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Letter to the editor

Narrative medicine as a good tool for patient-dentist discourse



Dear Editor

It was with interest that we read the first qualitative assessment of dental education in Taiwan by Hsu et al.¹ In this study, the most crucial non-operational capability is patient-dentist discourse evaluated by querying patients and responding to questions. In addition, Tsai et al.² also reported that the professional communication skills should be emphasized in dental preparatory training program.

Narrative is defined as a spoken or written account of an event or events. Befitting discourse could help identify the purpose of the current visit and patient compliance, especially in the first visit. Charon³ first integrated narrative and medicine into daily medical practice by the use of narrative as a tool to analysis of the doctor–patient relationship and interpret information on the patient's experience of illness. Nowadays, "Narrative Medicine" has developed as a theoretical and operative approach for addressing the emotional and sociological aspects of persons affected by disease, health care professionals, caregivers, and family members.⁴

Curriculum design and learning outcome are the two critical infrastructures of dental education. The competency-based education and training usually emphasizes the assessment of clinical competence and skill *via* summative objective structured clinical examination.^{1,2,5} Recently, holistic healthcare, a form of patient-centered medical service, is the essential core value emphasized in the development of dentist. Exception of good clinical skills, patient-dentist discourse with the appropriate attitude and good communication skills are also very crucial. For our opinions, narrative medicine seems to be a powerful instrument for improving patient-dentist discourse during the cultivated-education of dental students and residents in Taiwan.

Conflicts of interest

The authors have no conflicts of interest relevant to this article.

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