

在數位醫療中找回「人」-健康照護、科技及教育的反思

Rediscovering the Human in a Digital World – Reflections on Healthcare, Technology & Education

大會手冊

Conference Program

日期:109年12月5日(六)09:30-17:20

地點:高雄醫學大學 國際學術研究大樓B2 國際會議中心B廳

Date: December 5th, 2020

Venue: Hall B, B2, International Academic Research Building, KMU

主辦單位:高雄醫學大學

醫學教育及人本化教育研究中心、

人文社會科學院、醫學院、護理學院、

教育部人文社會科學與科技前瞻人才培育(UFO)計畫

協辦單位:安斯泰來基金會



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大會議程 Agenda

Time	Topic / Speaker (Discussant)	Moderator	
09:30 - 09:40	Opening Remarks 開幕致詞		
09:40 - 10:30	The Electronic Patient: Medicine and the Challenge of New Media 電子病人:醫學與新媒介帶來的挑戰 Jeremy Greene Professor, Department of the History of Medicine, Johns Hopkins University	Chi-Wan Lai Chair Professor, Andrew T. Huang Medical Education Promotion Fund 黃達夫醫學教育促進基金會 賴其萬教授	
10:30 -	Tea Break 茶叙		
11:00			
11:00 - 11:50	Medical Humanities in the Digital Era 數位時代中的醫學人文 Ying-Wei Wang Director-General, Health Promotion Administration, Taiwan Ministry of Health and Welfare 衛生福利部國民健康署 王英偉署長	Chung-Sheng Lai Professor, Department of Surgery, Kaohsiung Medical University 高雄醫學大學外科學 賴春生教授	
11:50 - 12:20	Panel Discussion 綜合討論 Ying-Wei Wang, Chi-Wan Lai, Chung-Sheng Lai, Peih-Ying Lu (KMU), Kwong-Djee Chan(Griffith University) 王英偉署長、賴其萬教授、賴春生教授、 呂佩穎教授、曾廣志高級講師	Cheng-Sheng Chen Professor, Director of Department of Clinical Education and Training, KMUH 高雄醫學大學附設中和紀念醫院 臨床教育訓練部 陳正生部主任	
12:20 - 13:30	Lunch Break 午餐		

大會議程 Agenda

Time	Topic / Speaker (Discussant)	Moderator	
13:30 - 14:20	In the Name of AI - Love in Health Care: A Reflection from STS Perspective AI 醫療 • 「愛」醫療:STS 的提問 Wen-Hua Kuo Professor, Graduate Institute of Science, Technology, and Society, National Yang-Ming University 國立陽明大學科技與社會研究所 郭文華教授	Tasing Chiu Professor, Department of Medical Sociology and Social Work, KMU 高雄醫學大學 醫學社會學與社會工作學系 邱大昕教授	
14:20 - 15:10	Responsible Care for Older Adults through Robotic Media 透過機器人媒介對年長者的責任照護 Ryuji Yamazaki-Skov Specially Appointed Associate Professor, Institute for Open and Transdisciplinary Research Initiatives, Osaka University	Yin-Chun Tien Professor, Dean of College of Medicine, KMU 高雄醫學大學醫學院 田英俊院長 Kuan-Yuan Wang (Discussant) Attending Physician, Kaohsiung Municipal Cijin Hospital 高雄市立旗津醫院內科部 王冠元醫師 (與談人)	
15:10 - 15:25	Tea Break 茶叙		
15:25 - 16:15	Health Care and the Lived Reality of Patients 醫療照護與病人經歷的現實 Annemarie Mol Professor, Anthropology of Health, Care and the Body, University of Amsterdam	Peih-Ying Lu Professor, Dean of College of Humanities and Social Science, KMU 高雄醫學大學人文社會科學院 呂佩穎院長	
16:15 - 17:15	Plenary: Humanizing Healthcare – Reflection, Feedback and Practice in Local Context 專題探討: 人本化健康照護 – 在地脈絡下的反思、回饋與實務 Feng-Hwa Lu (NCKU), Yen-Ko Lin (KMU), Yu-Ying Hu (KMU), Ching-Teng Yao (KMU) 國立成功大學醫學院 盧豐華副教授高雄醫學大學醫學院 林彥克副教授高雄醫學大學人文社會科學院 胡郁盈副教授高雄醫學大學護理學院 姚卿騰助理教授 Kwong-Djee Chan (Discussant) Senior Lecturer, School of Medicine, Griffith University 澳洲格里菲斯大學醫學院 曾廣志高級講師 (與談人)	Bih-O Lee Professor, Dean of College of Nursing, KMU 高雄醫學大學護理學院 李碧娥院長 Jer-Chia Tsai Professor, Associate Dean of College of Medicine, KMU 高雄醫學大學醫學院 蔡哲嘉副院長	
17:15- 17:20	Closing 賦歸		

