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Geriatric Medicine Education Draws International Interest

As Americans continue to live longer, the growing field of geriatric medicine will be critically important. While the projected need for geriatricians is rising along with the average life expectancy in the United States, there is currently a shortage of physicians with the skills and expertise necessary to provide optimal care for older adults.

This dilemma is far more serious in many countries around the world where the network of ongoing care for the elderly falls short of meeting their needs. As one example, the Medical Society of Portugal has yet to recognize geriatric medicine as an official specialty or subspecialty. According to the European Union Geriatric Medicine Society, there are no geriatric specialists in Portugal, nor are there inpatient geriatric units.

In an effort to encourage the growth and awareness of geriatric medicine – both here and around the world – the Division of Geriatric Medicine and Aging at NewYork-Presbyterian/Columbia University Medical Center, under **Evelyn C. Granieri, MD, MPH, MEd**, Chief, serves as the sponsor of a month-long rotation in geriatric medicine for



NewYork-Presbyterian is helping to develop geriatric medicine programs in Portugal and other countries.

clinicians and trainees from other institutions. “The Division of Geriatric Medicine is deeply committed to education,” says Dr. Granieri. “Part of our mission is to define and implement innovative modes of teaching and learning geriatric medicine, particularly where it is most needed. To that end, each year we provide the opportunity for clinicians from other countries to train with us. We offer a

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Promoting the Practice of Humanism in Medicine

“The programs of the Liz Claiborne Center for Humanism in Medicine have been designed to encourage engagement with the humanities and the arts as creative vehicles for enhancing our consciousness of the patient’s experience.”

— Dr. Randi R. Diamond

Exploring the connections that unite human beings and understanding the world beyond objective science as an integral part of the physician-patient relationship underscore the mission of the Liz Claiborne Center for Humanism in Medicine at NewYork-Presbyterian/Weill Cornell Medical Center. Through educational programming for health care professionals and trainees in multiple disciplines, the Center enhances and integrates the awareness, attitudes, knowledge, and skills of the

principles of palliative care and promotes the practice of medical humanism throughout the institution.

The Center was founded in 2011 with funding from the Liz Claiborne and Art Ortenberg Foundation under the direction of **Randi R. Diamond, MD**, a physician specializing in palliative medicine and geriatrics in the Division of Geriatric and Palliative Medicine. “We started with the idea of developing educational programs for health care professionals and trainees that focus on the human experience of

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Dr. Ana Maria and Dr. Carla Ramos

generalist approach that gives these physicians the broadest exposure to all facets of geriatric medicine, working both in the community and hospital setting.”

This past summer, the Division welcomed **Carla Ramos, MD**, and **Ana Maria, MD**, both third-year residents in family medicine in Lisbon, Portugal. Dr. Ramos always dreamed of being a doctor. “While at Lisbon Medical University I realized that family medicine was my passion,” she says. “Family medicine is also the basis of the health system in Portugal. We see every age and every kind of disease. We also promote health care, happiness, and quality of life. We get to know all of the families and are able to put all of these things together, seeing each individual in the context of the family.”

Dr. Ramos and Dr. Maria manage family planning, pediatric care, and gynecology/obstetrics, among other areas of medicine. “We care for men, women, and children. And actually most of our patients are elderly,” she says. “There are 10 million inhabitants in Portugal and some 20 percent are over the age of 65.”

“One of our responsibilities is to make sure that we help others to develop programs in geriatric medicine so that there is continuity and training and that we pass on seminal aspects of really good, sensitive, and thoughtful care of older adults.”

— Dr. Evelyn C. Granieri

Learning a More Focused Approach in Geriatric Medicine

In Portugal, internal medicine physicians care for inpatients; family medicine practitioners follow patients on an outpatient basis. Believing that they were missing an important piece of their education, Dr. Ramos and Dr. Maria, who both work in the same health care unit, applied to the Columbia program. “We asked to come here to learn to care for the elderly,” says Dr. Ramos. “We feel that we lacked knowledge. We do everything, but we were looking for a program to teach us about how to take a more focused approach to geriatric medicine.”

