patients and caregivers; develop an outreach or volunteer program to help distribute it where it is needed most, perhaps by inviting nursing students to earn volunteer, intern, or experiential learning credit sharing the literature and information produced by this research.

These items will aid patients in finding helpful resources like housing and transportation while undergoing therapy, access to participating care facilities not easily detectable through typical search engines, and the accompanying literature will enlighten those unfamiliar with the benefits of Compassionate Care, advocating the inclusion of this therapy into their health and recovery treatment plans. By attending a medical center which supports these practices, as well as providing the additional support for personal caregivers and family members, more patients will benefit from these therapies and resonate the need for Compassionate Care as the prime directive of all medical facilities.
References


Available http://internationaljournalofcaringsciences.org/docs/6.%20Burnell%20Compassionate%20Care%20Tool.pdf