

Empathic action: the practice of compassionate care Action empathique : la pratique de soins empreints de compassion

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The first few years of medical training are notorious for inundating students with hundreds of hours of content on everything from cell biology to tactfully delivering bad news. As a first-year medical student, I experienced this overload of information and struggled to parse out what skills and knowledge were the most important to retain and practice, particularly when it came to compassionately caring for patients. In class, we were taught to ask patients about their emotional experiences and use empathic statements, but the most impactful lesson I learned about compassionate care came from an experience I had in extracurricular research. There I learned about “empathic action”: the process of listening to a patient’s emotional experience and not just hearing them but also acting on the information by changing management and individualizing care. In this article, I hope to demonstrate the importance of empathic action and its profound impact on patients and the physician-patient relationship.

I was introduced to empathic action when I attended a focus group and heard the perspective of two patients on the topic of compassionate care. Both patients suffered a traumatic brain injury and were experiencing lingering symptoms years afterwards. They shared similar woes of being bounced between several practitioners without any answers or relief. As these patients shared their stories, tears welled up in their eyes. One even described a feeling of hopelessness so profound that she started to consider her life no longer worth living.

When asked to describe the best care they received, both patients recounted their experience with one physician. This physician picked up on cues that there was more to their suffering than physical symptoms and gave them an opportunity to share their struggles by asking about their lives apart from their physical symptoms. Because of this, the patients were able to voice their feelings of hopelessness, which allowed their physician to create a management plan that met their holistic needs.

In the case of one of the patients, this involved listening to the patient’s story of despair due to unresolved pain and invalidation by previous physicians and simply performing a physical exam. The patient reported this action by the physician as hugely validating of them and their struggles, especially considering being dismissed by previous practitioners. It also built trust as the patient felt their physician believed them and was there to actively help them get back to doing the things they loved. Based on the interview and exam, a treatment plan was eventually developed that addressed the patient’s physical and emotional pain and started them on the path to recovery. In this case, empathic action worked not only to progress the patient in their recovery journey, but also made the patient feel that their physician heard them and was a trusted ally working with them to achieve their goals.

I am fortunate to have learned about empathic action early in my medical training, as it has changed the way I plan to approach care in my future practice. I now understand that the compassionate care strategies I learned in the classroom, including using the FIFE framework and

empathic statements, are best received by patients when they are backed by action.¹ This action could involve anything from performing a physical exam, as with the above patient, to switching to phone appointments to relieve a patient's stress in finding childcare, to involving a spiritual care practitioner to guide a religious patient in choosing a treatment option. These kinds of actions would be hugely beneficial to a patient's experience but could only be implemented if their emotional needs were first elicited and considered. This is why I plan to practice the combination of empathy and action that defines empathic action in my future clinical practice. Empathic action will allow me to effectively address the holistic needs of my patients, while also building a strong, trusting physician-patient relationship.

While medical school taught me skills in empathy, hearing patient stories taught me how these skills are best applied in practice. This is through empathic action. I will use empathic action in my future practice to provide effective compassionate care to my patients while building a strong therapeutic relationship with them. Unfortunately, not all medical students may get a chance to have an experience like I did; however, I hope to be a role model of empathic action to inspire others and help improve compassion and patient satisfaction in the healthcare system.

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Reference

1. Brown J, Stewart M, McCracken E, McWhinney IR, Levenstein J. The patient-centred clinical method. 2. Definition and application. *Fam Pract.* 1986;3 (2), 75-79.
<https://doi.org/10.1093/fampra/3.2.75>