

7+8

Doctor-Patient relationship (Part III)

Doctor- Patient Communication (I)

Barriers that prevent good Doctor- Patient Communication:

- Noise
- Busy Patient
- Too short time
- Language difficulty
- Verbal disagrees with non-verbal communication
- Doctor's assumption about patient.
- Patient biases
- Patients will 'turn off' before the message is complete due to:
- Lack of respect
- Lack of trust
- Vast difference in ideas and beliefs. (e.g; renal stone---- alcohol).

Doctor communication mistakes:

NOT introduce himself

NOT explain actions (biopsy)

NOT listen, or understand

NOT attend to nonverbal cues.(patient in delivery room)

NOT explore patient's feeling

NOT explore family and social background

NOT encourage questioning

NOT answer clearly

NOT ask open questions

NOT let patient talk spontaneously.

- Job contacts and interaction in the relationship between the doctor and his patient, or what is called (active positive communication):

This contact is made through the following methods: -

- Understanding and dealing with (body language), eye contact, and moving the head to believe the patient with no separation barriers between the doctor and the patient.
- Listen, rephrase and retrieve the topic.
- Make comments about the patient's presentation of his speech.
- Doctor show to his patient that he has listened and understood his complaint.

- The doctor sympathizes with his feeling of patient suffering (Sympathy).
- The doctor sympathizes with his patient by notifying him that he is the patient instead (Empathy).

Empathy is the highest degree of effective communication we (physicians) should reach.

Breaking Bad News(terminal illness)

BBN, is a communication skills, it need a learn and hard work .

(SPIKES) setup, perception, invitation, knowledge, empathy, strategy)

Robert Buckman's six step protocol for (BBN);

1- Getting started (setting for place and time)

- Privacy or with others?
- Body language-eye contact
- Be serious
- How are you feeling right now?
- Here 2 way affair

2- Finding out how much the patient knows?

What have you already been told about your illness?

(this reflect the emotional status)

Leave invitation if he declines

---- I have lung cancer

---- spot by x-ray

---- I have T2No adenocarcinoma

3- Findinknow (knowledg out how much the patient wants to)?

- Give gradual information
- Check for understanding
- What you prefer:

-No right answer---- only the big picture

- Or details

4- Sharing the information

- Decision on the agenda
- Diagnosis (other tests needed)
- Treatment (Optional)
- Prognosis
- Support or coping- (I wont leave you)

Give the information in small chunks

Be sure to stop between each item?

is he or she understanding

No long lectures

5- Responding to the patients feelings

Understand patient's reaction

(could you tell me a bit about what you are feeling?)

6- Planning and follow-through strategy

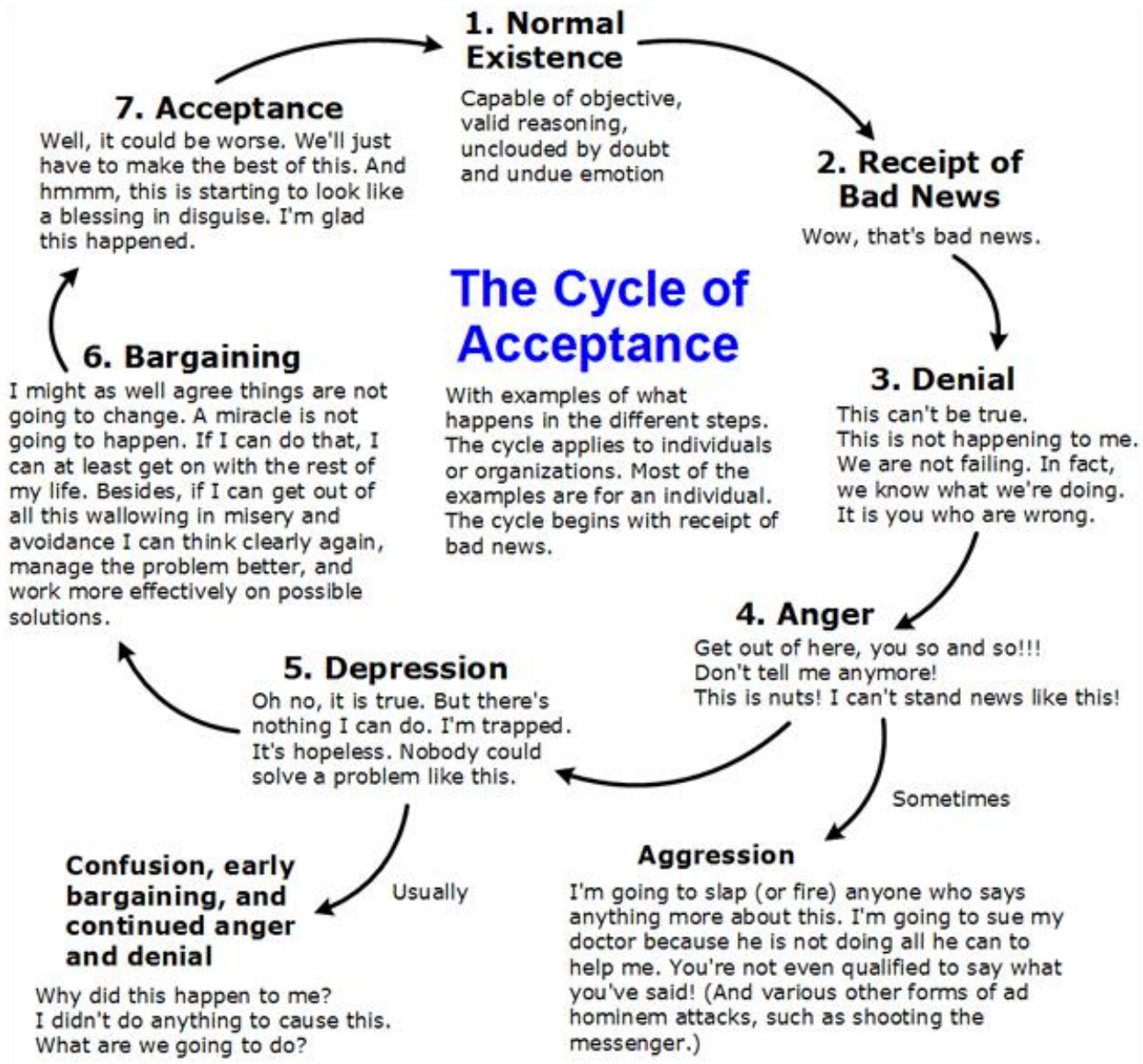
- (outline a step-by-step plan)
- Explain to patient each step
- be clear about your next contact
- if you would be off service; name the alternative doctor that will see your patient
- Give the patient a phone number to contact to medical caregiver if something arises before the

next planned contact.

Cycle of Acceptance in patients with deadly chronic diseases

The Cycle of Acceptance is a predictable cycle most people go through upon receipt of very bad news in his health, which includes an opinion that differs radically from one own.

Entering the cycle is unavoidable. How long it takes a patient or to complete the cycle is critical. The longer they're in it, the less likely they will ever fully complete the cycle and the less likely they will be able to deal with the problem wisely.



Phases of patient on BBN (Kubler Ross Model)

- 1- Shock: deep isolation, paralysis.
- 2- Denial: No, it can't be me! wrong Diagnosis.
- 3- Anger: why me?
- 4- Bargaining: with health staff.
- 5- Depression: more surgery, loss of weight and appetite.
- 6- Testing: seeking solutions for the remaining of his life.
- 7- Acceptance: struggle is over, diminish interest.