

## P02-242

### TEACHING CULTURAL COMPETENCE IN MEDICINE

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**Introduction:** Understanding how different cultures perceive illness and treatment are fundamental elements of cultural competence in medicine. Knowledge alone is not sufficient; physicians must be open to these cultures and, as appropriate, inclusive of such in comprehensive treatment plans. Medical schools increasingly address this important issue by accepting student bodies with broad cultural diversity and focus education on attaining cultural competence. This paper addresses the unusual circumstance when medical students' cultures are in direct conflict with western medicine and analyzes the perception of appropriate intervention.

**Method:** Composite case analysis with literature review.

**Result:** A 24-year-old male medical student of Asian heritage was asked to comment on how he would treat cancer patients who were expected to die without chemotherapy. He responded: "teach alternatives/benefits/risks; patients can be persuaded with knowledge but one must accept their decisions; patients may have had enough and want to start anew." This last point addressed the Hindu concept of "peaceful death with reincarnation" which was consistent with his heritage. He had not considered refusal of chemotherapy in the context of western cultures wherein reincarnation may not be a belief and the desire to die may be secondary to depression.

**Conclusion:** Cultural knowledge and diversity may lead to inappropriate approaches toward medical care in western cultures. As much as medical schools need to diversify, learn about other cultures, and incorporate such in patient-care, it is critical that medical schools teach students from other cultures about western culture.