

Haikus of General Practitioners: A 10-Chapter Pedagogical Tool.

Chapter 3. Continuity of Care

Jose Luis Turabian

Specialist in Family and Community Medicine Independent Researcher/Retired.

***Corresponding Author:** Jose Luis Turabian, Formerly of the Health Center Santa Maria de Benquerencia. Regional Health Service of Castilla la Mancha (SESCAM), Toledo, Spain.

Received Date: June 22, 2026; **Accepted Date:** July 03, 2026; **Published Date:** July 10, 2026

Citation: Jose L. Turabian, (2026), Haikus of General Practitioners: A 10-Chapter Pedagogical Tool. Chapter 3. Continuity of Care, *J. Biomedical Research and Clinical Reviews*, 12(4); DOI:10.31579/2690-4861/255

Copyright: © 2026, Jose Luis Turabian. This is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.

Abstract

The value of family medicine/general medicine lies in its distinctiveness from academic medicine. It replaced categories with process and relationships. In its scientific method, emotional experience plays an important role. General medicine is unique in the medical field because it transcends the mind-body duality. Therefore, general practitioners should be encouraged to use a non-conventional approach when addressing the problems that arise in the consultation. Fostering reflective practice is an integral part of continuing professional development and training in general practice. Poetry is a method of reflection that can allow physicians to reflect on concepts and experiences. Haiku is a form of traditional Japanese poetry. It consists of a short poem, generally composed of three lines of five, seven, and five syllables, respectively (although this meter is flexible, and in English, syllable count is based strictly on pronunciation, not spelling). It is unrhymed and aims to express, in just three lines, a brief and sincere feeling, usually arising from the contemplation of nature or from feelings about love, death, illness, pain, or any lived experience. Using haikus in medical education is an excellent resource for activating critical thinking and humanizing medicine. In the end, medicine and poetry share the same thing: the art of observing and listening attentively. In this article, an illustrative case is presented that gives rise to six haikus to reflect on the basic concept of family medicine of "Continuity of Care."

Key words: poetry; continuity of care; metaphor; general practice; emotions; knowledge

Introduction

General/family medicine is unique in the medical field because it transcends the mind-body duality. Therefore, general practitioners should be encouraged to use unconventional ways of acquiring knowledge. Poetry can be a source of knowledge by providing us with perspectives on reality, and in this sense, it can also have a cognitive impact on us and our understanding of the world. Science and poetry have more in common than most people realize. Both rely on metaphor, which is as crucial to scientific discovery as it is to lyrical description [1-3].

Haikus is a traditional Japanese form of poetry. Using haikus in medical education is an excellent resource for activating reflection on concepts and experiences, critical and ethical thinking, creative abilities, and the humanization of medicine. Because they are such short texts, they require students to fill in the gaps with their own clinical judgment. For students heavily focused on linear, detail-oriented facts haikus act as an outlet to stimulate creativity and process feelings encourage to identify the most salient features of difficult topics (such as the fundamental concepts of general medicine) and pair them with supporting scientific evidence; It is a beautiful project to use haiku writing to help students process the emotional weight of clinical care, explore practical challenges, and

articulate the essence of health and illness [4-9]. In this article, 6 haikus are used to reflect on "Continuity of Care", a basic concept of family medicine.

Clinical Case

Helen, 42, comes to your office complaining of nonspecific chest pain and palpitations that have lasted three days. She has no cardiovascular risk factors, and her physical examination and electrocardiogram are completely normal. You've been her primary care physician for eight years. Reviewing her medical history and looking into her eyes, you vividly recall that Helen experienced an identical episode four years ago, just three months before her divorce. When you ask her directly, "Helen, the last time your chest hurt like this, things were very turbulent at home... how are things now?", Helen bursts into tears. She confides that her teenage son has just been arrested for vandalism and she hasn't slept all week. Had Helen gone to a hospital emergency department or a general practitioner who did not know her, the strict chest pain protocol would have involved serial troponin tests, a chest x-ray and probably a cardiology consultation, making her distress chronic and medicalizing a problem reactive

Haukus For Thought

The exact same path, the changing seasons roll by, the witness stands firm.
Year after long year, I know your familiar gaze, no more tests are due.
Weaving time itself, being memory that heals other people's lives. I was
here just yesterday, today I walk through the grief, tomorrow I wait.

A thin thread of gold, connecting all the winters of your history. The exact
same soul, from hospital to the block, bridge without a crack.

Pedagogical Key

Longitudinality (knowing the patient over the years) acts as a first-rate diagnostic and therapeutic tool. It allows acute symptoms to be contextualized within a known medical history, avoiding unnecessary diagnostic cascades, reducing iatrogenic effects, and strengthening a therapeutic transfer.

