

Humanities: Art, Language, and Spirituality in Health Care

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Discovering the Truth Beyond the Truth

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Abstract

*The question “What is truth?” is one of the oldest questions in philosophy. Truth within the field of medicine has gained relevance because of its fundamental relationship to the principle of patient autonomy. To fully participate in their medical care, patients must be told the truth—even in the most difficult of situations. Palliative care emphasizes patient autonomy and a patient-centered approach, and it is precisely among patients with chronic, life-threatening, or terminal illnesses that truth plays a particularly crucial role. For these patients, finding out the truth about their disease forces them to confront existential fears. As physicians, we must understand that truth, similar to the complexity of pain, is multidimensional. In this article, we discuss the truth from three linguistic perspectives: the Latin *veritas*, the Greek *aletheia*, and the Hebrew *emeth*. *Veritas* conveys an understanding of truth focused on facts and reality. *Aletheia* reveals truth as a process, and *emeth* shows that truth is experienced in truthful encounters with others. In everyday clinical practice, truth is typically equated with the facts. However, this limited understanding of the truth does not account for the uniqueness of each patient. Although two patients may receive the same diagnosis (or facts), each will be affected by this truth in a very individual way. To help patients apprehend the truth, physicians are called to engage in a delicate back-and-forth of multiple difficult conversations in which each patient is accepted as a unique individual. J Pain Symptom Manage 2015;49:646–649. © 2015 American Academy of Hospice and Palliative Medicine. Published by Elsevier Inc. All rights reserved.*

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Introduction

The famous Greek physician and philosopher Galen of Pergamon once wrote “quod optimus medicus sit quoque philosophus,” which means that an excellent physician also must be a philosopher. In philosophy, one of the most commonly pondered questions is “What is truth?” If we take Galen’s words to heart, then we as modern physicians also must confront ourselves with this age-old question.

In recent decades, the topic of truth, or rather truth-telling, has received considerable attention in the field of medicine because of its fundamental relationship to the principle of respect for patient autonomy.¹ To act autonomously and fully participate in their medical care, patients must be told the truth about their disease and potential treatment options—

even in the most difficult of situations.² Indeed, it is precisely among patients with chronic, life-threatening, or terminal illnesses that truth plays a particularly crucial role. Truth—like pain—is multidimensional. This means that “telling the truth goes beyond delivering biomedical facts. It also entails humanity.”³ In this article, we reflect on the biomedical as well as the humanistic aspects of truth by discussing its linguistic roots in Latin, Greek, and Hebrew.

Veritas

In modern medicine, the truth is often equated with medical facts. Evidence-based medicine has its roots in Aristotle’s theory of empiricism, which holds that knowledge is based on experience and observation,

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that is, evidence. Truth in this sense correlates most closely with the Latin *veritas*, which can be translated as *that which withstands testing or the accuracy of a fact as determined by agreement between the statement and reality*. Aristotle believed that one could verify something as true through experimentation and observation. However, this presents an important problem. If the truth depends on verification through observation, one would need to observe all possible cases to prove something true. For example, would it be possible to say that all swans are white without actually observing all swans? To solve this dilemma, Karl Popper introduced the theory of critical rationalism, which contests that a scientific theory must withstand falsification to be considered true. Accordingly, one would only need to find one black swan to prove that not all swans are white. However, if no black swans can be found despite multiple attempts to find one, then one can be quite certain that all swans are white. Critical rationalism thus suggests that the more often a theory withstands refutation, the closer it comes to an accurate description of the truth. Nevertheless, the fact that a theory has not yet been disproven does not prove that it is true. Rather, this simply implies that the unrefuted theory comes closer to the truth than prior disproven theories. Accordingly, through medical research we constantly grow closer to the truth, yet we remain grounded in the knowledge that it is not fully attainable.

Especially in the field of palliative care, which emphasizes an individualized approach to patient care, we must, therefore, be willing to constantly question our convictions regarding the best diagnostic and therapeutic measures. Even when substantial evidence and well-established standards exist, there is no guarantee that such standards hold true for each individual patient. Thus, determining the best course of action requires physicians to enter into a dialogue with their patients, in which scientific truths (*veritas*) are discussed along with the personal needs of the patient.

An essential aspect of this physician-patient dialogue is providing patients the scientific truths about their diagnosis and prognosis. Honestly communicating this information is indispensable. However, patients who receive bad news may hear the facts (*veritas*) but deny that they are true. In this case, the truth perceived by the individual (e.g., “I am going to be fine.”) differs from the medical truth (e.g., “There is no cure for your disease.”).

Aletheia

How are we as physicians to understand that patients sometimes deny an accurate description of

reality (*veritas*) as the truth? The Greek term for truth, *aletheia*, reveals a less common understanding of the truth. *Aletheia* literally means *not hidden*. In the 20th century, the German philosopher Martin Heidegger devoted considerable thought to the term *aletheia*. In his famous work “Being and Time” as well as “On the Essence of Truth,” Heidegger describes *aletheia* as a *process of unconcealment*, emphasizing that truth is an opening, or a revelation of what is. In ancient Greece, *aletheia* was used in theater to describe the process of slowly drawing the curtain and revealing what had been hidden. The metaphor of drawing the curtain is a useful image in understanding how both revealing and apprehending the truth is a process. Physicians must be cautious not to provide medical facts like pouring a bucket of cold water over the patient’s head. Rather, physicians must hold out the truth like a jacket, welcoming and encouraging patients to slip into it at their own pace. Imagine a humble butler who holds out the jacket to his master; he stands at the service of the master without forcing the jacket on him before he is ready. In the same way, physicians should not try to force the truth on their patients. For patients diagnosed with a life-limiting illness, accepting the medical facts (*veritas*) as existential truths (*aletheia*) that affect their very being takes time and multiple conversations. Our responsibility as physicians is to accompany patients in the *process of unconcealment* until the curtain is slowly drawn back to reveal medical truths as existential realities.

Emeth

In the process of understanding and accepting the truth, the physician-patient relationship plays a vital role. *Emeth*, the Hebrew term used for truth in the Old Testament of the Bible, emphasizes that truth involves relationship. Truth, in the Hebrew sense, is not an abstract concept but rather a concrete experience that occurs in our encounters with others. The word *emeth* stems from the Hebrew verb *amam*, which means *to support and make firm*. Thus, *emeth* characterizes the reliability and steadfastness of things, facts, people, and even God. Throughout the Old Testament, *emeth* is used to describe God’s active faithfulness to the Israelites. Through his actions, not simply through his being, God proved that his promises were true. Likewise, *truthfulness*, defined as acting in accordance with the truth, is perhaps the most fitting translation of *emeth*.

A parallel to this understanding of the truth is Martin Buber’s “I-Thou” relation. Buber proposes that the most intimate reality, or truth, of the person is unfolded in encounter with others. According to

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