

## **DISCIPLINE SHEET**

1. Data about the programme

1.1.	"CAROL DAVILA" UNIVERSITY OF MEDICINE AND PHARMACY
1.2.	FACULTY OF MEDICINE
1.3.	DEPARTMENT 3 Preclinical (Complementary Sciences)
1.4.	DISCIPLINE Medical Psychology
1.5.	DOMAIN OF STUDY: HEALTH - Sectorally regulated within the European Union
1.6.	STUDY CYCLE: LICENCE
1.7.	STUDY PROGRAME: MEDICINE - ENGLISH MODULE

2. Data about discipline

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2.1.	Name of t	Name of the discipline in the educational plan: Health Psychology and Medical Communication (English)						
2.2.	Discipline	code: DC	I 7 S1M					
2.3.	Discipline	Discipline type (FD/SD/CD): CD						
2.4.	Discipline regimen (MD/OPD): MD							
2.5.	Holder of the course activities: Prof. dr. Ovidiu Popa-Velea, Assoc. Prof. dr. Liliana Veronica Diaconescu, Senior							
	Lecturer dr. Alexandra Ioana Mihăilescu							
2.6.	Holder of the seminary activities: Assoc. Prof. dr. Liliana Veronica Diaconescu, Assoc. Prof. dr. Liliana Veronica							
	Diaconescu, Senior Lecturer dr. Alexandra Ioana Mihăilescu, Teaching Assistant PhD Candidate Dayeh Iulia							
	Irena							
2.7. Year of 1		1	2.8. Semester	1	2.9. Type of evaluation (E/C)	С		

3. Total estimated time (hours/semester of didactic activity and self- preparation / study)

I. University preparation (teaching, practical application, evaluation)					
3.1. Number of hours per week	4	Out of which: 3.2. lecture	2	3.3. seminary	2
3.4. Total hours of educational plan	56	Out of which: 3.5. lecture	28 hours	3.6. seminary	28 hours
Evaluation (hours)	2				
II. Self- preparation / study					
Time allocation	Time allocation 14 weeks				
Study of course materials, textbooks, books, study of the recommended minimal bibliography 20 hours				20 hours	
Additional research in the library, research through the internet				10 hours	
Performing specific activities for preparing projects, laboratories, elaborating reviews or other tasks				10 hours	
Specific preparation activities for projects, laboratory work, assignments, and reports 20 hours				20 hours	
Tutoring 4 hours				4 hours	
Other activities 5 hours				5 hours	
3.7. Total individual study hours 69 hours				69 hours	
3.8. Total hours per semester (3.4. + 3.7.) 125 hours					
3.9. Number of credits 5					

4. Preconditions (where applicable)

4.1. of curriculum	Fundamental notions of General Psychology
4.2. of competences	

5. Conditions (where applicable)

5. Conditions (where applicable)				
5.1. to conduct the lecture	PowerPoint presentations, use of multimedia systems, and			
	projector			
5.2. to conduct the seminary	Equipped with the necessary apparatus for conducting			
	practical activities			

6. Learning outcomes

o. Learning outco	mes
	At the end of the course, the student must:
	1. know / understand the pathogenic role of psychological factors in the occurrence of psychosomatic
	diseases and disorders;
Knowledge	2. know basic theories and concepts regarding stress and psychometric instruments for its assessment;
	3. know the role of Health Psychology concepts in everyday clinical practice;



	<ul> <li>4. know the specific competencies of the clinical psychologist;</li> <li>5. master basic notions of General Communication and Medical Communication;</li> <li>6. personalize communication messages depending on the specifics of the disease and the patient;</li> <li>7. know the basic characteristics of some psychotherapeutic approaches and be able to make pertinent</li> </ul>
	recommendations in this regard.
	At the end of the course, the student must:  1. have the ability to identify the main psychopathogenic factors that require psychotherapy and counseling;  2. have the ability to identify the various psychological disorders and the main personality traits correlated with health and illness;
	3. be aware of the importance of certain relational skills specific to the role of a doctor in improving
Skills	therapeutic compliance;
	4. have an adequate communication repertoire in the relationship with the patient's family / relatives; 5. correctly, adequately and efficiently implement methods and techniques of patient-centered
	communication, in order to encourage the active involvement of the patient and establish relationships based
	on trust; 6. correctly evaluate the efficiency / inefficiency of therapeutic communication.
	At the end of the course, the student:
	1. Knows the main ethical values necessary for practicing the medical profession
	2. Cultivates research and autonomous learning skills, including within the formal framework of research
Responsibility	themes and projects;
and autonomy	3. Exercises his/her communication skills autonomously and responsibly, cultivates empathy and altruism;
	4. Plans and applies communication and relationship strategies within the professional team, as well as in
	the interaction with the patient and his/her family, assuming an active role in their medical education.

