

<http://somatosphere.net/2013/03/in-the-journals-february-part-2.html>

In the Journals... February (Part 2)

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By Aaron Seaman

This post is a follow-up to Jason Alley's earlier article: "In the Journals... February (Part 1)."

A brief review of some of the most relevant periodicals situated at the intersection between medicine, medical humanities, and the social sciences – [Social Science & Medicine](#), [Psychosomatic Medicine](#), [Philosophy, Ethics, and Humanities in Medicine](#), and [Transcultural Psychiatry](#), to name a few – shows considerable emphasis on issues such as trauma and its aftermath, transcultural vs. ethnocentric approaches to the practice of clinical medicine, and, last but not least, cultural diversity vs. socio- cultural vulnerability.

Social Science & Medicine

[After the death of a friend: Young men's grief and masculine identities](#)

Genevieve Creighton, John L. Oliffe, Shauna Butterwick, and Elizabeth Saewyc

"Young men can have an uncomfortable relationship with grief. Socially constructed masculine ideals dictate that men be stoic in the aftermath of loss, most often expressing their sadness and despair as anger. Perhaps because of alignment to such masculine ideals little research has been done to explore young men's grief – and chronicle the ways they think about loss, their responses and how they go about describing their identities after a tragic event. Using qualitative individual interviews and photo elicitation methods, we investigated the ways in which 25 men aged 19-25 grieved the accidental death of a male friend. The study was conducted from April 2010- December 2011. Causes of death were diverse, and included motor vehicle accidents, adventure sports, drug overdose and fights. The findings revealed men's predominant grief responses as emptiness, anger, stoicism and sentimentality. Participants' description of their grief responses illustrated the ways in which they struggled to reconcile feelings of vulnerability and manly ideals of strength and stoicism. We gained insight into men's grief practices by looking at the

ways in which they aligned themselves with a *post-loss masculine identity*. These identities, which included the *adventurer*, *father-figure* and the *lamplighter*, revealed gender-specific processes through which men understood and actively dealt with their tragic loss. The results offer novel insights to men's grief and identity work that may serve to affirm other men's experiences as well as guide counseling services targeted to young men."

Psychosomatic Medicine

[The impact of sleep complaints on physical health and immune outcomes in rescue workers: A 1-year prospective study](#)

Leah A. Irish, Angela L. Dougall, Douglas L. Delahanty, and Martica H. Hall

"Irish et al. (196–201) examined the extent to which sleep assessed soon after a traumatic plane crash predicted subsequent physical health and immune functioning in rescue workers 1 year after the crash. They found initial sleep quality complaints were associated with more physical symptoms, poorer perceived health, and increased health care use at follow-up, but not impaired immune function. Results suggest that sleep in the aftermath of trauma signals increased risk for future adverse physical health outcomes."

Objective The present study evaluated the extent to which sleep assessed soon after a trauma predicted subsequent physical health and immune functioning in rescue workers.

Methods Participants included 159 men and women who performed rescue and clean-up operations at the site of a major airplane crash. One hundred twenty-eight participants were retained for a 1-year follow-up. Self-report measures of sleep quality and psychological distress were obtained within 2 months of the crash, and a physical health questionnaire was completed at 1-year follow-up. Natural killer cell number and cytotoxicity were assessed using blood samples collected from a subset of participants (n = 51) at 1-year follow-up.

Results After adjustment for sex, age, body mass index, and initial distress, initial sleep quality complaints were associated with more physical symptoms ($r = .32$; p

Conclusions These data suggest that poor sleep quality in the aftermath of trauma signals an increased risk for future adverse physical health outcomes and underscore the importance of addressing sleep complaints soon after trauma to mitigate negative impact on physical health.

Philosophy, Ethics, and Humanities in Medicine

[Should trainee doctors use the developing world to gain clinical experience? The annual Varsity Medical Debate – London, Friday 20th January 2013](#)

Barnabas J. Gilbert, Calum Miller, Fenella Corrick and Robert A. Watson

“The 2012 Varsity Medical Debate between Oxford University and Cambridge University provided a stage for representatives from these famous institutions to debate the motion ‘This house believes that trainee doctors should be able to use the developing world to gain clinical experience.’ This article brings together many of the arguments put forward during the debate, centring around three major points of contention: the potential intrinsic wrong of ‘using’ patients in developing countries; the effects on the elective participant; and the effects on the host community. The article goes on to critically appraise overseas elective programmes, offering a number of solutions that would help optimise their effectiveness in the developing world.”

Transcultural Psychiatry

[DeMartino's concept of critical ethnocentrism and its relevance to transcultural psychiatry](#)

Giovanni Stanghellini and Raffaella Ciglia

“Ethnography and hermeneutics help us think of the clinical encounter as a meeting of cultures. In this paper, we examine Ernesto De Martino’s concept of critical ethnocentrism and its relevance for psychiatry, arguing for the necessity of a cultural self-assessment on the part of the clinician as a means of

optimizing analyses of the patient's culture. Conceptualizing the clinician as an "ethnologist," we argue that clinicians should be able to describe and acknowledge patients' cultural backgrounds, while remaining aware of their own culturally rooted prejudices. Focusing on the case of persons affected by schizophrenia, we suggest that De Martino's work invites an openness to hermeneutic dialogue that aims for the coconstruction of shared narratives by clinician and patient."

AMA citation

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