The Electronic Patient: Medicine and the Challenge of New Media 電子病人:醫學與新媒介帶來的挑戰

Speaker

Jeremy Greene
Professor, Department of the History of Medicine, Johns Hopkins University

Moderator

Chi-Wan Lai 賴其萬
Chair Professor, Andrew T. Huang Medical Education Promotion Fund
黃達夫醫學教育促進基金會 教授

Abstract

While the COVID-19 pandemic has thrust telepresence into the mainstream for most clinical (and many nonclinical) interactions, the suite of social and technical operations that make up telehealth have been at place for at least a half-century. This talk revisits the history of early telemedical encounters in the 1960s and 1970s, as framed by records of physicians, nurses, policymakers, engineers, and sociologists, to reveal an earlier reckoning with the forms and meanings of clinical care through electronic media. The invention of the telegraph in the mid 19th century, celebrated a bit fancifully perhaps as "the Victorian internet", nonetheless brought a new experience of being "together apart" such that telegraph operators could claim to recognize the distinctive "touch" or telegraph style of their remote interlocutors. The telephone added the simultaneity of voice to remote presence, the radio the possibility of mobility, the television the multimedia component of sound and vision together. Yet for physicians and patients, each new electronic medium of telepresence, in filling part of the void left by its predecessors, highlighted those forms of absence that continued. When the Boston physician Kenneth Bird has been credited with inventing the term "telemedicine" in his newly-minted telediagnostic clinic at the Massachusetts General Hospital, allowing him to see a patient through a series of different camera lenses beamed by microwave link, some things—like the color of dermatological lesions, or the smell of a patient's urine—could not properly be conveyed. Telepresence would never, he admitted, truly replicate the "touch" of the physician. Yet Bird and those who followed his lead to create telehealth platforms nonetheless wondered: if at a certain point we accept a telephone call as a conversation, at what point does telepresence simply become presence? Does it require adding the sense of touch, or perhaps also the olfactory, the gustatory, three dimensional immersion, proprioception? Or is presence a more contingent thing than that? Are there forms of presence which might even become heightened with distance? This talk positions telepresence in medicine as an open-ended form, with potential to both support and subvert existing structures of the doctor/patient relationship.

Dr. Jeremy Greene is broadly interested in the history of disease, and his research explores the ways in which medical technologies come to influence our understandings of what it means to be sick or healthy, normal or abnormal. In addition to directing the Department of the History of Medicine, he is the founding Director of the Center for Medical Humanities and Social Medicine at Johns Hopkins University, Core Faculty in the Johns Hopkins Drug Access and Affordability Initiative, Associate Faculty at the Berman Institute of Bioethics, and holds joint appointments in the Department of History of



Science and Technology and the Department of Anthropology at the Krieger School of Arts and Sciences. He has published two books (Prescribing by Numbers: Drugs and the Definition of Disease and Generic: the Unbranding of Modern Medicine (Johns Hopkins University Press 2007, 2014) (中譯本:便宜沒好藥?一段學名藥和當代醫療的糾葛) and is currently working on a book project tentatively titled The Electronic Patient: Medicine and the Challenge of New Media. This project examines how changing expectations of instantaneous communications through electric, electronic, and digital media transformed the nature of medical practice and medical knowledge.

