Second International Congress of Person-Centered Medicine

Advancing Humanistic and Interdisciplinary Health Care

November 7-9, 2014 - Buenos Aires, Argentina

Report prepared by Juan E. Mezzich and Roger Montenegro

The Second International Congress of Person Centered Medicine (PCM), organized by the International College of Person-Centered Medicine (ICPCM) in collaboration with the Argentinean Association for Mental Health (AASM) and a wide local medical academic group was held in Buenos Aires, Argentina at the Colon Hotel on November 7-9, 2014. The ICPCM emerged from the ongoing annual Geneva Conferences process and the aspiration to promote medicine of the person, for the person, by the person, and with the person. The Congress main theme was Advancing Humanistic and Interdisciplinary Health Care, and covered a wide range of topics including person- and people-centered care for circulatory, respiratory, oncological, endocrine and neuro-psychiatric conditions as well as person-centered diagnosis, shared decision-making for treatment planning, prevention and health promotion, the training, personal development and wellbeing of health professionals, the patient and family as teachers, and other aspects of relationship-based and team-approach care.

The program included key lectures, symposia, workshops, posters, and brief oral presentations. Participants were physicians of many specialties, psychologists, social workers, nurses and other health professionals as well as patient and family organizations, experienced scholars and students.

The Congress was aimed at cultivating and promoting a medicine of the whole person, a perspective that is being advanced in close collaboration with the World Health Organization, World Medical Association, International Council of Nurses, and International Alliance of Patients’ Organizations among other international health institutions, and through the publication of the International Journal of Person Centered Medicine.

Concerning Congress authorities, the Congress President was James Appleyard (UK), the Organizing Committee included Juan Mezzich (USA)(Chair), Roger Montenegro and Ariel Falcoff (Co-chairs) (Argentina), Alberto Trimboli (Argentina), Michel Botbol (France), Tesfamicael Ghebrehiwet (Canada), Joanna Groves (UK), Ihsan Salloum (USA) and Sandra Van Dulmen (The Netherlands), and the Scientific Committee was chaired by Michel Botbol (France), Ihsan Salloum (USA), Roger Montenegro (Argentina), and Ariel Falcoff (Argentina).

Opening Session

The opening session took place at the Colon Hotel on November 7th at 8.30 am. The opening ceremony was chaired by J. Appleyard, J. Mezzich, R. Montenegro, A. JM Fantin, A. Falcoff and the Board of the International College of Person Centered Medicine. Welcome words were offered by the congress authorities and an animated artistic presentation followed.
Scientific Program

Key Lectures

A special track of Key Lectures was held throughout the Congress. Their topics paid detailed attention to humanistic medical ethics, conceptualizing and measuring PCM, person-centered medical education in Latin America, person centered subjectivity and narratives, person centered integrative diagnosis, patient perspectives on PCM, multi-morbidity as an epidemic of the XXI Century, the problem of functional medical syndromes and its impact on health care, person-centered care in neuro-psychiatry, schizophrenia and person centered care, creativity and mental health, patients’ spirituality in the technological era, gastroenterology and person centered care, person centered medicine and psychiatry, gynecology and women’s health, surgery and person centered care, promoting person centered clinical practice, person centered family medicine, person- and community-centered public health, and the centrality of communication in PCM.

Additional topics of Key Lectures discussed included how to adapt research methodologies to person centered approaches, optimizing scientific consistency and topical relevance, and person-centered conceptualization applied to various medical specialties and health disciplines.

Key Symposia

Key Symposia encompassed special sessions selected on the bases of the importance of their topics and the prominence of their speakers. One of them engaged leaders of Latin American Faculties of Medicine of Argentina, Peru and Ecuador, with Person-centered Medical Education as overall theme. They identified the following as existing barriers to attaining PCM in educational programs: insufficient impact of medical ethics, insufficient emphasis on communication skills, insufficient
training on medical psychology and psychiatry, insufficient education on medical sociology and public health, and reduction in generalist medical training and too early specialization.

The importance of training current and future physicians and other health care professionals on patient-centered communication skills critical thinking, understanding the relationship between health and society, appreciating the need for life-long learning, and teamwork in theory and practice was emphasized. Also considered was the value of covering, along with biomedical sciences, the social sciences, medical ethics, humanities, and spirituality in order to apply a person-centered approach. The value of incorporating feedback and program assessment and offering educational activities where the above mentioned skills are integrated with other medical skills and with clinical practice was also pointed out.

