AUCTORES
Globalize your Research

Biomedical Research and Clinical Reviews

Jose Luis Turabian*

Open Access

Short Communication

Haikus of General Practitioners: A 10-Chapter Pedagogical Tool. Chapter 8. Patient-Centered Medicine

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 08, 2026; **Published Date:** July 17, 2026

Citation: Jose L. Turabian, (2026), Haikus of General Practitioners: A 10-Chapter Pedagogical Tool. Chapter 8. Patient-Centered Medicine, *J. Biomedical Research and Clinical Reviews*, 12(4); **DOI:10.31579/2690-4861/260**

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 "Patient-Centered Medicine."

Key words: poetry; patient-centered medicine; 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 haykus are used to reflect on “Patient-Centered Medicine”, a basic concept of family medicine.

Clinical Case

A 78-year-old patient with early-stage colon cancer refuses the surgery and subsequent chemotherapy strongly recommended by her oncologist. Her absolute priority is not prolonging her life at any cost, even if it means months of hospitalization, but spending her remaining time at home, tending to her plants and free from pain.

Haukus For Thought

Every single seed requires a very specific, particular care.

There are no guidelines that surpass your individual, personal desires.

You are the main text, the entire medical book is just the index.

You are the center, your values will always guide our prescription.

One unique features, eclipsing the old theories of the academy.

You are the focus, not the book or the hard science, your voice is my

guide.

Pedagogical Key

The paradigm shift. Scientific knowledge must adapt to the patient's preferences, fears, and expectations, not the other way around.

Discussion Questions

When a patient's values and expectations clash head-on with "scientific evidence" or the doctor's judgment, whose decision is final? How are informed consent and the principle of autonomy managed?

Concept Of Patient-Centered Medicine

Patient-centered medicine is a healthcare model that integrates clinical disease diagnosis with the patient's unique personal experiences, values, and psychosocial needs. It redefines the doctor-patient relationship into an active partnership, ensuring that the patient's preferences dictate all clinical decisions. Patient-centered medicine considers the patient's perspective and interests to be as important as those of the physician. For Patient-Centered Medicine, it is essential to know the patient. In Family Medicine/General Medicine, the patient is at the center of the problem, not the analytical data or the result of an additional test. The crucial element for the family physician's diagnosis and treatment is to identify the patient's experience, consider the person holistically, and treat the patient with the awareness that they are a product of social and physical contexts [10-16].

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. 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. Richards T, Coulter A, Wicks P., (2015), Time to deliver patient centred care BMJ 350: h530.
11. Ford S., (2004), Patient-centered Medicine, Transforming the Clinical Method (2nd edition). Health Expect. 7(2):181-182.
12. Bardes CL., (2012), Defining "patient-centered medicine". N Engl J Med. 366(9):782-783.
13. Wang YY., (2005), Patient-centered medicine: transforming the clinical method. Second edition. Int J Integr Care. 5: e20.
14. Perales A., (2016), [Person-centered medicine]. Rev Peru Med Exp Salud Publica. 33(4):605-606.
15. Meland E, Schei E, Baerheim A., (2000), [Patient centered medicine--a review with emphasis on the background and documentation]. Tidsskr Nor Laegeforen. 120(19):2253-2256.
16. Turabian JL., (2018), Patient-centered care and biopsychosocial model. Trends Gen Pract. 1.
17. Turabian JL., (2018), Some Basic Concepts of Family Medicine Explained by Means of Fables (Part 2 of 2): Patient-Centered Interview, Biopsicosocial Model, Actors and Resources/Strengths of the Patients, and Concept of Health and Disease. Archives of Community and Family Medicine. 1(1): 10-18.

DOI:10.31579/2692-9406/260