Dr. Greene received an M.A. in medical anthropology from Harvard in 2004, an MD and PhD in the history of science from Harvard in 2005, completed a residency in Internal Medicine at the Brigham & Women's Hospital in 2008, and is board certified in Internal Medicine and a member of the American College of Physicians. He currently practices internal medicine at the East Baltimore Medical Center, a community health center affiliated with Johns Hopkins. Most recently, he was named the 2021 Nicholas Davies Award recipient from the American College of Physicians for "outstanding scholarly activities in history, literature, philosophy, and ethics and contributions to humanism in medicine."

Medical Humanities in the Digital Era 數位時代中的醫學人文

Speaker

Ying-Wei Wang 王英偉

Director-General, Health Promotion Administration, Ministry of Health and Welfare, Taiwan 衛生福利部國民健康署 署長

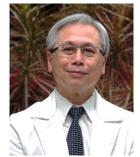
Moderator

Chung-Sheng Lai 賴春生
Professor, Department of Surgery, Kaohsiung Medical University
高雄醫學大學外科學 教授

Abstract

The fundamental values of medicine is committed to improving the health of the patient by finding the right answer and doing the right thing. Patients provide a rare privilege for health professionals to have a glimpse in their most private and intimate moments, known as the "human touch". It is important to continuing building the relationship between patient-providers by nurturing the human side of medical care that can be quickly overlooked due to the tremendous stressors that health systems face today. Healthcare is shifting to a digital era and entirely new forms of interaction such as telehealth are evolving; providing a new opportunity for medical humanities. There are many variations of technology that can be applied to teaching, communicating and treating individuals and health professionals. Virtual worlds provide online communities that engage users in purposeful and focused communications in a highly engaged environment. Avatar-based role-playing programs can also profile different human conditions of illness and suffering; developing health professional students' skills for interpreting, analyzing, evaluating, synthesizing and solving complex problems. The patient landscape is changing and the healthcare sector needs to evolve with the new needs. Technology is hardwired to be efficient; and traditional approaches of interacting with patients should not be limited to sitting in front of a screen, googling for answers. Organic digital opportunities are growing to be experimental and innovative- they provide a new, endless opportunities for users to explore the meanings attached to health, illness, life and death. The content is more relevant to the learners and fill gaps in the current clinical learning and patient environment. Embracing digital technologies in the health system can expand the creative and physical space, ensuring health for all.

Dr. Ying-Wei Wang is the Director General of the Health Promotion Administration, Minister of Health and Welfare (Taiwan, R.O.C.). He is the former Chief of the Heart Lotus Hospice at Tzu-Chi General Hospital, and Associate Professor at the Tzu Chi University, Department of Medical Humanities. He received his MD degree from National Taiwan University and DrPH degree from Tulane University in USA. He completed his residency training in Family Medicine at the National Taiwan University Hospital and started the first Buddhist Hospice Program in East Taiwan in 1996. He is a



council member of the Asia-Pacific Hospice Palliative Care Network, serving as the Chief of the Education Committee for palliative care education in the Asia-Pacific region. His major research areas are family medicine, palliative care, community health, health promotion, and medical education.

Panel Discussion 綜合討論

Panelists

Ying-Wei Wang 王英偉

Director-General, Health Promotion Administration, Ministry of Health and Welfare, Taiwan 衛生福利部國民健康署 署長

Chi-Wan Lai 賴其萬

Chair Professor, Andrew T. Huang Medical Education Promotion Fund 黃達夫醫學教育促進基金會 教授

Chung-Sheng Lai 賴春生
Professor, Department of Surgery, Kaohsiung Medical University
高雄醫學大學外科學 教授

Peih-Ying Lu 呂佩穎

Professor, Dean of College of Humanities and Social Science, Kaohsiung Medical University 高雄醫學大學人文社會科學院 院長

Moderator

Cheng-Sheng Chen 陳正生

Professor, Director of Department of Clinical Education and Training, Kaohsiung Medical University Chung-Ho Memorial Hospital 高雄醫學大學附設中和紀念醫院臨床教育訓練部 部主任

午休用餐

- 請先至會議廳外簽退,並請撕下您名牌下方的餐卷至 領餐區兌換餐點
 - Please sign out at the entrance, then use the voucher attached to the bottom of your name badge in exchange for a lunchbox.
- 下午場 13:30 準時開始,敬請提早回到會場簽到
 Afternoon session starts at 13:30. Please come back to the venue earlier to sign in.
- 午休時段開放高醫校史暨醫學人文館,若需參觀請於
 12:50 至本會議廳外參觀集合處立牌處集合
 If you are interested in vising the Museum of KMU
 History and Medical Humanities, please wait at the meeting point outside the hall at 12:50.