Another crucial Key Symposium was organized by the Academies of Medicine of Argentina, Bolivia, Chile and Peru. Its topic was Ethics (a central concern of Latin American Academies) and Person-centered Medicine. It dealt with the need to humanize medicine in Latin America and engaged on anthropological considerations. The Latin American population is heterogeneous in ethnic, social and cultural elements, but shares to large extent a common history, language, and manner to perceive and approach reality. Latin American medicine, thus, emerges from a cultural matrix that is fundamentally mixed, mestiza, with native, European, African and Asian components, and that is historically and ecologically contextualized. The proceedings of this Symposium contributed prominently to the preparation of the Declaration of Buenos Aires.

The Key Symposium on Spanish Language and Person Centered Health addressed the value of the linguistic and cultural characteristics of the Spanish language for the cultivation of a psychiatry that articulating science and humanism is centered on the totality of the person. The papers presented covered innovative diagnostic systems, advances in clinical communication and psychoanalysis, and achievements in artistic and literary creativity for health promotion. These contributions are particularly based in Latin America and the Iberian Peninsula but also have attracted interest across the world.
The Symposium on Person-centered Primary Care in Rural Areas discussed basic strategies to ensure accessibility to medical and social services taking into consideration geographic, familial and cultural circumstances and the insured's real needs in accordance with pertinent legislation. Presentations were made on training programs leading to the implementation and development of a network of family physicians pertinent to attending the health needs of the covered population within the framework of person centered medicine.

Topics of other Key Symposia covered Person Centered Medicine in various Medical Specialties, Life Cycle and Person Centered Medicine, Health Stakeholders and Person Centered Care: Perspectives of Physicians, Nurses, Patients, Families, and Industry, Creativity and Person Centered Medicine, and Person-centered Care for Functional Syndromes.

**Brief Oral Presentations**

Sessions on Brief Oral Presentations covered topics such as the soulless psychopath, psycho social risks at work, person-centered therapeutic support, human factors for accident prevention, prevention and health promotion in community mental health reforms, development and violence in cities, mental health and social service for mental patients and their families, the use and frequency of new technologies associated with children's games, doctor-patient relationship: the drama of two solitudes, subjectivity and disciplinary discourse, the internet browser as a professional healer, and social inclusion in aquatic sports and therapeutic approaches.

Other topics included phono-audiological rehabilitation and quality of life with aphasia, comprehensive person-centered care at the end of life, overcoming obstacles and rebuilding the road: clinical intervention group with parents of children who are receiving cancer treatment, patient preferences in person centered medicine, how do we perceive the importance of sparing neural stem cells and neurocognitive function in brain tumors?, sexual workers: a way to generate health and system integrity, and workplace harassment: a preventive approach.

Also covered were music therapy in patients with altered states of consciousness, modalities of treatment initiation for patients using psychoactive substances, chronic non-cancer pain related to changes in the nervous system, recreating the vital stage of man: architecture and quality of life, and relational aspects of domestic violence.

**Poster Presentations**

A session of posters included presentations on a study of personality and social determinants of health in young people in conflict with the law, using acceptance and commitment therapeutic principles in web-based intervention for women with chronic widespread pain, family psycho-education for relapse prevention in day hospital patients, psychomotor interventions with young and medium age adults, linguistic and cultural adaptation in Argentina of techniques pertinent to generalized anxiety conditions.
Cultural Activities

The Congress program was enriched with several cultural and artistic activities. They included folkloric music at the Congress Opening, a commented movie on migration and conflict challenges, discussion sessions on the value of art and literature in person centered medicine, and last but not least, a high level tango show.

Closing Session

The last session of the Scientific Program recognized the strong commitment of the speakers and the audience to quite interactive participation in discussions throughout the Congress. It also pinpointed the high significance of the ICPCM International Congresses as a common ground for articulating ethics and science in building person centered medicine worldwide.

The Buenos Aires Declaration emerging from the Second International Congress of Person Centered Medicine was adopted at this closing session. It endeavored to build on Latin American humanistic and scientific traditions and the commitment of the Academies of Medicine and Faculties of Medicine of the Region towards the construction of person centered medicine through the development of a Latin American Network to promote this perspective.