

Doctor Patient Communication: A Review

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Abstract:

Communication between patients and health professionals is seen as the core clinical function in building a therapeutic doctor-patient relationship, which is the heart and art of the medicine. Patients' satisfaction is strongly influenced by the quality of the communication that occurs. Effective

communication is the basis of mutual understanding and trust. This paper aims to raise awareness on the important issues involved in doctor-patient and inter-professional communication among the medical professionals.

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Introduction:

The word 'communicate' comes from the Latin, 'to impart, to share'.¹ It is the act by which information is shared between human. It is a mutual dialogue and through communication we relate and interact with other people.

The doctor-patient relationship is a complex one. The patient enters into this relationship usually in a distressed state and desires to be more comfortable, emotionally and spiritually relieved by the outcome of the interaction. The physician brings to the relationship a technical knowledge of organ systems and disease process, clinical experience, medical judgment and in most cases, empathy and understanding of the patients' needs and concerns.^{2,3}

Good communication encourages meaningful and trusting relationships between health care professionals and their patients.³ The ability to communicate competently with patients has been considered as a pre-condition of qualification for all health care professionals if they are to deliver patient care.^{4,5}

According to Tattersall communication is a vital part of care.⁶ A doctor's communication and inter-personal skills encompass the ability to gather information in order to facilitate accurate diagnosis, counsel appropriately, give therapeutic instructions and establish caring relationships with patients.^{7,8} These are the core clinical skills in the practice of medicine, with the ultimate goal of achieving the best outcome and patient satisfaction.⁹

There is increasing awareness among doctors, patients, researcher and educator that effective doctor patient communication is important in achieving desired health outcome.^{9,10} As communication skills are important qualities of a doctor, it has been shown that patient satisfaction, compliance, recall and understanding of medical advice and health outcome are largely influenced by the quality of communication between patient and doctor.^{9,11} Doctors need to learn essentials of good communication more than other professionals because patients are humans with sensitive needs.

Benefits of effective communication:

Communication is essential for all aspects of life. It is important not only to professional – patient interaction but also within the health care team.⁴ The 3 main goals of doctor-patient communication are creating a good interpersonal relationship, facilitating exchange of information and including patients in decision making.^{10,12,13}

Benefits of effective communication are.^{3,8,12-15}

For patients:

- Patients' problem can be identified more accurately
- Helps patient to recall information and comply with treatment instruction. Thereby, providing patient satisfaction
- Increase patient understanding of treatment
- Increase compliance which leads to improved health and better outcomes
- Promote better emotional health for resolution of symptoms and pain control
- Improve quality of care by involving patient in decision making

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For doctors:

- Improve doctor patient relationship. The doctor is better able to seek the relevant information and recognize the problems of the patients by way of interaction and attentive listening
- Good doctor-patient communication has the potential to help regulate patients' emotions and allow for better identification of patients' needs, perceptions and expectations
- Relieve doctors of some of the pressures of dealing with the difficult situations encountered in the emotionally demanding profession
- Enhance job satisfaction
- Reduce the incidence of clinical error

Expectations of patient:

'The patient must feel at all times that they are treated with respect'.¹⁵ Common expectations patients have for their physicians are: ^{5,12,13-21}

Primary expectation-

- Clinical competence

Secondary expectations-

- Professional
- Respectful
- Polite
- Sincere
- Caring attitudes
- Effective communication skills- verbal and non verbal

Medical interview:

The medical interview is the usual communication encounter between the doctor and the patient. It can be classified according to the purpose of the interview into 4 types:

History taking

Consultations

Breaking bad news

Obtaining informed consent

Consultation:

Research over the past few decades has shown that most patients want to be informed about their illness. Patient's

primary goal in seeking medical care is to obtain information about their condition or illness as well as treatment option and outcome.^{5,6,16,22} Patient's satisfaction is strongly influenced by the quality of the communication that occurs. Compliance of the patients with treatment, recall and understanding of medical advice and health outcomes is significantly related to satisfaction with information provided by the doctors. It is therefore important to communicate information and provide explanation to patient and families and convey proper concern to those who seek help.^{5,6,13-15} Studies also showed that patient's dissatisfaction can seriously reduce their compliance with their treatment regimen. It also triggers patient doubts about the competence of their physician.^{14,15}

Complaints about doctors and health services are commonly originate because of bad attitude and behavior of doctors, poor communication or because patients expectations have not been met, or both.^{3,18}

In medical consultation, patients are likely to retain only 50% of what a physician has told them. Furthermore, only about half of the information they received is remembered correctly. So, we can expect patients to recall correctly about 25% of what we have told them.^{4,6} Doctors' way of counseling plays a major role in retention of information.²²

*It demands that communication be understandable to the patient, not only when it is delivered but also after the patient has left the hospital or doctors room.*⁶

Breaking bad news: Breaking bad news is one of a physician's most difficult duties. Bad news is any news that seriously and negatively changes the patient's view of his or her future. Bad news is the gap between patient's expectation and reality of patient's medical condition.²³ One cannot tell how bad any bad news is and how badly it may affect the patient's life unless doctors have already some idea of what the patients perception and expectation of the situation, *therefore before you tell ask* (find out what the patient know or think).