In the Name of AI - Love in Health Care: A Reflection from STS Perspective AI 醫療 ●「愛」醫療: STS 的提問

Speaker

Wen-Hua Kuo 郭文華

Professor, Graduate Institute of Science, Technology, and Society, National Yang-Ming University 國立陽明大學科技與社會研究所 教授

Moderator

Tasing Chiu 邱大昕

Professor, Department of Medical Sociology and Social Work, Kaohsiung Medical University 高雄醫學大學醫學社會學與社會工作學系 教授

Abstract

This brief presentation aims to offer some reflections on the trends in prospecting future health care that features artificial intelligence (AI). Contrasting to traditional health service that emphasizes on patient-physician relationship both intimate and professional, the Alfacilitated medicine, as generally perceived, is clod, rigid, and without compassion (or "ai" as pronounced in mandarin). With perspectives from science and technologies studies (STS), I do not intend to comment much on the "invasion" of AI technologies that would be applied to almost every aspect of health care, nor how to preserve the compassionate essence in the doctor-patient relationship under the increasing financial pressure in health sector. Instead, by closely following how Taiwan's national health insurance scheme has changed the conception and practice of care, I will invite the audience to think together how to confront Al discourses/initiatives in health care; the opportunities and pitfalls they can bring to the changing landscape of care that consists not only medical professionals and those who passively need helps for better health but also health technologies and information. Only with this understanding can we circumvent futile debates over the introduction of AI in health care. More attention, as I will argue, should be put on how care is actually delivered and what changes we can make to achieve constructive healing interactions both medical professionals and patients deserve.

Dr. Wen-Hua Kuo is an adjunct professor at National Yang-Ming University's Institute of Public Health. He received his MD from National Yang-Ming Medical College (now National Yang-Ming University), and he holds an MA from the Institute of History at National Tsing-Hua University and a PhD in the History and Social Study of Science from MIT. His research revolves around the making of modern medicine in Non-Western societies. In particular, he looks into the globalization of medicine and its impact on East Asia from three aspects—clinical trials at transnational scale, politics of public health, and the transformation of medical professions.



From the "high tech" perspective, he is looking at how East Asian states encounter the standardization of the requirements for new drug approval. This working book manuscript, based on his Ph.D. dissertation at MIT, discusses several players involved in global pharmaceuticals, thus presenting an exciting narrative with STS interest. His previous work in this area critically examined the population control policies of 1950s and 1960s Taiwan. The global perspective of this research has enabled him to prepare a historical project which aims to achieve a broader understanding of public health by considering it in the context of Cold War politics.

Dr. Kuo has written a chapter in *Lively Capital: Biotechnologies, Ethics, and Governance in Global Markets* (Duke University Press 2012), and his writings have appeared in journals such as *The Journal of Law, Medicine & Ethics* (2008), the Drug Information Journal (2009), the East Asian Science, Technology, and Society (2009), Biennial Review of Law, Science and Technology: Science Governance, Freedom of Research, and Pluralist Democracy (2010), and Social Science & Medicine (2011).

Responsible Care for Older Adults through Robotic Media 透過機器人媒介對年長者的責任照護

<u>Speaker</u>

Ryuji Yamazaki-Skov Specially Appointed Associate Professor, Institute for Open and Transdisciplinary Research Initiatives, Osaka University

Moderator

Yin-Chun Tien 田英俊
Professor, Dean of College of Medicine, Kaohsiung Medical University
高雄醫學大學醫學院 院長

Discussant

Kuan-Yuan Wang 王冠元
Attending Physician, Kaohsiung Municipal Cijin Hospital
高雄市立旗津醫院內科部 主治醫師

