

Review of: "Narrative Medicine: Enhancing End-of-Life Care with Literary Stories"

Monica Bazzano¹

¹ University of Palermo

Potential competing interests: No potential competing interests to declare.

The study, interesting indeed, presents several limitations that must be considered.

The article addresses a topic of great relevance: the role of the Death Doula in palliative care. However, the absence of mention of this figure in the abstract and introduction is a significant shortcoming. Furthermore, the article does not discuss examples of Narrative Medicine but, in my opinion, only describes the effective role of bibliotherapy in care. The English language and style are sufficient.

Even if the article is interesting, in my opinion, the article mentions three stories, but it does not discuss examples of Narrative Medicine and does not explain in detail how this knowledge can be applied to healthcare personnel. The article mentions bibliotherapy but does not clarify the relationship to narrative medicine. The article focuses on reading three literary texts for emotional well-being, whereas narrative medicine involves the telling of patients' and professionals' experiences. It would be helpful, in my opinion, to explain how these two approaches connect and how they can be integrated to improve patient care.

The paper possesses some minor and major flaws, in detail:

Title, I suggest not using "Narrative Medicine" in the title. Narrative medicine, promoted by Rita Charon and others, uses patients' and physicians' stories to improve care and understanding in medical settings. It involves the sharing and analysis of patients' personal narratives to foster compassion, understanding, and improved communication between patients and health care providers.

Bibliotherapy, on the other hand, uses literary texts for therapeutic purposes and involves reading and discussing selected stories, novels, or poems. It helps patients explore and manage their experiences, emotions, and challenges.

Although both involve the analysis of literary stories for therapeutic benefits, narrative medicine focuses on personal narratives within medical settings, while bibliotherapy has a broader scope in using literary texts for therapeutic purposes.

The abstract should provide a clear and concise overview of the content of the article. It lacks clarity and contextualization, with no explicit presentation of the Doula of Death, a topic that is instead central to all three readings suggested by the authors. Furthermore, the abstract states that narrative medicine and bibliotherapy can improve patient care, but it does not specify how. I suggest providing concrete examples of how these techniques can be used to address specific end-of-life challenges.

- *Introduction:* I suggest clearly specifying the purpose of the manuscript and its relevance to readers. For example, it might be helpful to briefly introduce what is meant by "narrative medicine" and "bibliotherapy." In addition, I would write a short sentence introducing the Death Doula and its role in the context of palliative care.
- *Method:* The abstract mentions three carefully chosen literary works but gives no details on how they were selected. Add a brief explanation.
- *Conclusion:* Add a brief conclusion summarizing the main points discussed and emphasizing the importance of this approach for health professionals and patients.

The introduction also has some critical issues that should be improved, in detail:

The authors mention a "specific audience," but do not specify who this audience is. Specifying the target audience would help make the message more focused and relevant.

Explain how the Death Doula contributes to the empathetic and compassionate approach described in the article.

The statement that "some beliefs are crucial because they influence people's actions" is not supported by evidence or references. Add research or examples that demonstrate this relationship.

Furthermore, the authors did not specify what the **aim** of the study is.

Bibliography has too many articles by the author, and it would be better to cite other sources.

In conclusion, the article has significant potential, but it requires numerous modifications to make the relationship between narrative medicine and bibliotherapy clearer. Integrating practical examples and providing specific guidance for healthcare personnel could improve the effectiveness of the paper.