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Medical Rationalizations and Comprehension

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Tesser C, Luz M. Racionalidades médicas e integralidade. [Medical Rationalizations and Comprehension]. *Ciência & Saúde Coletiva* (Rio de Janeiro, Brasil) 2008 enero-febrero; 13(1):195-206.

Objectives: Discuss aspects of the "comprehensiveness", a principle policy of the Brazilian Single Health System (SUS), after investigations organized around the category "medical rationality" and the epistemology of Ludwik Fleck.

Methodology: Analytical Interpretation

Results: The authors begin by defining the concepts of integrity and medical rationality. The first is seen as an attribute when used in the context specialized health, which integrates many dimensions of suffering and patient life (both from the standpoint of the patients and the expertise that guides the therapist or doctor). In terms of medical rationality, "integrity" refers to structured and integrated sets of practices and knowledge, ranging from complex medical systems (such as biomedicine and traditional Chinese medicine), to therapies and diagnostic methods such as Bach flowers or iridology.

The authors highlight how "comprehensiveness" has different meanings for patients and for physicians. For patients, comprehensiveness is something that they do not seem to be worried about. They are more concerned with curing their disease and it is a symbolic value: the "promise of a cure," in which case they accept in non critic way both the explanation and therapy addresses toward the hailing of their suffering. As for doctors, comprehensiveness is a permanent goal, but not always achievable. The authors emphasize that comprehensiveness is an epistemological problem for biomedical rationality because their skills are increasingly fragmented, specialized and focused on battling and controlling disease, a problem for the SUS, which holds comprehensiveness as a guiding principle. Contrary to the biomedical model, the Chinese and homeopathic medical rationalities address the health problems from an integrated perspective, focusing on the patient's individuality and their relationship with their environment.

Conclusions: According to the authors, a "Copernican" revolution in biomedicine is needed to make disease, its risks, its treatments and their respective specialists orbit around the patient and not vice versa, which is happening now.