

**Results:** Medical Humanities involves the application of Medical Sciences to the Humanities, Social Sciences and the Arts, as well as the interpretation of the Arts within a Medical Context.

**Conclusions:** Medical Humanities is a broad term pertaining to the fusion of a number of interdisciplinary fields, namely Humanities, Social Sciences, the Arts, and their application to Medical Education and Practice. The subject has implicit, as well as explicit roles in the understanding of the Human Condition. Hence, it influences illness perspective and Medical Care, making the latter more Humane.

## EDU 9

### Investigating the performance of medical students in anatomy examinations 2002-07

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**Aims:** Medical students are examined four times in anatomy over two years. There is a progress test in January each year (formative) and a final summative examination in June. The purpose of this study was to examine the performance of undergraduate medical students of the University of Malta in anatomy over 4 semesters.

We were specifically interested in the ways in which students' results in the final anatomy exam could be predicted by their performance in the previous anatomy exams. We also investigated whether the strength of this correlation and the students' actual performance were affected by their gender or nationality.

**Methods:** The study involved statistical analysis of de-identified linked examination data for all four examinations in four cohorts of students between 2002 and 2007.

**Results:** There was a strong correlation between the results of the anatomy progress test in January and the final exam in each year, which was independent of the students' gender and nationality. In general, students who do poorly in the final examination at the end of Year 2, also did poorly in previous examinations.

In each exam, performance was related to the students' nationality, with Maltese students performing better than international students. The difference in performance between genders was found to be marginally in favour of female students.

**Conclusions:** The results of the anatomy progress tests can be used as an indication of the students' need for additional teaching and support. This applies to all students. Since in general, international students perform worse than local students in anatomy examinations, they are more likely to benefit from additional support.

## AHP 1

### The Spiritual Dimension in Holistic Care: The role of the Multi Disciplinary Team

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**Aims:** Health care professionals claim to deliver holistic care. This involves caring for the whole person. Body, mind and spirit. The spiritual aspect of care, the focus of this paper, is often overlooked. The aim of this paper is to attempt to answer the following questions in terms of empirical evidence.

- Why should spiritual needs be addressed in patients' / clients' care?
- Why should spiritual care be integrated within health care?

- What impact does spiritual care have on patients/clients?
- Are there any barriers when addressing patients' /clients' spiritual needs?

**Methods:** This literature review examines the relationship between spirituality/religion and health, in the areas of physical, mental, social and behavioural health, nursing and midwifery. A literature search was carried out using Medline, CINAHL and Cochrane, using the keywords: spirituality, religion, holistic care, spiritual care, health, nursing and midwifery, multi-disciplinary team. The studies were analyzed on the basis of rigor to its central question, research design, validity and reliability of quantitative studies, trustworthiness of qualitative studies, results and recommendations of the studies.

**Results:** Most research studies demonstrate a positive correlation between spirituality and aspects of physical, mental and social health, in terms of lower mortality, better immunity, less depression, less addiction, better wellbeing and quality of life. This may be due to spirituality being used as a coping or empowering resource giving meaning to suffering. Other studies report negative effects on health, such as choosing faith instead of the needed medical care. Research documents patients' /clients' desires to have their spiritual needs addressed by physicians and health cares in spite of barriers such as the medical model of care, lack of education in the field of spiritual care and ethical issues.

**Conclusions:** Recommendations of research studies address further research on the effective education of caregivers in particular the identification of competencies in spiritual care as is currently being researched in the U.K. and U.S.A. This is the logical next step in the evolution of this field. A set of spirituality-related competencies will provide guidelines for clinical practice and inform the professional and educational demands.

## AHP 2

### Aiming for a consistent consistency

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**Aims:** Determining the consistency on which a person with dysphagia may continue to be safely nourished orally is one of the speech language pathologist's responsibilities. However, in the case of fluids that need to be thickened, reproducing this consistency repeatedly with a variety of thickening agents and with different beverages and foodstuffs is far from easy. This study aims to establish a set of descriptive and quantitative criteria, using uniform terminology, whereby the required fluid consistency may be approximated, according to the thickening agent and the beverage/foodstuff used.

**Methods:** Four thickening agents dispensed locally were studied. The properties of measured amounts of the respective thickeners mixed with a constant volume of water, at a constant temperature, were studied and compared by four SLPs. Equivalent consistencies across thickening agents were established. The procedure was repeated to test intra-rater reliability, and it was then tested again with a further 6 SLPs to ensure inter-rater reliability. The different consistencies obtained were compared to widely available commercial products to serve as target consistency.

**Results:** This method led to five different consistencies being differentiated which could be used in the management of dysphagic clients. Uniform terminology was agreed to reduce subjective