



Medical Section of the
School of Spiritual Science
at the Goetheanum

International Core Curriculum
for medical student's
and physician's training
in Anthroposophic Medicine

Adopted by the
International Conference of the Boards
of Anthroposophic Doctors' Associations

Goetheanum, September 19, 2017



International Core Curriculum

Postgraduate Medical Training in Anthroposophic Medicine

1. Preamble

Anthroposophic Medicine builds on established scientific medicine and natural science. Anthroposophic Medicine augments this methodology through the use of a Goethe-oriented phenomenology and the anthroposophic methods developed by Rudolf Steiner. In particular, it applies to the interaction of body, soul and spirit of the human being. This approach contributes to the fields of diagnosis, therapy, prevention and public health. Fundamental goals are the healing of the patient, maintenance

of health and prevention of disease, particularly by stimulating the patient's own activity and salutogenetic potential. The human being is understood as continuously evolving, both as an individual and as a part of humanity. Anthroposophic Medicine emerged in the beginning of the 20th century inaugurated by the physician Ita Wegman in cooperation with Rudolf Steiner and is continually developing, through clinical practice and scientific research.

2. Postgraduate physician training in Anthroposophic Medicine: Competences of the anthroposophic physician

After post-graduate training in Anthroposophic Medicine, physicians should be able to

- empathetically establish a doctor-patient relationship based on dialogue, in which they perceive the patient as an individuality in his/her particular social environment
- take into account current anthroposophic-medical knowledge and practice in diagnosis and therapy
- establish a differentiated evaluation of the bodily, vital, emotional, mental and spiritual dimensions (also called the human fourfold nature below), taking into account the patient's biography and arriving at an individualized, multidimensional diagnosis
- based on this identify the patient's individual needs for therapeutic interventions
- design a therapy plan based on this that appropriately takes into consideration the patient's bodily, vital, emotional, mental and spiritual aspects, as well as resources
- include the intentions and preferences of the informed patient in diagnostic and therapeutic decision making, avoiding all unnecessary procedures and treatments which can weaken the patient's own activity and self-healing capacity
- take into account the spiritual dimension of the human being in the treatment plan and where appropriate, possible and desired also discuss this with the patient
- treat the most common diseases encountered in general and specialist practice by means of or including anthroposophic medications and therapies communicate appropriately and collaborate effectively in a therapeutic team with colleagues, nurses and therapists
- accompany, evaluate and adapt the therapy to the course of the illness
- document the course of the anthroposophic medical treatment, including mental, emotional and spiritual aspects
- reflect on own actions and deal with own mistakes
- develop a connection with nature and the cosmos, as well as with the substances at the origin of important anthroposophic medications
- independently pursue a path of medical-spiritual development
- explain the scientific foundations and research methods of Anthroposophic Medicine and independently search the anthroposophic-medical literature



3. Content of the training

1. Anthroposophic anthropology

- The fourfold nature of the human being
- The development of the members of the human fourfold nature over a lifetime
- The functional threefold nature of the human being and interaction of threefold and fourfold nature
- Polarities in the human constitution
- Spiritual dimension of the human being

2. Nature, cosmos and mankind

- Minerals/metals, plants and animals
- Goethean observation as epistemological method
- The four classical elements ("earth", "water", "air", "warmth")
- The tria principia ("salt", "sulfur" and "mercury")
- The seven life processes
- The relationship between cosmos, earth and the human being

3. Salutogenesis and pathogenesis

- Physical, mental and spiritual health
- Central pathophysiological processes:
 - Acute and chronic inflammation; allergies and autoimmune diseases
 - Degenerative and oncologic diseases
 - Disorders of early development and living with disability
- An extended, anthroposophic understanding of central organs and systems, such as the:
 - heart and circulatory system
 - upper and lower respiratory tract
 - gastro-intestinal tract, liver-gall bladder system
 - genitourinary system
 - endocrine system
 - nerve-sensory system
 - immune system
 - musculoskeletal system (spine, joints, muscles and ligaments)
- Treatment principles using the example of common disease presentations
- common psychiatric diseases, in particular anxiety, sleep and depressive disorders

An important learning goal is that the anthroposophic physician should be able to treat the most common medical conditions in his/her country and his/her discipline by means of or including appropriate anthroposophic-medical methods.

