Title: Silent Suffering: Recognizing and Addressing the Emotional Impact of Patient Loss on Medical Students

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ABSTRACT.
Experiencing patient loss is emotionally challenging for many medical students. This narrative reflects on the author's encounter with sudden patient loss and the complex emotions it evoked. The commentary underscores the need to prioritize emotional support for medical students dealing with patient loss. The author proposes ways to accomplish this, including equipping students with effective coping mechanisms, creating a supportive environment that encourages students to seek debriefing sessions, and incorporating debriefing sessions into clerkship curricula. By normalizing the emotional complexities of patient loss and fostering a culture of support, medical education can better prepare students to navigate the challenges of patient care with compassion and resilience.

Key Words: medical education, patient loss, resilience, wellbeing
The glow of the computer screen cast a soft illumination over the otherwise darkened room. "You are opening the chart of a deceased patient." The words leapt out at me from the screen, stark and unwavering. I blinked, trying to process the information. Just that afternoon, I had left the hospital, leaving behind a patient whose condition had been improving. Waves of sadness and disbelief washed over me as I tried to comprehend the sudden loss. *How could this have happened?* Guilt crept into my chest, heavy and suffocating. I had spoken with the patient's family earlier that day, reassuring them that their loved one was making progress.

The following day, I waited for someone, anyone, on the team to mention the patient. But the topic remained conspicuously absent from conversation. *Did they not know what had happened? And if they did, why was no one talking about it? Would speaking up only add to the burden of an already busy team?* After all, I was just a medical student.

In the end, my uncertainty won out, and I remained silent. But in that silence, a question lingered: *What if I had spoken up? More importantly, how can students like me be better equipped to cope with sudden patient loss?*

Reflecting on my personal encounter with patient loss, I have come to understand the necessity of openly discussing and addressing the emotional impact patient loss has on medical students. *What emotions did I experience upon learning about my patient's death? How did I initially navigate and cope with these overwhelming feelings? What factors played a role in my decision to remain silent about my experience with patient loss?* These questions underscore the importance of equipping students with effective coping mechanisms, which are not only essential for our personal well-being but also for our training as future healthcare providers.

Like my own experience, most medical students encounter patient loss during their clinical rotations, triggering a range of complex emotions. Among these emotions, sadness, anger, guilt, impotence, and vulnerability are commonly reported by students. Students also often find themselves balancing intense emotional responses with the perceived expectation of maintaining detached professionalism. These encounters can take a significant toll on our mental wellbeing, which may consequently impact the quality of patient care we are able to provide. Despite this, research has primarily focused on emotional responses and interventions for resident and attending physicians rather than medical students.

Therefore, there is a pressing need to better prepare students for patient loss. Nearly 50% of medical students nationwide have reported that they have felt unprepared to handle the emotional impact of patient loss. While many medical schools have incorporated end-of-life care modules into their curricula, these sessions tend to focus on the dying process within palliative care. Similarly, medical schools have made efforts to promote student wellness, although these initiatives often do not specifically address coping with patient loss.

Implementing dedicated sessions in pre-clinical curricula to prepare students for sudden patient loss could effectively reduce emotional distress during these challenging situations. Through these sessions, students...
would understand that experiencing a range of emotions in response to patient loss is normal and valid.

Additionally, they can acquire valuable insights into various coping strategies. Students have previously reported personal coping strategies, such as exercising and writing, seeking support from others, and finding solace in spiritual/religious guidance. Since there is no "one size fits all" approach to coping, it is crucial for students to learn effective coping mechanisms early in their training to use throughout their careers and mitigate the risk of burnout.

Additionally, students need to be encouraged to seek debriefs from their teams during their clinical rotations. Debrief sessions for medical students have been found to be effective in supporting emotional reactions to patient deaths. Particularly, debriefing may be crucial in helping students balance emotion and professional detachment. However, students report often feeling inadequately supported by their medical teams and supervisors. Seeking debrief may be especially challenging for students since they may often feel disempowered along the medical hierarchy. Additionally, systemic factors such as workloads and time pressures may hinder residents and attending physicians from prioritizing debrief sessions.

Efforts should be made to establish a supportive and inclusive environment where students feel empowered to seek debriefing sessions without fear of judgement. These sessions can take various forms, including one-on-one conversations with a resident or attending, informal reflection sessions like journaling, or group discussions involving structured reflection questions with fellow students. Regardless of the format, the goal of these sessions remains consistent: to provide a safe space for students to reflect on their experiences, to gain insights on emotional responses and coping strategies from their supervisors and/or peers, and to reassure students that they do not need to confront these challenges in isolation. Implementing regular debriefing sessions into rotation schedules, specifically tailored for students, could also provide structured time and space for reflection and support without disrupting workflow or putting the burden on students to initiate debriefs.

In conclusion, through collaborative efforts and a culture of mutual support, medical education can better equip students with the tools, environment, and curriculum resources necessary to navigate the emotional challenges of patient loss. Rather than allowing students to endure in silence and question the normalization of patient loss, we need to normalize its emotional complexities and encourage students to seek support. Recognizing and addressing this will ultimately contribute to shaping compassionate and resilient healthcare providers.
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FIGURES AND TABLES.

Figure 1. Three Steps to Recognize and Address Emotional Impact of Patient Loss for Medical Students.