Abstract

As populations continue to age, there is a growing need for new technologies to assist older adults in daily living, especially during a pandemic. Their social isolation is one of the leading issues in healthcare promotion and designing communication aids is crucial. Computer-based intervention has been investigated for improving communication among people with dementia, healthcare personnel, family members, and volunteers, and telecommunication support is expected to be provided by robotic media technology and facilitate social interaction both verbal and nonverbal. Problem-solving through new technologies is an opportunity not only to research how social isolation can be mitigated, but also how new relationships can be fostered. In this talk, I will present my research projects and discuss how telecommunication with dementia patients can be realized and improved by robotic media and its potential for improving the operator's communication skill, including related ethical issues, e.g., regarding utilization of personal information. Healthcare professionals will be required to provide care by making use of new technologies such as social robots both in local and remote care settings.

By showing and reflecting on my robotic mediation project, I will propose research topics for people involved in care for older adults, especially for healthcare professionals as 'robotic mediators,' and discuss their challenges with ethical as well as educational implications. With respect to medical education, I propose to employ a teleoperated robot as a training tool for communication with dementia patients. While this robot can promote the patient's conversation, a limited functionality of the robot may lead the operator to pay more attention

to their dialogue itself rather than gestures as in person. At the same time, conversational data storage and analysis may allow knowledge sharing among the robot/operators and people involved in care for older adults. This kind of communication style has potential for helping healthcare professionals, especially at early career stages, envelop their communication skill. Furthermore, for example, in a case where family members of the patients are willing to teleoperate the robot, healthcare professionals may need to instruct them in effective ways of communication and how to utilize the robotic Embodied Communication Technology (ECT), resulting in a call for a new type of education and teaching together with a view into ethical aspects of robotic care.

About the Speaker

Ryuji Yamazaki-Skov (Yamazaki), Ph.D. is a Specially Appointed Associate Professor at Symbiotic Intelligent Systems Research Center, Institute for Open and Transdisciplinary Research Initiatives, Osaka University, Toyonaka, Osaka, Japan. He received a M.A. degree in Philosophy from Chuo University, Tokyo, and a Ph.D. in Knowledge Science from Japan Advanced Institute of Science and Technology (JAIST), Ishikawa, in 2004 and 2010. He has worked as a Researcher at JAIST, Advanced Telecommunications Research Institute International, Kyoto, Japan, as an Invited Researcher, member of the PENSOR



project (Philosophical Enquiries into Social Robotics) at Aarhus University, Denmark, and as an Assistant Professor at School of Social Sciences, Waseda University, Japan. His current research interest is in new media studies with a focus on social robotics, phenomenology of embodiment, clinical philosophy and ethics, and robo-philosophy.

Health Care and the Lived Reality of Patients 醫療照護與病人經歷的現實

Speaker

Annemarie Mol

Professor, Anthropology of Health, Care and the Body, University of Amsterdam

Moderator

Peih-Ying Lu 呂佩穎

Professor, Dean of College of Humanities and Social Science, Kaohsiung Medical University

高雄醫學大學人文社會科學院 院長

Abstract

The dominant self-understanding of Western medicine is that diverse diagnostic techniques all cast a different perspective on the condition of a patient. However, in the practices that I studied in hospitals in the Netherlands, I learned that there are often tensions between what different diagnostic techniques demand, do and conclude. For instance: is atherosclerosis of the leg vessels best charactrised as the pain upon walking that a patient grapples with, or as the loss of lumen visible on an angiographic picture? These versions of the disease do not fully align. Notably, walking therapy will help to increase the distance people are able to walk, even though their lumen loss stays the same. This raises the question which reality to prioritize: that of walking patients or that of techno-images.

And if the object of medicine is diverse, so, too, is its process. The dominant ways to imagine the health care process is as a decision tree, with one bifurcation point after the other. However, the practices that I witnessed were rarely linear. Take the treatment of type 1 diabetes. This is not a step by step affair, but a matter of persistent tinkering. And while patients are encouraged to self-measure their blood sugar levels in the hope of postponing complications, they have to avoid their fingertips, to maintain optimum sensitivity. In this way, a future in which blindness is a possibility is included in a present meant to avoid it.

