This essay deals with the place of the humanities in medicine, past, present, and future. They are considered here to encompass not only the major disciplines of history, languages, literature, and philosophy, but also those disciplines not included in the natural or social sciences that express human values and the spirit of humankind. My general thesis is that the humanities have always had a place in medicine, and that they will play an increasingly important, necessary, and specific role as medicine evolves beyond its present romance with technology toward a more balanced view of the origin and treatment of illness.

To support this argument, I am going to discuss the classic view of the place of the humanities in medicine, describe existing programs in medical schools, examine what the humanities have to offer medicine, and then consider the obstacles to continued or increased participation by the humanities. Finally, I am going to discuss a shift that is occurring in medicine toward a primary concern for sick persons, instead of disease alone, and show how the humanities can support and advance this trend. Here, I shall argue that medicine has demands to make of the humanities that may exceed what humanists presently have the desire or knowledge to offer. Thus, in the process of meeting the changing needs of medicine, the humanities' view of their own nature and function may change.

This discussion is based on certain assumptions about medicine. The first is that medicine is about the care of the sick; everything else is secondary to this goal. The second is that doctors treat patients, not diseases, and as a corollary, that all medical care flows through the relationship between doctor and patient. My final assumption is that, for doctors, the body has primacy.

I believe the changes in medicine that are occurring today are part of a larger social upheaval that has been underway for more than twenty years. This social movement includes an increasing stress on what might be called personalized (even egocentric) indi-
vidualism—more intense than the political individualism of our past—and is marked by a turning away from science and technology—even, on occasion, from reason itself (Olan, 1977, Doi, 1981). Among the effects on medicine of this rejection of Western scientific thinking have been an affinity for the “natural,” and the embrace of a vast array of “alternate” therapies, from acupuncture to Zen, in place of scientific medicine. But with time it will become apparent again that science and technology are not the enemies; and there will be a more widespread understanding that “reason” is not inherently atomistic or reductionist, nor science the enemy of persons. Then the search for the solutions to the problems faced by medicine, as it turns toward new definitions of its role, will inevitably involve the development of new and exciting intellectual tools. I believe that in the coming decades the humanities will find themselves increasingly engaged in this leading edge of medical progress.