Their training included experiences at Columbia, NewYork-Presbyterian/The Allen Hospital and its outpatient clinic, and The Hebrew Home at Riverdale. “What I’ve learned the most is the excellent coordination of care,” says Dr. Ramos. “I’ve also learned a lot about your palliative care system; it is much more developed than in our country.”

“In Portugal we have private and public nursing homes,” says Dr. Ramos. “I feel our public facilities are not as developed as the ones in America. Here you have doctors and nurses available at all times and more activities.”

Dr. Maria shares the same enthusiasm as her colleague for family medicine. “It is our vocation,” she says. “Managing the diversity of care across all ages and establishing the human connection is really what drives this field.”

The scope of their practice is broad with each doctor following nearly 2,000 patients. “Primary care physicians also coordinate secondary level of care,” says Dr. Maria. “We can refer patients to a cardiologist or oncologist, for example. Patients are followed by us, but they are transferred to the secondary level for consultation as necessary. We communicate directly with those specialists about our patients.”

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— Dr. Carla Ramos

Putting New Knowledge into Practice

Both doctors agree that a geriatrics division is sorely absent in Portugal. “The focus needs to be on the elderly,” says Dr. Maria. “What we intend to do on our return to Portugal is to hold educational courses for our colleagues so that we can create a special interest group in geriatrics.”

To that end, Dr. Granieri is developing a 30-hour program entitled “Elderly Health,” which she will teach over the course of two weeks in Portugal this spring. “The residents who come here are really quite intuitive and eager to learn. Drs. Maria and Ramos, as well as all of the residents who have come here to train, are major advocates for improving access to geriatric medicine and educating their colleagues,” says Dr. Granieri, who will gear the course to geriatric medicine for family medicine practitioners. “I’m helping to design the curriculum, do the initial teaching, and then train the trainers.”

While residents in America receive a full block of training in geriatric medicine, Dr. Granieri still believes that starting in Portugal with this course will allow the program to grow, develop, and to be responsive to the particular needs of the Portuguese culture.

In the last several years, Dr. Granieri has conducted similar international teaching programs, including developing a fellowship curriculum in geriatric medicine at the American University of Beirut and the National Taiwan University in Taipei. She has also taught at the Open Austria Institute and the University of the Witwatersrand in Johannesburg, South Africa.

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Promoting the Practice of Humanism in Medicine (continued from page 1)



Dr. Randi R. Diamond

our patients with their illnesses and with aging, as well as the human experience that we have as caregivers for our patients,” says Dr. Diamond. “Because so much of what we do in medicine is about measurable outcomes, the story of the patient sometimes gets lost. Our medical system doesn’t always encourage us to uncover or relay those stories. The Center’s programs have been designed to encourage engagement with the humanities

and the arts as creative vehicles for enhancing our consciousness of the patient’s experience. They also serve as a means for fostering communication skills that we value very highly in geriatric and palliative medicine.”

Engagement through the Arts

The Center offers a number of educational opportunities, including Foundations in Reflective Medicine, a longitudinal elective for third-year medical students who are having their first clinical experiences. “This course engages students through the use of literature and writing in psychosocial, ethical, and interpersonal issues that are pertinent in the clinical environment,” says Dr. Diamond, who co-leads the program with Susan C. Ball, MD, MPH, MS, Center for Special Studies at Weill Cornell.

“We hope that by providing forums that encourage imagination and developing communication skills that we can inspire our health care professionals to continue to embrace their humanism.”