7. Course objectives (aligned with the learning outcomes)

7.1. General	Acquiring by the students of theoretical knowledge and practical abilities necessary for applying Psychology
objectives	in health-related interventions
7.2. Specific	Knowledge about the modalities through which various behaviors and cognitions influence health and disease.
<b>objectives</b> Understanding of the disease in its triple dimension: biological, psychological and social. Knowledge	
	the main types of psychotherapeutic interventions, their place and role in the general treatment plan, as well as
	about the distinct role of the clinical psychologist in the therapeutic team

#### 8. Contents

8.1. Lecture	Teaching methods	Observations
<b>1.</b> Medical Psychology: field of interference between Medicine and psychosocial sciences Health Psychology, Psychosomatics, Behavioral Medicine, Clinical Psychology: similarities and differences. The role of the clinical psychologist in the hospital environment. Behavioral traits (A,C,D) related to an increased susceptibility to the disease. Protective and risky cognitive styles. Orientation of the clinician confronting a behavioral disorder. The main research methods in Medical Psychology.		2 hours
2. Mental stress (1) Definition. Stressors. Theoretical models of stress (classical vs. modern understandings). Stressors: types, particularities of psychological stressors compared to other stressors. Holmes and Rahe Major Life Events Scale. The relativity of perception and evaluation (appraisal) of stressors. Hormonal correlates of stress. The positive role of endorphins.		2 hours
3. Mental stress (2) Various perceptions of stress: the difference between "eustress" and "distress". The pathogenic impact of stress. The concept of allostatic load. The helplessness-hopelessness syndrome (Seligman). Functional and dysfunctional coping strategies. Antistress programs and strategies: effectiveness, cross-cultural validity.		2 hours
4. The multifaceted approach to the disease from the perspective of Health Psychology Conceptualization of the disease: models (biomedical, psychological, bio-psycho-social). Social and cultural aspects of the disease. The role of social support. Theoretical models regarding attitudes towards illness and treatment (the HBM, TRA, TPB, Leventhal models). The practical usefulness of knowing these models in the relationship with problematic / difficult patients. Individual variables that influence disease risk and disease behavior.	Interactive teaching, according to the syllabus, examples of	2 hours
<ul> <li>5. Psychosomatic disorders and diseases</li> <li>Similarities and differences. Various explanatory models of the pathogenesis of psychosomatic diseases (classics: Alexander, Cannon, Pavlov; modern approaches). Clinical examples. The modern therapeutic approach to psychosomatic disorders and diseases.</li> <li>6. Pain, a psychologically critical symptom</li> </ul>	clinical cases, including with the help of multimedia software	2 hours



General aspects (types of pain, causes of pain). The role of psychological factors in the production and intensification of pain (e.g., depression, anxiety). The particularities of pain syndromes in chronic/incurable diseases. Psychological interventions to reduce pain	(Prezi <sup>®</sup> , Powerpoint <sup>®</sup> ).	2 hours
(hypnosis, relaxation, guided imagery).		
7. Medical communication (1)		
Doctor-patient relationship. The presumed statuses and roles of the doctor and the patient.		2 hours
Ethical aspects. Communication: functions, principles, component elements, types of		
communication (verbal, non-verbal).		
8. Medical communication (2)		
Different types of anamnesis and their usefulness. Doctor's skills to increase the efficiency of		2 hours
communication (active listening, empathy, assertiveness). Ways to increase the		2 Hours
communication skills of medical personnel.		
9. Medical communication (3)		2 hours
Communication according to age, gender, social status, cultural affiliation. Ways of		
communicating bad news to the patient.		
10. Medical communication (4)		
Communication with problematic patients (e.g., anxious, depressed, aggressive, with		
personality disorders) - general principles. Specificity of communication with the patient's		2 hours
family. Ways of doctor-family cooperation (e.g., engagement of the family in the treatment		
plan, communication of bad news).		
11. Consequences of doctor-patient communication / lack of communication (1)		
Burnout syndrome in medical personnel. Iatrogenicity (e.g. psychiatric comorbidity induced		2 hours
by the doctor, mental drug addiction). Adherence vs. compliance. Psychological factors that		
influence them (e.g., in chronic diseases).		
12. Consequences of doctor-patient communication / lack of communication (2)		
Informational contagion. Information balance from authorized / unauthorized sources. The		
perceived quality of life of the patient and his family. The balance between gains and losses.		2 hours
The placebo, pseudoplacebo, and nocebo effects. Factors that influence their occurrence,		
importance in the clinical environment.		
13. Psychotherapy (1)		
Definitions, classification and indications of psychotherapy. Behavior modeling: from		2 hours
theoretical principles to counseling and psychotherapy. Psychoanalysis (definition, theoretical		
bases, indications, efficiency).		
14. Psychotherapy (2)		
Cognitive-behavioral psychotherapy (definition, theoretical bases, indications and efficiency).		2 hours
Relaxation and hypnosis techniques (definition, theoretical bases, indications and efficiency).		
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#### RECENT BIBLIOGRAPHY

