International Journal of
ody, Mind & Culture
Cross-Cultural, Interdisciplinary Health Studies

Philosophy of Medicine: Reframing the Past, Rethinking the Future

Alireza Monajemi[1]

[1] PhD in Cognitive Science and Philosophy of Science and Technology, Department of Philosophy of Science and Technology, Institute for Humanities and Cultural Studies, Tehran, Iran

Editorial

The philosophy of medicine is a rapidly growing and progressing branch of philosophy; however, in order for it to remain a distinct field of inquiry, I propose historical reframing based on reflection on its roots and development. In other words, understanding its history is a way to give perspective to the contemporary issues of philosophy of medicine and shape its future.

It is well-known in the English-speaking world that the narrative of emergence of the philosophy of medicine in the 1970's in America started with the publication of "The Journal of Medicine and Philosophy" and "Theoretical Medicine". Although the role of the American movement in the 70's in both the institutionalization and globalization of the philosophy of medicine is undeniable, it should be noted that medical philosophy is deeply rooted in the non-English-speaking worlds, predominantly in Poland, Germany,

and France (Giroux & Lemoine, 2018).

By the second decade of the 20th century, chairs of History and Philosophy of Medicine had already been established in five major Polish medical schools. The journal titled "Archives of the History and Philosophy of Medicine" published articles on the philosophical aspects of medicine, and medico-philosophical subjects were debated in the meetings of the Polish Society of the History and Philosophy of Medicine. The history of the Polish school of medical philosophy, which dates back to the mid-19th century, culminated with Ludwik Fleck (physician-philosopher), the most prominent figure in this circle (Lowy, 1990).

In Germany, Richard Koch's works on the foundations of medicine were first published in the 1920's. These publications reflect on the character of medicine as a practical endeavor and examine the status of medicine within the theory of natural sciences. One of his conclusions was that medicine is not a science, like physics or biology, in the original sense of the word, but a practical discipline (Topfer & Wiesing, 2005). Science versus practice, theory of medicine, the relationship between diagnosis and therapy,

Corresponding Author:
Alireza Monajemi; PhD in Cognitive Science and Philosophy of Science and Technology, Department of Philosophy of Science and Technology, Institute for Humanities and Cultural Studies, Tehran, Iran
Email: monajemi@ihcs.ac.ir

the importance of the goal of medicine are the topics he introduced to the field. In addition, two figures of German philosophy, Martin Heidegger and Has-Georg Gadamer, have specifically and deliberately reflected on certain topics in medicine. Heidegger, in Zollikon Seminars, related ontological and phenomenological perspectives to the theory and praxis of medicine, psychology, psychiatry, psychotherapy, as well as psycho-somatic medicine. In the "Enigma of Health: The Art of Healing in a Scientific Age" (Über die Verborgenheit der Gesundheit), Gadamer examines and reflects on the key components of medical practice such as intelligence, death, life, anxiety, freedom, health, and the relationship between the body and the soul based on the phenomenological and philosophical hermeneutics frameworks. As a member of Gadamer's school, Wolfgang Wieland has questioned judgment in numerous writings such as "practice and judgment or diagnosis: considerations on medical theory in the field of medical practice" based on Kant's theory of judgment. In France, Georges Canguilhem (French physician and philosopher) in "The Normal and the Pathological" showed that the emerging categories of the normal and the pathological were far from being objective scientific concepts. He demonstrated how the epistemological foundations of modern biology and medicine were intertwined with political, economic, and technological imperatives. Influenced by Canguilhem, Michele Foucault, based on the idea of spatialization, tried to meticulously illustrate the connection between medical epistemology and medical institutions in "The Birth of the Clinic".

In addition to the attempts that were naïve, trivial, and lacking in historical perspective to frame the philosophy of medicine in such terms as "philosophy in medicine", "philosophy and medicine", etc., the American school treats the philosophy of medicine as a sub-discipline of the philosophy of science as a result of increasing specialization and

fragmentation movements. Although it seems that general topics in the philosophy of science including experimentation, theory and evidence, causality and explanation, realism, reductionism, and science and values are still relevant in the philosophy of medicine, they are nonetheless too limiting to allow for a full coverage of all the issues in medicine.

Although it is reasonable to expect medical philosophy to serve as a basis for bioethics, it seems that there is a tendency in bioethics to engulf medical philosophy in itself (Stempsey, 2007), a process like phagocytosis! On the other hand, if the philosophy of medicine is defined as a sub-discipline of the philosophy of science, it will desensitize it to the humanistic concerns of clinical practice and run the risk of reducing such concerns to merely ethical issues.

I am suggesting neither the philosophization of all medical issues, nor the prioritization of medical philosophy. Instead, what I am suggesting is a critical and constructive dialogue between medical philosophy and other fields and disciplines like medical education, medical sociology, etc. Taking all of that which we consider to be the legacy of medical philosophy changes our narrative of its birth and development. By putting these pieces together we can draw a complete picture of the issues and approaches that medical philosophers have dealt with, which are very diverse and multifaceted. One of the major downsides to reducing the philosophy of medicine to the philosophy of science or bioethics is the loss of diversity of approaches and issues. Many of the issues that philosophers such as Gadamer have pointed out in medicine have not yet become serious issues in the field of medical philosophy. In my opinion, applying the ideas of philosophy to medical philosophy can enrich this field.

The philosophy of medicine needs both to interact with, and to reflect on the biomedical sciences; a task it has been busy with since its birth. It also should interact with non-medical sciences (social sciences and humanities

related to medicine); something that has not yet been Undertaken seriously. Medical philosophy offers the field of medical education profound and remarkable insights into clinical reasoning, the doctor-patient relationship, empathy, etc. Its contribution to medicalization reveals the hidden sides of this phenomenon. The role of technology (artificial intelligence and cyborg) in clinical practice, clinical encounter, and medical institutions is the issue that has received little attention in medical philosophy.

In my opinion, promoting debate among other disciplines both within and outside of medicine, utilizing the achievements of other disciplines in medical humanities, and playing a more serious role in medical education and health policy-making are the future of medical philosophy.

Conflict of Interests

Authors have no conflict of interests.

References

Giroux, E., & Lemoine, M. (2018). Philosophy of Medicine. Barberousse, A., Bonnay, D., Cozic, M., & Robertson (Eds). The philosophy of science: A companion. Oxford studies in philosophy of science. Oxford, UK: Oxford University Press.

Lowy I. (1990). The Polish School of Philosophy of Medicine: From Tytus Chalubinski (1820–1889) to Ludwik Fleck (1896–1961). Dordrecht, Netherlands: Kluwer.

Stempsey, W. E. (2007). Medical humanities and philosophy: is the universe expanding or contracting? Med Health Care Philos., 10(4), 373-383. doi:10.1007/s11019-007-9080-4 [doi]. Retrieved from PM:17549604

Topfer, F., & Wiesing, U. (2005). The medical theory of Richard Koch I: theory of science and ethics. Med Health Care Philos., 8(2), 207-219. doi:10.1007/s11019-004-7445-5 [doi]. Retrieved from PM:16215800