

**73rd international meeting 30th July – 5th August 2023
– Autumn letter 2023 –**

Dear friends of Medicine of the Person

Greetings from Berlin, where I am starting to write this letter following a very interesting and thought-provoking meeting at Neudietendorf in Germany on the theme; **“Healthcare challenge – can we reconcile what patients expect of us with what we are able to deliver?”**

Gerda Dietze supported by her husband Holm organized 3 days of sight-seeing in Thuringia prior to the conference. We took the historical tram round Erfurt, wandered round Weimar finishing with coffee and cake at Albert Schweitzer’s house and at Arnstadt we were treated to an organ recital in the very church where JS Bach was choir master – for me the highlight of the three days. On the first evening we were introduced to the history of the Moravian Brethren or Unitas Fratrum who founded the Christian community at Neudietendorf in 1786 – they were formed of exiles who fled from Bohemia to Saxony to escape the Counter-Reformation.



This year 37 of us met to listen to talks and chat in small groups – with people having come from Germany, the Czech republic, Switzerland, France, Holland and England. As in previous years it was a chance to catch up with old friends and to make new ones.

Jakub Formanek, hospital chaplain and psychotherapist started with a study based on the life of Jacob. He drew parallels between Jacob’s encounters and struggles with God and with his brother and the surrender and acceptance which must in the end come when we stop trying to bring healing and instead help patients to accept they are dying. He spoke movingly of one young patient he had played chess with as he was dying of sarcoma.

Penny Campling, psychiatrist and psychotherapist then shared with us her role during covid of supporting doctors who were struggling because they did not have the resources to treat the patients as they wanted to. Like Jakub, she shared with us her memories of one particular patient who she had tried to help and who ended up committing suicide – and her profound regret that their care had been fragmented and inadequate prior to her meeting them. She spoke of the importance of practising intelligent kindness in healthcare as a way of dealing with a system that forces clinicians to tolerate working conditions that leave them frustrated and angry. Like Paul Tournier who founded these annual meetings, our focus must be on the person coming to see us, mind, body and spirit and, in Penny’s words, providing ‘a therapy experience of being seen as a unique and whole person’.



Oliver Dodt, psychiatrist spoke of his work at the Dignity Centre (Würdezentrum) in Frankfurt developing ideas for reducing rates of suicide amongst the old and the sick and training people in mental health first aid. In the main he was optimistic that many people can be helped by available services but he recalled particular cases he had been involved in where it was difficult or impossible to help the patient, including one who came to him asking him, the doctor to decide if he should leave his wife for his mistress (Dr Dodt refused to make the decision for him!). On a more serious note, he spoke of patients who ask for help to commit suicide. In Germany the market for this service is completely unregulated and clearly it poses lots of ethical questions. His challenge to us at the end of the talk was to find those people who we don't see, because they don't expect anyone to help and therefore don't seek help. How do we find them in order to help them?



On Friday morning, *Rutger Meijer* challenged us to live a 'prophetic and contemplative lifestyle, one capable of deep enjoyment free of the obsession with consumption' according to the papal encyclical 'Laudato si'. This would entail having regard for the whole world, including effects on climate change and the poorest in the world.

Professor *Jan Bonhoeffer* introduced us to his foundation set up to develop Heart based Medicine and do research into how treating patients lovingly can improve healing and produce measurable physiological changes. Introducing love into our professional lives will impact not only the way we treat our patients, but also our relationship with our colleagues and how we allow ourselves time to recover after traumatic events or conflict and how we are mindful of the present and access our own inner heart-based resources for healing and recovery.



Sadly *Anne-Lyse Chabert*, research fellow in philosophy who has a serious chronic disease was unable to be with us in person but she had prepared a thoughtful and challenging talk on how the relationship between therapist and patient is critical to successful treatment. The relationship must be a partnership where both parties are vulnerable and both bring their own knowledge to create a therapeutic path that the patient can engage with, own and develop. 'The aim of the doctor...is to do themselves out of a job.' Claude Robin was able to go and interview Anne-Lyse and Claude and Etienne reproduced the interview for us which gave us further insight into the topic.

On Saturday morning, *Frédéric von Orelli*, a specialist in pain medicine, spoke about the search for God, in the universe as astrophysicists see it, and in the Bible at the beginning of the Gospel of John. If during the big bang pure energy became matter, "information creating harmony" must have created the laws for it. Is it the "Word", the light, the love in the relationship, in Jesus Christ, who embodied love, relationship and consciousness? We have the choice whether or not to accept this love, this mutual sharing through dialogue, which is the basis of the "Médecine de la Personne." He

concluded by talking about how, since the death of his wife Ruth, he has felt the presence of God in his life more clearly than ever in the love of his children and grandchildren and of his friends.



Our final talk was given by Dr *Daniel Suk*, specialist in palliative care and anaesthesia whose talk was built around quotes from the works of William Shakespeare and John Donne. He spent many years keeping people alive regardless of the effort and cost. As palliative care started to appear in the Czech republic he came to realise that it is very important to listen to what patients want, to listen to what is important to them. He illustrated his talk with personal memories of patients he had been involved with where it was not always clear initially what the patient really wanted. We were again challenged to listen better, to ask patients the right questions, to understand why patients react the way they do and allow them to choose the right path for them.

Interspersed with these talks were opportunities to talk in our small groups – confidential discussions, an opportunity to touch on the topics which had troubled or moved us the most, an opportunity to make new friends and develop old friendships based on honest, heart-felt discussions in a trustful, confidential environment. Each discussion will have been based on the talks we heard and each will have been different, meaningful to those present, personal and in some cases resulting in new ways of seeing and treating our patients.

I am very grateful to those who spoke to us and to those who translated the talks so they were available in the three languages of the conference. My thanks also to Gerda and Holm for hosting us this year.

Next year it is the turn of England to host the meeting and our topic will be:
"Continuity of care', is it a thing of the past?"

More information about the tourism programme and our speakers will appear on the website in the Spring and I very much hope you will be able to join us at King's Park, just outside **Northampton, in England from August 4th to 10th 2024.**



I wish you a good year until then and send you my kind regards,

Kathy Webb- Peploe