- 1. Popa-Velea, O., Diaconescu, L.V.
- "Health Psychology and Medical Communication" (course handouts). 2023, Bucharest: Carol Davila Publishing Press
- 2. Popa-Velea, O. (Ed.). Diaconescu, L.V., Mihăilescu, A.I., Jidveian Popescu, M., Truțescu, C.I., Ionescu, C.G., Stan, S., Pană, M.
- "Health Psychology and Medical Communication". 2020, Bucharest: Carol Davila Publishing Press.
- 3. Popa-Velea, O. "Behavioral Sciences in Medicine", 2015, Bucharest: Carol Davila Publishing Press
- (volume 1) pp.11-35, 43-56, 145-154, 160-167, 170-184, 189-202, 206-213, 236-247;
- (volume 2) pp.422-471, 474-485, 487-499, 533-542, 544-562.
- 4. (OPTIONAL) French, D., Vedhara, K., Kaptein, A., Weinman, J. "Health Psychology" (2nd Edition). 2010, London: BPS Blackwell.
- "Illness-related cognition and behavior" (pag.149-161);
- "Symptom perception and help seeking" (pag.162-174);
- "Adherence to advice and treatment" (pag.175-188);
- "Social support" (pag.283-293).
- 5. (OPTIONAL) Taylor, S., Stanton, A.L. "Health Psychology" (11th Edition), 2018, London: McGraw Hill.
- "Stress" (pag. 120-143)
- "Coping, resilience and social support" (pag.144-164);
- "The management of pain and discomfort" (pag.209-226).
- 6. (OPTIONAL) Du Pré, A., Overton, B.C. "Communicating about health: Current issues and perspectives" (6th Ed.), 2020, New York: Oxford Press.
- "Patient-caregiver communication" (pag.40-62);
- "Patient perspectives" (pag.63-78);
- "Care-provider perspectives" (pag.79-101).



## 7. (OPTIONAL) De la Torre-Luque, A., Gambara, H., López, E., Cruzado, J.A. (2016).

Psychological treatments to improve quality of life in cancer contexts: A meta-analysis, International Journal of Clinical and Health Psychology, 16: 211-219.

#### 8. (OPTIONAL) Mishelmovich, N., Arber, A., Odelius, A. (2016).

Breaking significant news: The experience of clinical nurse specialists in cancer and palliative care. European Journal of Oncology Nursing, 21: 153-159.

Nursing, 21: 153-159.	Teaching	Observations
8.2. Seminary	methods	Observations
Seminary 1. Health Psychology: field of interference between Medicine and psychosocial		
sciences		
The role of Clinical and Health Psychology (case discussion where the role of the clinical		2 hours
psychologist is important).		
Example questionnaires and projective tests. Discussion of advantages and disadvantages,		
conditions of application.		
Cognitive traits with health implications. Immunogenic traits: self-efficacy, locus of control,		
robustness, coherence, self-esteem, optimism. Disimmunogenic features; anxiety, depression,		
neurosis. Behavioral traits (A,C,D) related to an increased susceptibility to the disease.		
Practical examples.		
Seminary 2. Mental stress (1) Stressors. Clinical case presentation illustrating the impact (cumulative, individual) of		
stressors. Clinical case presentation mustrating the impact (cumulative, individual) of stressors.		
Presentation of experimental paradigms demonstrating stress reactivity.		2 hours
	Interactive	
Ways of evaluating the stressful load of life events. Discussion of Holmes-Rahe Scale / other similar instruments.	teaching using	
The concept of allostatic load – methods of testing.	psychological	
Seminary 3. Mental stress (2)	tests, case	
Defensive mechanisms - presentation, discussion, examples.	presentations,	
Coping strategies - presentation, discussion, examples.	literature data,	2 hours
Coping strategies - presentation, discussion, examples.  Coping strategies in the academic environment - presentation, discussion, examples.	including	2 110013
Antistress programs and strategies - presentation, discussion, examples.	multimedia	
Seminary 4. The psychological impact of the disease	use	
Psychological reactions of the patient to the disease: regression, evasion, informational	(Powerpoint®)	
contagion, non-productive use of the disease - presentation, discussion, clinical examples.	()	2 hours
Individual and psycho-socio-cultural variables that influence the attitude towards the disease		
and treatment (age, sex, socio-economic status, social support, cultural factors). The role of		
social support. Discussion, clinical examples, practical applications.		
Seminary 5. Psychological connotations of somatic illnesses		
The psychological-somatic-psychological vicious circle - discussion, examples.		
Psychosomatic disorders and diseases: similarities and differences. Clinical examples.		2 hours
Historically interesting models of the pathogenesis of psychosomatic diseases (Alexander,		
Cannon, Pavlov). Modern approaches - presentation, discussion.		
Seminary 6. Psychological correlations of pain		
The role of psychological factors in the production and intensification of pain). Psychological		
interventions to reduce pain (hypnosis, relaxation, guided imagery) (clinical case example).		2 hours
Chronic/incurable disease and pain (1h).		
Practical recovery session (1h).		
Seminary 7. Medical communication (1)		
The presumed statuses and roles of the doctor and the patient. Examples, management of		
possible collisions or misunderstandings of status and role.		2 hours
Ethical aspects in the doctor-patient relationship. Discussions and examples.		
Types of communication (verbal, non-verbal). Discussions and examples.		
Seminary 8. Medical communication (2)		
Doctor-patient communication: particularities, different types of anamnesis and their		
usefulness (discussion, clinical examples). General principles of effective communication:		2 hours
empathy, active listening, assertiveness. Exemplification of ineffective / effective verbal /		
non-verbal communication (role play, video materials).		
Seminary 9. Medical communication (3)		
The HBM, TRA, TPB, Leventhal, Prohaska & DiClemente models regarding the attitude		
towards illness and treatment: examples, implications in medical practice.		2 hours
Communication according to age, gender, social status, cultural affiliation.		
Ways of communicating bad news to the patient.		



