Doctors must do more to change the world
- compassionate activism

Dr Robin Youngson
CoFounder of Hearts in Healthcare
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My own 18-year-old daughter Chloe

Broken neck, broken back

100 days in hospital in spinal traction
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Her only view of the world for 100 days – the ceiling of her hospital room
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{the movement for human-centred healthcare}

What I learned in 13 years of campaigning to bring more humanity and compassion to healthcare…
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Our materialistic science is misleading – each of our patients is an amazingly dynamic mind-body whole being
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Nine week mind-body program altered expression of 1,059 genes in a trial of patients with inflammatory bowel disease

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Compassionate caring matters as much as the treatments we administer
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Diabetic patients of high empathy primary care physicians had 42% fewer hospital admissions for metabolic crisis than patients of low-empathy physicians

Photo credit: Sriram Bala
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**Compassionate, whole-person care in terminal lung cancer – early access to palliative care**

- Fewer patients have depression, 16% vs 38%
- Fewer patients chose aggressive end of life care, 33% vs 54%
- Reduced overall cost of care
- But increased median survival, 11.6 months vs 8.9 months!
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Randomised trial of compassionate care for homeless patients presenting to ER - 30% reduction in repeat visits in next month
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Supportive pre-op visit by anesthesiologist:
- Halved the dose of post-op opiates

Non-supportive pre-op visit by anesthesiologist:
- Length of stay 2.7 days longer

Harvard study 1964: Randomised trial of supportive / non-supportive manner in pre-op visit by anesthesiologist
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Trauma patients who rated their surgeon “high empathy” are twenty times more likely to fall into the better subjective outcomes group at six weeks after discharge:
- Very satisfied with care
- Believe that treatment is effective
- Treatment makes me feel better
- Improved quality of life
Physician-patient relationship has bigger effect size on 5-year male mortality than smoking cessation or taking aspirin.
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Dramatic reduction in healthcare utilisation as a result of finding common ground with patient, through compassionate, patient-centred primary care (Stewart 2000)

Patients who found common ground with their doctor also had better recovery from their discomfort and concern, and better mental health 2 months later.
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The percentage of interactions in family and general internal medicine that are patient-centred predicts the total cost of healthcare (Bertakis 2011)

Median annual cost of healthcare:

- Below median patient-centred care (n=254): $1435
- Above median patient-centred care (n=255): $948

'Structural' care vs. 'Compassionate' care
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Satisfies the Quadruple Aim:
- Better outcomes
- Better patient satisfaction
- More cost-effective
- Happier health professionals
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Why isn’t this change spreading like wildfire?
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It’s the way we think about the world

Medical science: objective, materialistic, reductionist
- we have become ‘body mechanics’, not healers
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If a materialistic, rationalist approach doesn’t work, how do we tackle ‘wicked’ problems like the obesity epidemic?
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The five BIGGEST mistakes I made in campaigning
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The incidence of obesity is highly correlated with income inequality...

So what is an obesogenic culture?

Maybe it’s more than fast food?
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<table>
<thead>
<tr>
<th>The myth of separation</th>
<th>The myth of connection</th>
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</thead>
<tbody>
<tr>
<td>Rationalism, clockwork Universe</td>
<td>Holism, intelligent Universe</td>
</tr>
<tr>
<td>Only the material world is real</td>
<td>All matter has consciousness</td>
</tr>
<tr>
<td>Individualism and competition</td>
<td>Profound connection and interdependence</td>
</tr>
<tr>
<td>Man dominates the natural world, extractive economy</td>
<td>Man and the natural work are profoundly interdependent</td>
</tr>
<tr>
<td>Ownership, everything is a commodity</td>
<td>Guardianship, stewardship</td>
</tr>
<tr>
<td>Inequality, poverty, violence, consumerism, environmental degradation, chronic disease</td>
<td>Compassion, connection, meaning, divine purpose, healing and wellbeing</td>
</tr>
</tbody>
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What kind of leadership do we need for ‘wicked’ problems?

<table>
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<tr>
<th>HERO (separation)</th>
<th>HEALER (connection)</th>
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<tbody>
<tr>
<td>Moral crusade</td>
<td>Compassion and non-judgment</td>
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<tr>
<td>Evangelism</td>
<td>Non-persuasion, humility and vulnerability</td>
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<tr>
<td>Being the Expert</td>
<td>Seeking wisdom</td>
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<tr>
<td>Using business/economic levers</td>
<td>Gift economy, service</td>
</tr>
<tr>
<td>Focus on the problems</td>
<td>Focus on what works best</td>
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{the movement for human-centred healthcare}

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Some relevant references: