



**BARI ENGLISH MEDICAL CURRICULUM (BEMC)
“HUMAN SCIENCES” (1st year -1st Semester)**

GENERAL PSYCHOLOGY

Prof. Giulio E. Lancioni

The course of General Psychology (SSD MPSI-01) is largely focused on learning principles and paradigms, application of learning principles, behavior observation and data recording, and basic single-subject designs. In particular:

- Classical learning paradigms;
- Applications of such paradigms for diagnostic and therapeutic purposes (e.g., hearing assessment and treatment of fears and phobias);
- Operant learning paradigms;
- Thorndike model;
- Hull model;
- Skinner model;
- Applications of operant paradigms for diagnostic and therapeutic purposes (e.g., hearing and visual assessment, treatment of individuals with learning and behavioral problems);
- Behavior recording;
- Frequency recording;
- Interval recording;
- Time sampling;
- Evaluation of the impact of intervention programs based on learning principles through single-subject designs;
- ABAB;
- Multiple baseline designs;
- Alternating treatments designs.

The exam consists of an essay describing the intervention program set up for a specific case.

HISTORY OF MEDICINE AND MEDICAL EDUCATION

Prof. Maria Grazia Albano

At the end of the course the student should be able to:

- define Medicine, the professional competence of the doctor
- define “health” and describe the evolution of the concepts of health and disease
- define Medical Humanities and motivate their presence (and the sources) in the Medical Curriculum
- explain the purpose of the study of “History of Medicine and of History of Medical Education”

The student should also be able to describe:

The phases of Medicine

°Medicine in ancient Egypt

The places of care, the diseases, the treatments, the doctor

The teaching of Medicine in the Ancient Egypt

°Medicine in ancient Greece (the School of Mileto-Talete and Pythagoras; Alcmenone of Crotona; Aristotle, the symbol of Medicine, Hippocrates);

The doctor, the approach to disease and to pain

The teaching of Medicine in Ancient Greece

° *Medicine in the Middle Ages* (Galen)

The doctor of the Middle Ages, the places of care, the diseases, the problems of the psychiatric sphere, the approach to disease, pain and death

The teaching of Medicine in the Middle Ages

The School of Salerno

The birth of the Universities (the teaching of Medicine at the University of Bologna;

Taddeo Alderotti, Mondino de' Luzzi) and of the Colleges

° *Medicine in the Renaissance* (Vesalio, Leonardo da Vinci, Aranzi, Paracelso)

The Doctor of the Renaissance, the diseases, the places of care

Medical Education in 1500 (Giovanni Battista da Monte)

° *Medicine in 1600* (Harvey, Malpighi, Galilei, Santorio, Ramazzini)

The doctor, the approach to disease, the first medical journal

° *Medicine in 1700* (Jenner, Lancisi, Morgagni, Brambilla, Bichat, Hunter, Spallanzani)

The approach to pain, places of care, discoveries: the hypodermic needle, the thermometer, the clinical trials

Medical education in 1700 (Rasori, Cabanis)

° *Medicine in 1800* (Laennec, Virchow, Ekoda, Rokitansky, Bernard, Semmelweis, Fleming, Pasteur, Lister, Koch, Mendel, Golgi)

The approach to pain, the discoveries: aspirin, the syringe, the ophthalmoscope

Women and Medicine in 1800 (Nightingale, Backwell, Marie Curie, the Matilda effect: i.e.: Frankline, Meitner, Maric in 1900) – the Red Cross

Psychiatry in 1800 (Pinel)

Medical education in 800 (Murri) – the Galathei

° *Medicine in the 20th century* (Richert and Potier, Fleming, Freud, Pablov)

The discoveries in the different fields of Medicine

Women and Medicine in 1900 (Cicely Saunders, Rita Charon)

The WHO, the places of care (Hospices, Hospitals...), the NHS in England and the SSN in Italy, the approach to the disease and to pain, the doctor

Celebrity doctors, sick famous people

Medical education from 900 to the present (Flexner, from the Tabella XVIII to the present)

° *Medicine of the future*; teleMedicine, robotics, nanoMedicine, genic therapy, the doctor and the patient of the future

Medical Education in the future.

° *Epidemics over the centuries*

The course also presents hints to Medicine in art (especially in painting: the disease in paintings and sick famous painters) in the different historical periods.

Recommended bibliography:

G. Cosmacini, The Long Art. History of Medicine from antiquity to the present day, Laterza, 2011

G. Armocida - B. Zanobio, History of Medicine, Masson, Milan 2002

<http://fr.slideshare.net/trapanimartino/-la-formazione-medica-fino-alla-table-xviii>.

V. Cagli

<http://fr.slideshare.net/trapanimartino/-la-formazione-medica-fino-dalla-table-xviii-to-our-days>.

F.Dammacco, G. Danieli

BIOETHICS AND MORAL PHILOSOPHY

Dr. Raffaello Maria Bellino, M.D., Ph.D.

Topics

Moral Philosophy and General Bioethics.

Code of conduct in arguing. Basic tools for reasoning: deduction and induction, argument, fallacy, validity and soundness, refutation.

A Framework of Moral Norms: Principles, Rules, Rights, Virtues. Conflicting Moral Norms.

Moral theories. Method and moral justification (reflective equilibrium). Moral Dilemmas.

Principlism (Beauchamp-Childress): Respect for Autonomy, Beneficence, Nonmaleficence, Justice

Clinical Ethics.

The Four Topics Method. Ethical Reasoning in Clinical Ethics. Resources in Clinical Ethics.

Medical Indications: Indicated and Nonindicated Interventions. Clinical Judgement and Clinical Uncertainty. Cardiopulmonary Resuscitation and Orders not to Resuscitate. Medical Error. Determination of Death.

Preferences of Patients: Informed Consent. Decisional Capacity. Decision Making for the Mentally Incapacitated Patient. Surrogate Decision Makers. Failure to Cooperate in the Therapeutic Relationship.

Quality of Life: Divergent Evaluations of Quality of Life. Enhancement Medicine. Compromised Quality of Life and Life-Sustaining Interventions. Pain Relief for the Terminally Ill Patients.

Medically Assisted Dying. Suicide. Eubiosia and End of Life Bioethics.

Contextual Features: Health Professions. Other Interested Parties. Confidentiality in Medical Information. Economics of Health Care. Allocation of Scarce Health Resources. Influence of Religion on Clinical Decisions. Role of Law in Clinical Ethics. Clinical Research and Education. Public Health. Organizational Ethics.

Universal Declaration on Bioethics and Human Rights (Barcelona, 1995).

Bibliography

Baggini J and Fosl PS, "The Philosopher's Toolkit: A Compendium of Philosophical Concepts and Methods", Wiley-Blackwell, Oxford 20102.

Beauchamp TL and Childress JF, "Principles of Biomedical Ethics", Oxford University Press, New York 20137, pp. 1-29, pp. 249-301, pp. 351-430.

Bellino F., "Eubiosia and life ending bioethics", excerpt.

Jonsen A.R., Siegler M., Winslade W.J., "Clinical Ethics: A Practical Approach to Ethical Decision Making in Clinical Medicine", McGraw-Hill, New York.

DOCTOR-PATIENT RELATIONSHIP