Seminary 10. Medical communication (4) Communication with problematic patients (e.g., anxious, depressed, aggressive, with personality disorders). Identification of behavioral problems with the help of psychometric instruments. Clinical examples.  Peculiarities of communication with the patient's family - discussions, clinical examples.  Engaging the family in the treatment plan - discussions, clinical examples. Ways of communicating bad news to the family - discussions, clinical examples.	2 hours
Seminary 11. Consequences of doctor-patient communication / lack of communication (1).  Burnout syndrome in doctors. Description of symptoms, discussion of clinical implications, presentation of methods of diagnosis, prevention and treatment (individual and group – e.g., Balint group).  Adherence vs. compliance. Psychological factors that influence them. Examples in certain chronic diseases (TB, asthma, hypertension).  Iatrogenicity (e.g. psychiatric comorbidity induced by the doctor, mental drug addiction).  Clinical case exemplification, discussion of implications.	2 hours
Seminary 12. Consequences of doctor-patient communication / lack of communication (2).  Informational contagion. Information balance from authorized / unauthorized sources.  Presentation, discussion implications. The perceived quality of life of the patient and his family. The balance between gains and losses. Presentation of assessment and improvement methods. Placebo, pseudoplacebo, nocebo effects. Clinical case exemplification, discussion of implications.	2 hours
Seminary 13. Psychotherapy (1).  Difference psychological support – counseling – psychotherapy. Clinical examples.  Psychoanalysis (definition, theoretical bases, indications, efficiency). Practical applications, discussion of clinical cases.	2 hours
Seminary 14. Psychotherapy (2) Cognitive-behavioral psychotherapy (definition, theoretical bases, indications and efficiency). Practical applications, discussion of clinical cases. Rogersian psychotherapy (definition, theoretical bases, indications and efficiency). Practical applications, discussion of clinical cases. Relaxation and hypnosis techniques (definition, theoretical bases, indications and efficiency). Practical applications, discussion of clinical cases. Seminar recovery session (1h).  RECENT RIBLIOGRAPHY	2 hours

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#### 9. Evaluation

Activity type	9.1. Evaluation criteria	9.2. Evaluation methods	9.3. Percentage in the final grade
9.4. Lecture	Knowledge of theorical notions taught at the course	Written exam: 50 questions (one correct variant out of five)	90%
9.5. Seminary	Knowledge of the practical applications exemplified at the practicals	Written exam with the teaching assistant: 15 questions (one correct variant out of five)	10%
	Attendance at the seminar	Fulfilling the criterion of min.70% attendance	
9.6.Minimum performance standard			
Correct answer at min.50% of exam questions and passing the practical exam			

Date of filing 06.10.2025

Signature of the course

**Holders** 

Professor Dr.

Ovidiu Popa-Velea

Asssoc. Professor Dr. Liliana Veronica Diaconescu

Senior Lecturer Dr.

Alexandra Ioana Mihăilescu

Signature of the seminary

holders

Assoc. Prof. dr. Liliana Veronica

Diaconescu

Senior Lecturer dr. Alexandra Ioana

Mihăilescu

Teaching Assistant PhD Candidate

Dayeh Iulia Irena

Date of approval by the Department Council:

Signature of the Department Director Prof Dr Dana Galieta Mincă