

Modern trends in philosophy of medicine

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Abstract: The paper deals with the issues of the place and significance of philosophy in medicine as a methodological basis for scientific knowledge, the art of rational assumption, the relationship between philosophy and medicine, the unification of philosophical and medical knowledge, and the need to overcome professional limitations with a focus on the socio-philosophical understanding of their medical practice.

Keywords: medicine, doctor, philosophy, philosophy of medicine, philosophical analysis

Modern medicine is an example of a combination of natural science and humanities knowledge. Even M.Foucault defined a person in medicine as “the physics and chemistry of the body,” we can add “and the biology of the body,” but still, let’s not forget about the soul, some diseases manifest themselves in the form of mental illnesses, which are dealt with by psychiatry and clinical psychology. The social and cultural aspects of human existence as a bearer of health and illness as modes of his existence are the subject of research in other humanities - philosophy, sociology, jurisprudence, etc. All these sciences contribute to the formation of medical knowledge as an integral and interdisciplinary knowledge. The question arises: how is it possible to achieve truth within the framework of modern interdisciplinary integral knowledge, which is medicine, because natural scientific ideas about true knowledge differ from the humanitarian approach to truth.

In the situation of modern problems, the epistemological dilemma “philosophers or doctors?” takes on a new perspective: not instead, but together. After all, the main thing in such an interdisciplinary discourse is to grasp the dialectically contradictory, dramatic relationship between the time factor and the subjectivity factor in clinical activity. Hence the need to develop a concept of interaction between disease diagnosis and systemic monitoring of the treatment process that meets the realities of the information era as specific processes of optimal combination based on the principle of synergy between promptly obtained and objective laboratory and hardware data with the knowledge and professional intuition of a doctor. It is this real dilemma of time and truth, when the doctor is forced to compete in the speed of decision-making and the effectiveness of his actions with the course of the

pathological process, that the new generation of diagnostic equipment is designed to facilitate. The clinician and philosopher complement each other with information and arguments, discussing the ways of development of medicine from the perspective of their sciences. Clinical medicine and philosophy combine the features of science and art, an objective analysis of the situation (the diagnostician eliminates himself in the process of cognition, without giving free rein to his emotions) and the subjective, passed through himself, through his vision of the world and the place of man in it, the interpretation of the "image » illness and personality of the patient.

Medicine almost always faces problems to which philosophy can provide answers. It is the philosophy of medicine and pharmacy that develops and improves dialectical thinking - the pinnacle of medical skills.

Philosophical culture allows physicians to overcome one-sidedness in their approach to the problems being studied in the context of increasing highly specialized scientific and practical activity. Particularly noteworthy as a problem of the medical approach to philosophy is the connection of clinical thinking with the development of the instrumental arsenal of medicine, as well as with engineering and technology. Data from anamnesis, clinic, laboratory and pharmacology are understood, evaluated, accepted or rejected in accordance with the inner world, thesaurus, attitudes, character and beliefs of the subject of knowledge. In the decision-making process, the clinician analyzes the situation based on objective data and those attitudes that form the core of his personality. It is therefore not surprising that people behave differently in similar clinical situations. It is clear from this that although symptoms are one of the main prerequisites for the truth of the diagnosis, they require correct understanding and interpretation. Therefore, diagnosis is the recognition and interpretation of real pathological processes, bringing them under a certain typology using a model formed on the basis of specific experience or on theoretical constructs that serve as a kind of "matrices of understanding." At their core, symptoms, syndromes and nosological units are elementary models, "matrices of understanding" and can be considered as natural images or models of philosophical understanding.

In the philosophy of people, both the Western technicist tradition in medicine - the path to a person through the body, and the opposite, Eastern tradition - the path to a person through the soul are taken into account (but are considered incomplete, one-sided). The problem is to find a middle ground. And yet, in their medical excursions, philosophical representatives are more often based on the fact that in humans the main share of assimilation material goes to the nervous system, and in animals - to other organs.

And here we note a significant discrepancy with medical approaches to humans, which either do not consider these issues or solve them in a probabilistic manner, out of connection with practice. This is due to the way medicine itself views a person.

The specificity of medical ideas about a person consists of the following provisions.

1. Man is the main subject of medical knowledge
2. Knowledge about a person in medicine is developed through experimental and empirical means.
3. The goal of medicine is practical activity, therefore it will require from other sciences only those data about a person that ensure the success of this activity
4. The Western tradition in medicine, in line with which training is conducted in our universities, is focused on operations with the body, moreover, with individual organs and systems
5. Each medical system has as its subject not the person as a whole, but individual parts, systems, structures.

All this leads to the fact that there is no holistic concept of man in medicine. Until recently, it was not needed, since a person can only solve those tasks that he has set for himself. This means that, having methods of influencing the body as a whole, medical disciplines did not need a holistic view of it. Therefore, medicine as a science is not holistic. In addition, each of them has not yet exhausted its capabilities. Why exactly now does medicine need a holistic concept of man?