4. Methods in Anthroposophic Medicine

- Extended medical history, including the patient's biographical development
- Assessment of the state of the patient's four-

fold nature and seven life processes

- Determining the patient's resources and areas in need of therapeutic intervention
- Identifying appropriate medications and therapies
- Planning and implementation of an individualized integrative therapy
- Following up, evaluating and adjusting therapy
- Basic capacity in writing and presenting an anthroposophic medical case report

5. Therapies in Anthroposophic Medicine

- Principles of actions of anthroposophic medicines
- Basic knowledge of anthroposophic medicine preparations and pharmaceutical production processes
- External nursing applications and anthroposophic physiotherapies
- Knowledge of and basic experience with anthroposophic therapies, such as eurythmy therapy and artistic therapies
- Doctor-patient communication

6. Social, ethical and spiritual development

- The anthroposophic path of medical-spiritual development (fundamentals, exercises, meditation)
- The doctor-patient relationship: comprehensive observation, communication and patient counseling, taking into account the patient's social context
- Shared decision-making with patients and their relatives based on the concept of the human being as a spiritual and developing being
- Professional and interprofessional teamwork
- Dealing with medical errors
- Time management
- Financial aspects of medical practice

7. Research and science

- Knowledge of scientific foundations and research methods in Anthroposophic Medicine
- Ability to study the founding texts of Anthroposophic Medicine
- Knowledge of and competence in using the anthroposophic-medical literature



4. Learning objective

The physician trained in Anthroposophic Medicine is able to treat patients on the basis of anthroposophically extended conventional medicine. In particular, he/she demonstrates advanced competence in establishing a trusting doctor-patient relationship,

anthroposophic anamnesis, examination and diagnosis. He/she is able to establish treatment goals and an individual treatment plan and implement, evaluate and – when needed – adapt the treatment.

5. Requirements

In order for trainees to acquire the necessary competencies and reach the learning objective, the postgraduate training in Anthroposophic Medicine includes different components that need to be documented in a portfolio.

CONTACT TIME: participation in accredited courses and modules¹ within the framework of the core curriculum for Anthroposophic Medicine, with a certificate of completion. At least **250 hours** of contact time of three different **levels of continuing medical education (CME)** are required.

INDEPENDENT WORK mainly concerns the time spent in preparing and following up on contact time in the seminars, as well as independent work on the content of the seminars. Independent work is necessary to meet the requirements of curricular CME and it is expected. The independent work (**250 hours**) is confirmed by adequately fulfilling the CME objectives during the 250 hours of contact time.

MENTORED PRACTICE HOURS refers to the time when the trainee is already practising medicine as a physician and is applying Anthroposophic Medicine while doing so (outpatients/inpatients).

250 hours of mentored practice are apportioned as follows:

- **200 hours** of treating patients, including preparation, follow up, research, etc., with the work documented in the portfolio.
- A further **50 hours** of direct contact with the mentor, in the form of:
 - Individual mentor contact (in person, by telephone, email)
 - Grand rounds (the AM proportion, while working at a hospital)
 - Discussion of inpatient/outpatient cases

(among physicians and interprofessionally)

- Attendance in a physician's practice
- Case seminars (supervised patient-oriented small group work)
- Patient-oriented peer discussions (AM council)
- Patient-oriented discussion in a forum of AM experts

Any certified anthroposophic physician can serve as a mentor. The mentor attests to the 200 hours of independent work and 50 hours of contact time with his/her signature. Over time it is possible for the trainee to choose several mentors.

PROJECT WORK (150 hours; Guideline for the total length: 30,000 characters in the form of 1-3 papers or an equivalent)

The project can also be a publication. The topic is related to Anthroposophic Medicine and the trainee's current continuing medical education (CME). The paper shows the trainee's ability to independently work with the fundamental elements of AM. Examples of what it can contain are:

- An elaboration of specific case work
- A characterization of a disease pattern
- A characterization of a medication or non-medical therapy

It can also consist of one or several papers published during the CME period.

The paper will generally be written during the physician's curricular CME studies or directly afterwards, then presented to the director of the curricular CME program, and as part of the examination to become a physician of Anthroposophic Medicine.

3 CASE STUDIES (100 hours)

Each case study is individual and this can also be reflected in the way that it is portrayed. The three case studies should show that the applicant is familiar with the fundamentals of Anthroposophic Medicine and can independently make a diagnosis in the sense of Anthroposophic Medicine, develop a therapy and

¹ Courses can be counted if they are accredited by the Medical Section or the association of anthroposophic physicians in the appropriate country. In Germany it is necessary for the course to be accredited by the Academy of the Association of Anthroposophic Physicians in Germany.