Discussion Questions

How does a physician's "prior knowledge" influence the efficiency of the healthcare system and patient safety (quaternary prevention)? If current medicine tends towards on-demand care provided by rotating medical professionals or through impersonal telemedicine, what intangible values of haiku ("being memory that heals") are being lost, and what impact does this have on public health?

Concept of Longitudinality and Continuity of Care

Continuity of care, perhaps over many years, understood as the patient's repeated consultations with a general practitioner, establishing a therapeutic relationship, is considered a defining characteristic of family medicine. Continuity of care is a concept associated with the doctor-patient relationship. There is overwhelming evidence of its usefulness: it decreases patient mortality, improves clinical outcomes and reduces hospital admissions [10-19].

References

1. Harvey K., (2023), The Power of Poetry: Editorial to accompany: Capturing grief in older people through research poetry. *Age Ageing*. 52(1): afac281.
2. Padel R., (2011), The science of poetry, the poetry of science. *The Guardian*.
3. Turabian JL., (2021), The doctor as a poet. *Hist Philos Med*. 4(1):3.
4. Anthony ML., (1998), Nursing students and Haiku. *Nurse Educ*. 23(3):14-16.
5. Biley FC, Champney-Smith J., (2003), "Attempting to say something without saying it ...": writing haiku in health care education. *Med Humanit*. 29(1):39-42.
6. Pollack AE, Korol DL., (2013), The use of haiku to convey complex concepts in neuroscience. *J Undergrad Neurosci Educ*. 15;12(1): A42-48.
7. Huang C-D, Novita Asdary R, Septi Mauludina Y, Huang Y, Monrouxe L., (2025), The influence of narrative medicine on medical students' readiness for holistic care practice: A realist synthesis. *Medical Education*. 60(3): 230-246.
8. Bethany W, Macgregor K, Cooper M, Sornalingam S, Okorie M., (2022), Can Poetry Help GPs and GP Trainees to Develop Their Reflective Practice? *InnovAiT*. 15(6): 323-329.
9. Takemoto EK, Lee YJ., (2024), Shakuhachi and Haiku Reflection: Their Role in Enhancing Health for Older Adults. *Hawaii J Health Soc Welf*. 83(9):257-259.
10. White ES, Gray DP, Langley P, Evans PH (2016) Fifty years of longitudinal continuity in general practice: a retrospective observational study. *Fam Pract* 33(2): 148-153.
11. Stokes T, Tarrant C, Mainous III AG, Schers H, Freeman G, Baker R., (2005), Continuity of Care: Is the Personal Doctor Still Important? A Survey of General Practitioners and Family Physicians in England and Wales, the United States, and the Netherlands. *Ann Fam Med*. 3(4): 353-359.
12. Hill AP, Freeman GK., (2011), Continuity of care. Promoting Continuity of Care in General Practice. RCGP Policy Paper. The Royal College of General Practitioners.
13. Richards H., (2009), We must defend personal continuity in primary care. *BMJ*. 339: b3923.
14. Barker I, Steventon A, Deeny SR., (2017), Association between continuity of care in general practice and hospital admissions for ambulatory care sensitive conditions: cross sectional study of routinely collected, person level data. *BMJ*. 356: j84.
15. Hjortdahl P., (1992), Continuity of care: general practitioners' knowledge about, and sense of responsibility toward their patients. *Fam Pract*. 9(1):3-8.
16. Turabian JL., (2020), Epidemiological Value of Continuity of Care in General Medicine (Part one of Two). *Epidemiol Int J* 4(1): 000135.
17. Turabian JL., (2020), Epidemiological Value of Continuity of Care in General Medicine (Part Two). *Epidemiol Int J* 4(1): 000138.
18. Turabian JL., (2017), Stories Notebook about the Fundamental Concepts in Family Medicine: Continuity, The Fable of The River with Meanders. *J Gen Pract (Los Angel)*. 5:285.
19. Turabian JL., (2026), Continuity of Care Versus Episodic Care. *Clinical Trials and Clinical Research*. 5(1).



This work is licensed under Creative Commons Attribution 4.0 License

To Submit Your Article, Click Here:

Submit Manuscript

DOI:[10.31579/2692-9406/255](https://doi.org/10.31579/2692-9406/255)

Ready to submit your research? Choose Auctores and benefit from:

- fast, convenient online submission
- rigorous peer review by experienced research in your field
- rapid publication on acceptance
- authors retain copyrights
- unique DOI for all articles
- immediate, unrestricted online access

At Auctores, research is always in progress.

Learn more <https://www.auctoresonline.com/journals/biomedical-research-and-clinical-reviews>