

The Process of Desensitization in Medical Students and the Loss of Empathy that Follows

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The process of becoming desensitized is not an uncommon experience for those in medical school, from experiencing and witnessing more pain and trauma than a normal person, to having to control emotions for the sake of remaining neutral while working, it does not take long for students to learn how to “put up a wall.” Throughout the years, numerous studies have come to shed light on the impact of working with people going through pain and death has had on medical students, leading to lack of empathy, detachment and developing a cynical outlook, a stark contrast to what is needed when developing patient-physician relationships. The influences of becoming desensitized ranges from lack of a proper peer mentor to the inability to come to terms with something one has witnessed, making those responsible for helping others lose the tool needed to connect and help their patients through a hard time. As these medical students endure both the mental and emotional labor that comes with the extreme curriculums of medical school, along with taking on the responsibility of saving lives, it is important to ensure that their emotional health is not ruined beyond repair. Empathy and the ability to connect with patients is an important aspect of working with people, and if students start to lose that ability during medical school, then it means their wall will only get taller and stronger as they progress through their professional career. However, some universities are looking into options that may save their students empathy, while also ensuring that their professionalism is not at stake.

The amount of work and the magnitude of pressure that comes with being a medical student is typically known by most, it is an extreme change of pace and introduces the task of taking care of others lives. It is no surprise then that during all the lessons and sleepless nights that these students start to go through a process where they become desensitized to the hardships and difficulties they witness during their rotations and classes. This process of becoming

desensitized can best be described as a form of self-protection or a coping method to help deal with the pain and trauma the students witness while dealing with patients. A medical student receives a rigorous education teaching them about different illnesses, symptoms and expected outcomes, and then they are placed in rotations, where they will experience their newfound knowledge firsthand. For some of those going into medicine, their motivation was to help others and relieve their pain, but now with a greater understanding of the hardships their patients are going through and how much worse symptoms may get, it can cause these students to gradually detach themselves emotionally.

It has been found that empathy is a big contributor to building patient-physician relationships, and can lead to both personal growth and optimal outcomes. Empathy allows for the students to connect with the pain their patients are going through and can aid them mentally while treating them physically. However, medical students are often taught to detach emotionally, and remain clinical neutrality to ensure that they can put all their focus into their work and stay efficient. As a result, medical students start to notice that what would once cause them to react no longer phases them, leading to concern that they are becoming insensitive to the personal needs of those in their care (Kuczewski et al, 2014). In Hojat et al. (2009), it was found that there appears to be a “cynical transformation” in medical students, with a statistically significant decline of empathy scores during the third year of medical school. This drastic depletion of empathy from students is important to note since the third year of medical school is typically when students start their clinical rotations, and are interacting with patients, meaning they actually need more empathy as they assist those they are taking care of. The decline in empathy was found to continue through graduation and even worsen through postgraduate training and into residency, with the cynical outlook deepening the more experience the

individuals gained (Hojat et al., 2019). This study found that some major factors contributing to this detachment aside from withdrawing from the emotional pain experienced with patients, that lack of sleep, poor role models, negative educational experiences, harassments faced in school and the hospital and overly demanding patients also led students to become desensitized.

Similarly in Newton (2013), it was also noted the importance of empathy for a physician to have while dealing with their patients, with empathy helping to build trust, gain patient satisfaction, reduce anxiety and improve health outcomes. It also touched on how medical school can result in the “stunt of moral growth and increased cynicism,” leading to negative relationships with patients as a result. Along with that, this study focused on how empathy scores taken in medical school could help dictate the path a student should pursue, with higher scores relating to more human interaction, such as pediatrics, whereas lower scores relate to less human interaction, such as surgery. Newton (2013) emphasizes that empathy is critical when working with patients, and that the decrease seen in medical students comes as a result of them attempting to regulate their emotions. This includes “down-regulating,” meaning students are having to suppress negative emotions they may feel while working, which can impact their effectiveness on the job and their mental health.

While patient interaction does not begin till the third year of medical school during rotations, detachment from the human being can start during medical school when students are first exposed to a human cadaver. In one study done, Tseng et al. (2015), they focused on the cadaver dissection that many third-year medical students complete and how students handled the process. They examined the students' initial response to the body and their methods of coping, as the different ways of coping also impacts their emotional impact and the way they perceive the cadavers. It was found that students react two different ways, they either have a strong initial

emotional reaction, resulting in them needing to develop coping mechanisms such as detachment and not perceiving the cadaver as human, or they have no initial emotional reaction, and they perceive the cadaver as human. Those who didn't have an initial reaction therefore had less emotional challenges to overcome and kept the notion that the cadaver was human throughout the whole dissection process, whereas others began to objectify the cadaver the more it was dissected. This is important as the different reactions and coping mechanisms translate into how these students will handle their emotions and concerns as they continue to go forward, and how their levels of empathy will be impacted. The objectifying of the human cadaver during the dissection process could also be an influencer as to why students become desensitized to their living patients. It has even been recorded that when students are taking care of patients during their rotations, they start to focus only on the problem area at hand, rather than the person as a whole, not taking into consideration their patient's feelings as they are attempting to complete their work in the most efficient way possible. As a result, the students forgo the patients spiritual, emotional and personal needs (Kuczewski, 2014).

The loss of empathy during medical school and the process of desensitization has started to become a topic of discussion for universities, where they want to start implementing procedures that will help students process everything they go through. One way that a medical school has attempted to boost the empathy levels of their students has been to conduct simulated medical consultations (Schweller, 2014). The study found that these stimulated consultations allowed for students to reflect on the patient they cared for and on themselves, allowing them to make that emotional connection that they would typically withdraw from during a real procedure. It was seen that with the addition of the simulations, empathy levels improved since students were able to process what they went through and gain closure, something they typically

do not get to experience when working in a fast-paced environment such as a hospital. The students were also able to gain more insight as they were allowed to observe how the students handled the consultations and their own emotions, with the study finding that students became encouraged to reach out and understand the feelings of the patients. Since this paper used undergraduate students, they hope that the consultations and impacts will allow for the students to maintain that increased level of empathy as they continue to interact with patients and handle more traumatic cases going forward.

Another effort to combat the loss of empathy is seen with the Aging Awareness Activity, while aimed to improve empathy towards the geriatric population, it also helps with increasing patient care quality over all and in educating future healthcare workers (Block, 2021). This activity targets students still in medical school, where they take an initial empathy test, followed by the activity that puts them through simulations close to what geriatric patients experience, such as impaired movements and loss of hearing. Following these simulations, the students were asked to take the empathy test again and it was found that levels significantly improved. The researcher concluded that simulations like these allow for medical students and medical residents to have a heightened awareness of those they are taking care of and have more knowledge of the struggles they endure. They hope that similar activities can be implemented that are not just focused on improving geriatric care that can improve empathy levels for all those that healthcare workers will deal with over the course of their career (Block, 2021).

Overall, research conducted has found that empathy plays a big role in the line of healthcare, helping to build physician-patient relationships and ensuring that work can go smoother when the patient feels that they are being heard and understood. The loss of empathy while at medical school and the continuation of the decline throughout residency and clinical

studies is a prevalent issue that many students have taken notice of. This is an important topic to focus on as loss of empathy can lead to more cynical viewpoints and less care spent on a patient. As more studies are conducted and universities get involved, progress is being made to ensure that medical students can stay professional and neutral while also maintaining their empathy levels and connecting with their patients.

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