

Peer Review

Review of: "Humanity in a World Without Empathy: Medical Professionals and a Holistic View of the Human Being"

Andrzej Brodziak¹

1. Faculty of Medical Sciences, University of Applied Sciences, Nysa, Poland

Kinga Rajfur highlights the modern healthcare crisis caused by declining empathy and over-reliance on mechanistic approaches. Drawing on Hanna Chrzanowska's nursing legacy, Rajfur advocates for an integrated care model that unites scientific rigor with patients' physical, social, and spiritual needs.

A core argument is that empathy is essential for genuinely effective care but is threatened by secularization and cultural plurality — factors that can make addressing patients' spiritual or existential concerns more difficult. The article underscores a holistic viewpoint, treating body, mind, and spirit as interconnected, and references narrative medicine to illustrate how personal stories can deepen care quality.

Rajfur effectively discusses the challenges to adopting a more holistic model, including a need for cultural competence and spiritual sensitivity. She suggests further practical strategies — such as reforms in medical education, changes in healthcare policy to enable compassion and communication, and research into how empathetic models affect clinical outcomes.

By emphasizing Hanna Chrzanowska's example, Rajfur demonstrates the ongoing relevance of a person-centered approach that values empathy alongside diagnostic skill. Though the publication briefly addresses these issues, it might benefit from more detailed practical guidance and real-world evidence.

The value of the publication could be enhanced by referencing works of other authors who discuss the addressed issues. It would be possible, for instance, to indicate references like:

Bodenheimer, T., Ghorob, A., Willard-Grace, R., & Grumbach, K. (2014). The 10 Building Blocks of

High-Performing Primary Care. *Annals of Family Medicine*, 12(2), 166–171.

- Campinha-Bacote, J. (2002). The Process of Cultural Competence in the Delivery of Healthcare Services: A Model of Care. *Journal of Transcultural Nursing*, 13(3), 181–184.
- Cassell, E. J. (2004). *The Nature of Suffering and the Goals of Medicine*. Oxford University Press.
- Charon, R. (2001). *Narrative Medicine: A Model for Empathy, Reflection, Profession, and Trust*. *JAMA*, 286(15), 1897–1902.
- Kleinman, A. (1988). *The Illness Narratives: Suffering, Healing, and the Human Condition*. Basic Books.
- Pellegrino, E. D., & Thomasma, D. C. (1993). *The Virtues in Medical Practice*. Oxford University Press.
- Riess, H. (2017). The Science of Empathy. *Journal of Patient Experience*, 4(2), 74–77.
- Sulmasy, D. P. (2009). Spirituality, Religion, and Clinical Care. *Chest*, 135(6), 1634–1642.
- Watson, J. (2008). *Nursing: The Philosophy and Science of Caring* (Revised edition). University Press of Colorado.

The publication serves as a persuasive call to restore humanity to healthcare by merging scientific expertise with profound respect for each patient’s life context.

Overall, Kinga Rajfur’s short publication serves as both a timely reminder and a persuasive call to action. In an age increasingly dominated by technology and “quick fixes,” the values of empathy, cultural competence, and acknowledgment of spiritual and existential dimensions must regain their rightful place in healthcare. By illustrating these values through the legacy of Hanna Chrzanowska, Rajfur provides a concrete example of how a truly holistic medicine can be practiced: one in which scientific and humanistic perspectives operate hand in hand to restore dignity and compassion to the healing process.

Declarations

Potential competing interests: No potential competing interests to declare.