In Western medicine, then, different logics are at work at the same time. Rationalist ones, that tend to get built into machines; and clinical ones, that foreground the lived realities of patients. Here is my question: how do these two logics travel? How do they interfere with structural health care conditions across the globe, and more particularly in Taiwan?

Annemarie Mol is a professor of the Anthropology of the Body and a member of the Social Scientific Council of the Royal Academy of Sciences. She holds a BA in Medicine, an MA in Health Care Studies, and an MA and PhD in Philosophy. In her work, she combines the ethnographic study of practices with the task of shifting our theoretical repertoires. Her most important research lines to date include: the words – language as practice; the object – multiplicity; the process – care; the site – topologies; and the engagement – eating as relating. She is the author of *The Body Multiple* (Duke University Press 2002) and *The Logic of Care* (Routledge 2008)—published in Chinese as 「照護的邏輯:比賦予病患選擇更重要的事」



She co-edited *Differences in Medicine* (Duke University Press 1998), *Complexities* (Duke University Press 2002), *Care in Practice* (Transcript 2010), and *On Other Terms* (2020). Her articles address issues related to health care, food and eating, valuing in daily practices, and the language of theory. Most recently, she has written various articles in *The Sociological Review* examining how linguistic differences affect the way people perceive the world and exploring the connotations and deeper meanings that can be lost when translating from one language to another.

Plenary 專題探討

Humanizing Healthcare – Reflection, Feedback and Practice in Local Context 人本化健康照護 – 在地脈絡下的反思、回饋與實務

Speakers

Practice of Medical Humanities into Clinical Diagnosis Teaching

醫學人文融入臨床診斷教學的實踐

Feng-Hwa Lu 盧豐華

Associate professor, Director of Department of Family Medicine, National Cheng Kung University 國立成功大學醫學院醫學系家庭醫學科 主任/副教授

Teaching Ethics in Practice

人本化教育中的倫理教學

Yen-Ko Lin 林彥克

Associate Professor, Department of Medical Humanities and Education, Kaohsiung Medical University

高雄醫學大學醫學系醫學人文暨教育學科 副教授

Humanizing Care for Gender and Sexual Minorities: Issues and Prospects

性別少數與人本化醫療:議題與展望

Yu-Ying Hu 胡郁盈

Associate Professor, Graduate Institute of Gender Studies, Kaohsiung Medical University 高雄醫學大學人文社會科學院性別研究所 副教授

Positive Effects and Meaning of Art Therapy on Depression and Self-Esteem of Older Adults in Nursing Homes

藝術治療活動在台灣長期照顧高齡者的效果與意義

Ching-Teng Yao 姚卿騰

Assistant Professor, Master Program of Long-Term Care in Aging, College of Nursing, Kaohsiung Medical University

高雄醫學大學護理學院高齡長期照護碩十學位學程 助理教授

Moderator

Bih-O Lee 李碧娥

Professor, Dean of College of Nursing, Kaohsiung Medical University 高雄醫學大學護理學院 院長/教授

Jer-Chia Tsai 蔡哲嘉

Professor, Associate Dean of College of Medicine, Kaohsiung Medical University 高雄醫學大學醫學院 副院長/教授

Discussant

Kwong-Djee Chan 曾廣志

Senior Lecturer, Internationalisation Lead, School of Medicine, Griffith University 澳洲格里菲斯大學醫學院 高級講師/國際組組長

感謝您的與會

敬請協助填寫教師成長活動問卷

(僅高醫教職員)



籌備委員名單 (依姓氏筆畫順序,稱謂省略)

呂佩穎、李香君、李維哲、李淑君、李碧娥、林錦宏、蔡哲嘉

行政人員名單 (依姓氏筆畫順序·稱謂省略)

行政組:古雅文、林宛萱

• 接待組:朱怡臻、楊雅珺

• 事務組:白修安、陳巽瑋、彭芷亭、顏焰貞

場務組:任景晞、李文智、李庭妤(司儀)、周鈴淨(司儀)

• 資訊組:陳芸翎、湯凱文

• 學術組:林宛萱、許善淳、陳芸翎