During breaking the bad news, SPIKES model can be used:^{23,24}

S- Setting: the right physical contact of the interview (sitting down, body language, eye contact etc.) and listening skill (open questions to start with, not interrupting, facilitation etc.)

P- Patient perception: Ask patient to say what he or she knows or suspects about the medical problem and as patient replies listen and accept denial by patient.

I- Invitation: What he or she would like to know?

K- Knowledge: Provide information by using easy language, check understanding and respond to patient.

E- Explore emotions and empathizes: Identify the emotions and the cause of emotions, respond by reflecting back to the patient what he or she said. Empathic response is a technique or skill- not a feeling.

S- Strategy and summary: Involve the patient's support system (family, friends etc.), summarize and clarify the major questions.

'Doctors put too much emphasis on *curing* and not enough on *caring*. Curing costs millions but caring comes from the heart and soul and costs nothing'

People are more concerned with how doctors will communicate with patients, whether they show caring attitude and whether they are board certified. There are many varying ideas about what doctors are like, what they should be doing and what people think of them. In spite of that all people expect that doctor should meet the society's health needs and people's expectation and practice highest quality of medical care.²⁵

Communication skills required for the consultation:

In all doctor patient interactions, a variety of communication skills will be required for different phases of the consultation.^{3,6,7,8,26-31} These are:

Establish a rapport: Developing rapport is important in doctor- patient relationship as it enables the patient to feel understood, valued and supported.

Identify the reasons for the consultation

Gather information

Structure the consultation.

Build relationship (empathy, body language, active listening)

Provide appropriate information

Check understanding

The main responsibility for effective communication during consultation rests with the doctor.³

Medical interviews must, of course retain their emphasis on active listening.¹⁹

During listening:

- Choose an appropriate physical environment
- Remove distractions
- Make eye contact
- Consider expression and gesture
- Allow patient to talk uninterrupted as this is the key technique in facilitating the interview
- Value others opinions, concerns- shows you mean it
- Summarize, so you understood
- Check on feeling as well as content
- Avoid closed ended questions- allow to expand

Closing the interview:

At the end of interview, it is important for doctor to establish that both doctor and patient understand what occurred and what the plan is going to be.¹⁵

Factors to be considered during communication:

One must be aware of the following factors during communication.^{3,10,11,20,21}

- What we say to each other and how we say it, matters enormously
- An *empathetic* style is sensitive necessary involvement with patients' experience that leads to shared decisions
- Requires planning and thinking in term of outcomes
- Demonstrate dynamism which requires flexibility, responsiveness and involvement
- Follows the helical model (a spiral fashion so that communication gradually evolves through interaction
- Effective communication enables us to become better doctor clinically and effective communication improves patient care and disease outcome
- The main responsibility for effective communication during consultation rests with the doctor
- Developing communication skills is a continuing process in the professional carrier

How to teach communication skills:

There is substantial evidence that communication skills can be taught and learnt.^{1,3,32,33,34} Learning involves

change of behavior. To be effective, teaching should include:

- Basics of human communication
- Principles of managing the clinical interview and practice of clinical interview
- Patient doctor communications
- Evidences of current deficiencies in communication, reasons for them and the consequence for patient and doctor
- An evidence base for skills needed to overcome these deficiencies
- A demonstration of the skills to be learnt on real or simulated patient
- Video demonstration
- An opportunity to practice the skills under controlled and safe conditions
- Small group discussion
- Role play
- Constructive feedback on performance and reflection on the reasons for any unconstructive behaviors

Barriers to effective communication:

There are number of barriers to communication - ranging from personal traits to organizational constraints.^{5,9,14,15}

Personal:

- Lack of skill and understanding of structure of conversational interaction which encourages two way communication
- Inadequate knowledge of or training in other communication skills including body language and speed of speech
- Non appreciation of the importance of keeping patients adequately informed
- Negative attitude of doctors towards communication. Doctors always remain concerned to treat illness rather than focusing on the patients' holistic needs such as psychological and social well being
- Lack of time, uncomfortable topics, lack of confidence, concerns relating to confidentiality and work overload
- Lack of knowledge about the illness or treatment

- Inconsistency in providing information
- Language barrier
- Tiredness and stress
- Personality differences between doctors and their patients

Organizational:

Factors that contribute to and exacerbate poor communication are often related to the organizational constraints within which doctor work.

- Lack of time
- Work load
- Interruptions
- Lack of organizational support

Conclusion:

The most successful doctor-patient relationships are those in which both the patient and physician feel comfortable and confident in each other's ability to communicate. In order to deliver effective health care, doctors are expected to communicate competently both orally and in writing with a range of professionals. Therefore, it is essential to ensure that appropriate and effective training opportunities are available to medical students and doctors to develop and refine such skill in order to facilitate interaction with patient, their relatives and with the professionals.

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