

## **Students' Attitudes and Responses to Anatomy and Dissection**

- I. What the Research Tells Us**
  - A. The research is equivocal about the extent to which students are bothered physically or emotionally by anatomy**
  - B. Several older studies report serious psychological distress in anatomy students**
  - C. More recent studies, however, indicate that anatomy is only moderately, or not very, stressful, and in fact generates considerable enthusiasm and excitement among the large majority of students**
  - D. A similar study indicated that students generally do not find cadaver dissection aversive, but rather see it as "a positive and challenging life event"**
  - E. To some extent, anatomy appears to be a self-correcting experience from a stress perspective, in that student stress "naturally" appears to attenuate as the course progresses**
  - F. Whether or not anatomy is stressful for students, there is evidence that learning how to manage emotions that arise during anatomy may improve test performance**
- II. Emotional Risks of Anatomy**
  - A. Anatomy lab can be the beginning of a physician's training in how to isolate and restrict affect**
  - B. Or how to deal appropriately with affective responses**
  - C. Unfortunately, an unintended consequence of human dissection is that it may create in medical students an inappropriate and callous "property of easiness" in dealing with death and the human body**
  - D. Anatomy lab can be the beginning of a physician's training in how to isolate and restrict affect**
  - E. Or how to deal appropriately with affective responses**
  - F. Unfortunately, an unintended consequence of human dissection is that it may create in medical students an inappropriate and callous "property of easiness" in dealing with death and the human body**
- III. Opportunities in Anatomy**
  - A. The gross anatomy course is frequently regarded as the first rite of passage for medical students**
  - B. Anatomy is the students' first formal opportunity to**
  - C. bear witness to another's suffering (in this case, the "suffering" of the cadaver)**
  - D. as well as their own suffering as a result of participation in the anatomy lab and the dissection process**

- IV. **Gratitude**
  - A. Most common emotions experienced by students toward the cadaver are gratitude/thankfulness
  - B. Students often marvel that people are willing to donate their bodies for dissection purposes
  - C. Feel great appreciation for this opportunity of hands-on learning
  - D. Dissection is viewed as a great gift; students are in awe of the almost unimaginable sacrifice the donor has made
  - E. Frequently leads to a sense of obligation/responsibility
  - F. Student assumes commitment to apply knowledge acquired to heal the living
- V. **Awe and Wonder**
  - A. Other common emotions: awe and wonder
  - B. Miracle (sacredness) of human body
  - C. Intricacy and complexity of body
  - D. Awe-inspiring map that guides students in an amazing exploration
  - E. Privilege of knowing other bodies in a way that ordinary people do not
  - F. Students describe the knowledge they gain of specific nerves, organs, and structures as “intimate” and “special”
- VI. **Violation Requiring Forgiveness**
  - A. Sometimes students experience dissection as horrifying, even sacrilegious
  - B. Dissection is seen as brutal, mutilating
  - C. Sense of committing a violation; student feels part of something ugly and inhumane
  - D. A feeling of “wrongness” in dissection
  - E. A sin, for which the student needs forgiveness
- VII. **Reflecting on Life and Death**
  - A. Some students are moved by their experience in gross anatomy to reflect on “ultimate” questions
  - B. Think about their religious and spiritual beliefs
  - C. Think about the meaning of life and death
- VIII. **No Right Feelings in Response to Dissection**
  - A. Extreme responses may be cause for concern
    - a. Difficulty eating
    - b. Recurrent nightmares
    - c. Persistent feelings of guilt
    - d. Inability to go to lab
  - B. There is a large range of emotional responses to anatomy and dissection that are reasonable, appropriate, and “normal”

- C. Feelings often evolve and change at different points in the course**
- IX. Opportunity to Develop Attitudes of Professionalism**
  - A. Respect for the human body**
  - B. Treating patients with empathy, compassion, and dignity**
  - C. Leadership and teamwork**
  - D. Remaining connected with others outside medicine**
  - E. Reflection on own emotional reactions to clinical situations**
  - F. How to deal with challenging situations**