Firstly, as a result of the technological leap, man has acquired the ability to have a global impact on the environment. Accordingly, his personal status changed. It has become a value, the existence of which largely determines the existence of the biosphere.

Secondly, as a result of the same scientific and technological progress, which, by the way, brought with it new diseases, a person is increasingly freed from the production process, he has more and more time for himself. If earlier he was exclusively engaged in obtaining a means of subsistence, now he is increasingly engaged in obtaining means of a good living. Medicine is one of these means. The need for it is growing. But not in the kind of medicine that existed before. The sick (and healthy) now needs not only a doctor who will cure him of a headache or radiculitis. He needs a doctor who will help him understand the cause and consequences of the disease, who will reveal himself to the person, being an intellectual partner.

And here these needs of a changed person come up against the fact that every narrow specialist in medicine is busy with his own field, continues to see in a person an organism, and not a personality. This happens because no medical discipline provides a holistic view of a person. But medical disciplines should not do this, otherwise their subject will disappear. Man in the mirror of medicine appears in a mosaic form. In addition, in the medical sciences, knowledge about pathology

predominates, while ideas about the norm are conditional and serve mainly as comparative material.

There is no holistic concept of a person in medicine, because there shouldn't be one. But a doctor must have a holistic understanding of a person, because his activity is based on direct contact with him. Moreover, as we noted, the modern patient demands to be treated as an integral, unique individual.

There is one more point that is extremely important in modern medical practice. The fact is that modern treatment methods are already advanced enough to affect the finest structures of the human body, interference with which threatens to change homeostasis. And since all three structural levels in a person - the body, the psyche, the personality - are closely connected, this means no less than interference in the personality. How much can a doctor afford such intervention? Can he, without imagining the person as a whole, imagine the consequences of his intervention in his body? Obviously not.

The first and second problems cannot be solved based only on medical knowledge. This is the task of philosophy. The third and fourth are the problems of medical education itself. But the last problem can only be solved through the joint efforts of philosophy and medicine.

In the philosophy of medicine, debates around the positions of reductionism and holism lead, for example, to the question of the possibility of "reducing a disease to its constituent components." Broadly speaking, reductionism is the philosophical principle that complex objects can be fully described by characteristics that describe their component parts. In other words, the properties of a whole are simply the sum of the properties of its constituent parts. Such reductionism, in contrast to epistemological reductionism, is often called metaphysical or ontological reductionism. Epistemological reductionism, on the other hand, refers to the study of complex objects and phenomena and related factors using a methodology that isolates individual components for subsequent analysis. Epistemological reductionism explains complex objects and phenomena and the factors associated with them only in terms of their individual components. Holism is a philosophical principle emanating from the qualitative originality and priority of the whole in relation to its parts and proclaiming that the properties of the whole are not reduced to the properties of its components. In ontology, holism relies on the principle: the whole is always more than the simple sum of its parts. Accordingly, its epistemological principle reads: the knowledge of the whole should precede the knowledge of its parts. The development of biomedical sciences and clinical practice is increasingly showing the leading role of the general, integral state of the body.

Medical diagnostics. In accordance with the main provisions of the theory of knowledge, medical diagnostics should be considered as a specific form of knowledge, in which at the same time its general patterns are manifested.

In a general theoretical plan, one can consider the diagnosis as a "purely recognizable-inspection", algorithmic (committed according to previously known rules) process. At the same time, the diagnosis is presented as a search within the framework of a well-known, ready, formed and, as a rule, universally recognized and already used by doctors of clinical knowledge. Supporters of this approach, in essence, understand the diagnosis in strict accordance with the literal meaning of the term: diagnosis is recognition. Recognition is reduced to the recognition of the already known, not containing any new knowledge about the object. However, when making a diagnosis, the doctor, relying on the known, at the same time learns an unknown, specifically related to a specific patient. Any disease is a complex and contradictory unity of the general, repeated and specific, unique, as well as known and unknown. "

Conclusions. Modern medicine has at its disposal huge reserves of knowledge, but it does not have a holistic fundamental knowledge of a person, there are no single binding links between various medical theories, concepts and philosophical systems of world outlook. The search for such a foundation of medicine is one of the most important tasks of philosophy. In other words, medicine gives philosophy an extensive factual material, and philosophy provides medicine with a general method of scientific and theoretical knowledge of life in general and human life in particular. In addition, this is a highly individualized field of activity, therefore the path to philosophical generalizations is long and difficult. We will try to go through it, but sequentially, in order not to make a mistake, not to go aside, not just to find out, but to understand the philosophical meaning of medicine. And you need to start - from the beginning, from the history of philosophy.

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