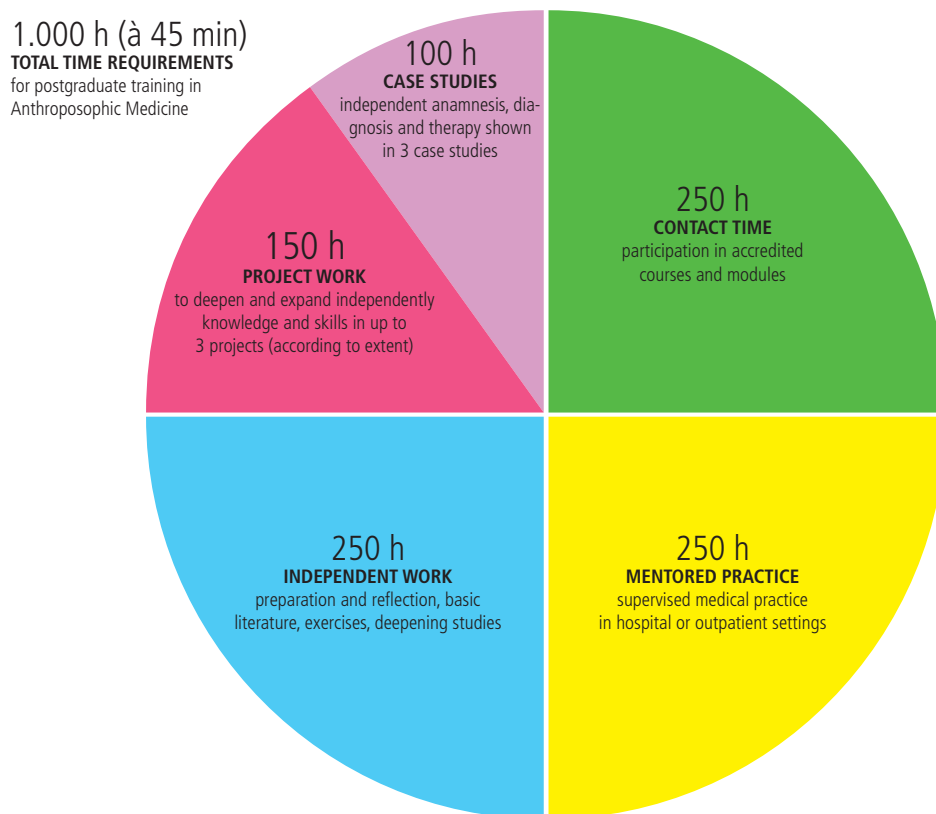
evaluate the course of the illness. – It should include information about the following aspects:

- Medical history
- Current findings
- Diagnoses
- Anthroposophic-anthropological aspects in the sense of Anthroposophic Medicine
- The elements, diagnosis of the members of the human fourfold nature, functional threefolding, etc., to the extent discernible (possibly with references)
- The need for healing and finding the therapy

(the reasons for the choice of therapy and a description of a few aspects of the medicine chosen (possibly with references))

- The treatment and the course of the illness (possibly with an evaluation of efficacy)
- Possible prognosis

The complete postgraduate training in Anthroposophic Medicine thus requires **1000 hours** (1 h = 45 min.). (see figure below)



6. Examination to become an anthroposophic physician

The basic condition for certification as an anthroposophic physician is a completed medical training (registration) and evidence of at least two years of practical clinical work at a hospital or a medical practice.

The examination generally lasts for about 60 minutes and covers:

1. The perception and appreciation of what has been achieved so far, particularly the project work.
2. A demonstration of the ability to use Anthroposophic Medicine to independently treat patients,

work independently with the fundamental concepts, and deal critically with the possibilities and limits of Anthroposophic Medicine.

3. An oral explanation of at least one of the case reports in the physician's portfolio.

The examiners are at least two certified and experienced anthroposophic physicians, who are mandated by the appropriate national physicians' association or the relevant committee within the Medical Section to conduct the examination. One of the two physicians can also be a mentor / one of the mentors.



7. Validity

This International Core Curriculum of Anthroposophic Physicians' Trainings was adopted by the International Conference of the Boards of Anthroposophic Medical Associations on September 19, 2017 and comes into force on October 1, 2018. The "International Criteria for Certification as an Anthro-

posophic Physician" (2003) and the "International Guidelines for Training and continuing medical education of Anthroposophic Physicians" (2007) expire on September 30, 2018.

8. Transitional arrangement

Physicians who started their Anthroposophic Physician's Training prior to October 1, 2018 can still request to be certified as an Anthroposophic Phy-

sician in accordance with the "International Criteria for Certification as an Anthroposophic Physician" (2003).