**Can Emphasis on Medical Humanities Potentially Help Combat Racism in the Clinical Setting?**

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Dear Editor,

The advent of technology resulted in great advancements in medicine. Despite this, a concern has been whether scientific medicine is practiced with a humanistic approach. The study by Pitcher et al. (2022) titled: “*A Pilot Study to Understand the Role of Medical Humanities in Medical Education*” adds to our understanding over the pivotal role medical humanities have in shaping future clinicians that emphasize on prioritizing the patient and not just treating the disease [1]. Pitcher et al. (2022) provided medical students with three medical humanities courses which focused on medicine and mystery, medical nonfiction and living and dying [1]. An alternative medical humanities course could be offered to medical students to give them the opportunity to become well informed on the ethics that surround the practice of medicine, the history of medicine as well as how to confront racism in medical practice. There is ample evidence in bibliographic databases on the medical atrocities that took place in the past with a couple of books standing out for their prodigious research and amount of information they provide. Such books include the “Medical Apartheid: The Dark History of Medical Experimentation on Black Americans from Colonial Times to the Present”3 written by medical ethicist Harriet A. Washington who extensively documents the history of medical experimentation on African Americans in the United States and how they were exploited and mistreated, and “Hitler’s Black Victims”4 a book written by Clarence Lusane who discusses the historical experiences of European African, African-German, Africans and African Americans during the Nazi era [2-3]. Medical malpractices in the past were not only limited to people of African descent but other marginalized groups as well including Jews and individuals with physical and mental disabilities during the Nazi era. Such course can teach the history of medicine across the world and how specific groups of individuals were exploited and were subjected to abusive medical practices. Structural racism is one of the fundamental causes and a driver of ethnic disparities in healthcare, hence, it is imperative for medical practitioners to be familiar with the history of medicine and bioethics as such knowledge can allow them to fight their own implicit biases they may have toward their patients. Despite this, it is important to highlight that racism in the clinical setting often comes from patients. Hence, it is imperative that clinical medical students become trained on how to deal with racism in the clinical setting. Coaching medical students to engage in conversations with patients regarding race, religion, culture, gender, and sexual orientation can ultimately help medical students become more prepared and confident to engage in such conversations in the clinical setting [4]. Overall, emphasis on medical humanities should continue to be given as understanding why humanities and medicine need each other might help with appreciating better how humanities could contribute to better training of physicians.

Compliance with Ethical Standards

Funding: NA

Conflict of Interest: The author declares that she has no conflict of interest.

Ethical approval: NA

Informed Consent: NA

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