— Dr. Randi R. Diamond

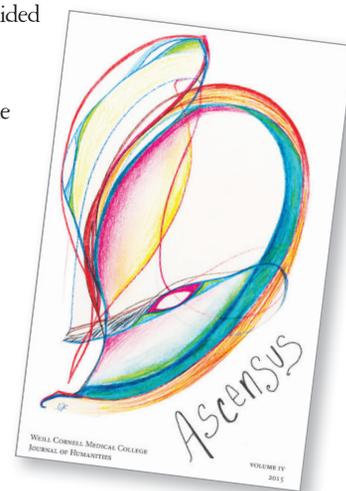
“Every physician deals with interactions with patients and colleagues and some of the issues that we talk about may not be what is traditionally discussed in a medical curriculum,” says Dr. Diamond. “Things like truth-telling, or when physicians make mistakes, or encountering bias and discrimination, or what goes into making choices – whether those are choices we make as physicians or our patients and families make about medical decisions.

“We have a different way of approaching those issues; we may read poetry, or we may have the students do some reflective writing and share it with the group,” says Dr. Diamond. “It is an enlightening experience. Students find that this is a way of engaging with some of these issues in a productive and thoughtful way, sometimes

having unexpected realizations as they discuss their experiences with their colleagues, a way that they can take with them for future use.” The course continues to grow, and Dr. Diamond hopes to expand the number from 12 to 14 students to 50 in the coming year.

The Center has also supported and guided the initiation of *Ascensus*, a humanities journal now in its fourth edition that is open to the entire Weill Cornell Medicine community. Students, residents, and faculty can reflect on their experiences in medicine with works of art, poetry, photography, and other avenues of creativity. “*Ascensus* – which in Latin means ‘rise’ – allows them to engage with their humanity in a language that is other than what we might call medicalesse,” says Dr. Diamond.

“*Ascensus* is a celebration of the extraordinary creativity of our medical trainees and a vehicle for revelation, a search for truth and meaning in medicine, and an important approach to understand the art of healing,” says Ronald D. Adelman, MD, Co-Chief, Division of Geriatrics and Palliative Medicine.



A Forum for Developing Communication Skills

Dr. Diamond stresses the importance of physicians honing their communications skills, particularly when caring for patients and families at such a tenuous and sensitive time of life. “Those communication skills are obviously very important,” she says. “In addition to the palliative care education unit that our Division runs for the Medicine residents where we emphasize skills for talking with patients about serious illness, goals of care, and death, we also have a palliative care resident champion group that gets together periodically to embrace the opportunity for reflective discussion on topics and ideas in the world of end-of-life issues and experiences.”

Among other opportunities offered by the Center is an interdisciplinary case conference of teams from around the Hospital who come together to discuss how their interactions with patients and with each other influence their practice of medicine. The Center also hosts Medical Humanities Rounds during which authors, poets, and artists are invited to present their work as it relates to medicine.

“One of the things that the Center has done is to bring people together – people in our medical community who are looking for a place to reflect and people who are also trying to use the arts and humanities to support and enhance our communication skills and professionalism,” says Dr. Diamond. “We have so many new people coming into our community every year. We hope that by providing forums that encourage imagination and developing communication skills that we can inspire our health care professionals to continue to embrace their humanism, to polish their abilities, to listen to the voice of the patient, and to value the opportunity that we all have to learn from our patients about who they are as people.”

For More Information

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— Dr. Ana Maria

“Some of the greatest impact we can have is on a more global level,” says Dr. Granieri. “These countries are less technologically inclined or have fewer resources to invest in high-tech, high-cost equipment. They are looking at real social, community, and population-based programs to help.”

As Dr. Maria explains, there are some specialty interest groups, such as in respiratory medicine. “However, there is no geriatrics

interest group and we think it is important to begin that,” she says. “We know that in a couple of years geriatrics will be a new specialty in Portuguese medicine, along with emergency medicine and others. We want to teach our colleagues to be prepared, to learn more, and to build new programs for the elderly.”

“Dr. Granieri has been very kind to us during our stay here – always open and available,” adds Dr. Ramos. “We want to thank Dr. Granieri and the Columbia geriatrics program for receiving us. The information we have learned will not only help our clinical practice, but also help us to grow as persons.”

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