This informative Forum began with definitions of empathy and sympathy, and the distinctions between the two. Factors that influence and enhance physician empathy were discussed. The Jefferson Scale of Empathy (JSE) was presented as an internationally recognized valid tool to measure the phenomenon. Research utilizing the scale was presented, and future areas of research were outlined.

Dr. Hojat, who has authored over 180 publications on the use of psychometric testing and medical education, began the Forum program by explaining that empathy is a phenomenon that can be defined operationally (as described by psychologist Carl Rogers) and measured quantitatively. The JSE is a 20-item Likert-scale questionnaire. Due to its proven validity and reliability to measure empathy in medical care, it has been used in 60 countries and 42 languages to answer numerous psychological and education questions as well as to evaluate the impact of empathy on clinical outcomes. Empathy tends to be higher in women and in physicians who select patient-oriented rather than technology- or procedure-oriented specialties. It is correlated with clinical competence, classmate perception of professional attributes, patient compliance and patient satisfaction.

Mr. Louis presented data from studies conducted at Jefferson and in Italy correlating physician empathy and clinical outcomes for patients with diabetes. Both published studies displayed robust data with large sample sizes. At Jefferson, higher physician empathy scores were associated with improved outpatient control of blood glucose and lipids. In Parma, Italy, higher physician empathy scores were correlated with fewer metabolic complications in hospitalized diabetic patients.

For more information on this research contact:
Mohammadreza.Hojat@jefferson.edu

To read the latest publication on this research visit:
http://journals.lww.com/academicmedicine/Fulltext/2012/09000/The_Relationship_Between_Physician_Empathy_and_26.aspx