



Forgotten Art of Communication: Has Doctor-Patient Communication taken a Back Seat in Modern Day Medical Practice?

Author

Dr Promod Chandra Awasthi

Professor, Department of Hospital Administration, Armed Forces Medical College, Pune, India

Corresponding Author

Dr PC Awasthi

Professor, Department of Hospital Administration

Armed Forces Medical College, Pune, Maharashtra, PIN: 91-411 040

Email: promodca@yahoo.com, Mobile: 91-9717371929, Fax No: 91-20-26333065

Abstract

A good communication skill for a doctor is central to the profession of medicine. The well established fact is that hospital staff–patient communication starts immediately on arrival of patient to hospital till his discharge or on completion of the consultation in the doctor’s chamber or an investigation or procedure for which he has reported to the hospital. Modern medicine relies more on scientific biochemical and imaging techniques and diagnosis and the communication between the patient and the doctor, as used to exist earlier, has probably taken a back seat in contemporary medical practice.

Keywords: *Communication skill, Patient–doctor communication, Modern Medicine.*

Scenario

Beta, tumse kuchh poochoo? (‘Son, may I ask you something?’) I heard a feeble voice coming from the other side of the ward. As I turned my head, I saw it was coming from a thinly built, poorly nourished lady, in her late seventies perhaps, lying supine in the bed next to my mother’s in a tertiary care multi-specialty hospital in Delhi. She could barely move her body, except her head and right arm.

As informed by sister-in-charge of the ward, this lady was an old case of cerebral stroke developed six months back, leading to hemiplegia and consequently developed bed sores, probably due to lack of care at home, causing her immense pain as evident from her incoherent cries. Had been

frequently admitted to this hospital and once in a while visited by her family members during her admission.

‘Beta (son), since you are a doctor, I wanted to ask you something. Everyday in the morning, a team of six to eight doctors and nurses come at the side of my bed and they talk to each other in *angrejee* (English) for some time and some young doctors write something in their books. After that they just leave.’ She told me in her frail voice.

‘*Lekin beta, mere ko to koi kuchh batata hi nahin aur na kuchh poochhta hai ki mein kaisi hoon aur mujhko kya ho raha hai*’. (But son, nobody informs me anything nor do they ask me how I am and what is happening to me.)

Completely shaken by this conversation, I did not know what to say except excusing myself by saying in a low remorseful voice, almost apologizing, *aunty sab theek ho jayega* (Aunty, everything will be alright).

The key issue

With this anecdote, I wish to bring to the centre-stage a forgotten tenet of medicine i.e. good communication skill for a doctor is central to the profession of medicine. The well established fact is that hospital staff –patient communication starts immediately on arrival of patient to hospital till his discharge or on completion of the consultation in the doctor's chamber or an investigation or procedure for which he has reported to the hospital.

The first interaction takes place between the doctor and his/her patient, during a detailed history taking process, comprises of both aspects of communication i.e. non-verbal and verbal communication. The age old practice of physical examination skills of Inspection, Palpation, Percussion and Auscultation by the doctor has large role to play in non-verbal communication with the patient. Even checking pulse, holding hand by doctor or nurse etc play vital role in confidence building and establishment of rapport between the care provider and the patient. Sadly, this art & science of detailed history taking and physical examination is losing ground in the medical horizon.

Stewart M et al, as quoted by Shukla AK et al¹, in a review of 21 randomized controlled evaluations to study the impact of doctor-patient communication on the health outcome of patients, better communication was found to be associated with better health of the patients. "Better doctor-patient communication was shown to be associated with better emotional and physical health, higher symptom resolution, and better control of chronic diseases that included better blood pressure, blood glucose, and pain control".

It is perhaps a common thing to see that a sizeable proportion of patients cease taking their medicines

as they start getting better. Over the lifetime of a person, this may add up to large costs of consulting doctors and hospital admissions. It is appreciated that patients are more likely to follow the advice of doctors and take active participants in their care management with physicians who are frequently engaged in partnership-building and supportive talk². This relationship can only be fostered by effective communication between the patient and the doctor.

Communication may be important to forge an environment where the patient is able to trust their doctor fully³. It is important that the patient does not feel that the doctor hurried them or was only trying to mint money out of their illness by administering unnecessary treatment and unnecessary tests which are loathsome burden on patients⁴. Thus, may reduce the risk of medical malpractice or if the case be, the perception of medical malpractice.

Has the modern medical practice impacted this relationship?

Modern medicine has come a long way to a point where the information asymmetry between the health practitioner and the patient is grown too large to be overcome. Highly specialized treatments and tests can only be understood and administered by people trained at medical schools. Unlike alternative medicine, where the communication between the healer and the patient is usually perpetual and involves longer sessions (leading to ample communication), or is simple, common knowledge available in books (where contact between the two parties less important as the information asymmetry is too small or non-existent), the case of modern medicine is entirely different.

Modern medicine relies on scientific biochemical and imaging testing and subsequent diagnosis, which makes the communication between the patient and the doctor limited to a bare minimum, like telling the doctor about one's wellness and symptoms- the doctor should take care of the rest with the aid of scientific testing.

This equation works perfectly fine in a situation where the patient completely trusts their doctor or in a situation where the doctor is not likely to cheat the patient by administering unnecessary testing and treatment. Thus, patient-doctor communication becomes of utmost importance in modern medicine, despite the fact that, theoretically, it is not an important aspect of it.

Modern medicine places a lot of emphasis on the biomedical component and not so much on the psycho-social¹. It is important for the doctor to pay heed not only to the treatment of the medical condition of the patient but also to the emanating externalities like anxiety in the family due to very little information about the condition or about the treatment that is administered. If the patient finds the doctor indifferent, they may believe that the doctor is not doing everything in his capacity to help them. This can hinder the recovery process in more than one ways.

Indifferent or tacit behavior on the part of the practitioner (who may very well be administering the best treatment) may encourage the patient to switch to a new doctor due to a belief that the current doctor is not doing the job properly⁵. This may add to the associated cost of health by delaying the recovery process (or, in the worst case, lead to a deterioration of the patient's condition).

Lack of faith on a doctor who does not communicate enough with their patient may also delay the recovery process by causing perpetual anxiety on the part of the patient about their own well-being.

Despite its well-acknowledged importance, most medical schools prefer to work under the assumption that communication skills would come naturally to a health practitioner and refrain from active instruction on them. Thus most health professionals, despite their expertise in their area, have little to no formal training in communication skills.

Is there a way ahead?

Medical schools should integrate building of communication skills as a part of the core curriculum and lay emphasis on the importance of communication to the doctors of future. The journey from paternalism to partnership is under way and, although there is still some distance to go, many doctors have, at least, set off on the road⁶. Practicing doctors must become conscious of communication with their patients and must try to improve themselves by making use of the following tools:-

1. Reflecting on whether they sufficiently communicated with the patients.
2. Audio-taping their sessions with patients to work on bettering their communication skills⁷. Audio-taping may hide the non-verbal means of communication, which is as important as verbal.
3. Making a conscious attempt to not use medical jargon to the patients who, in most cases, would be laypersons.
4. Using patient-feedback forms to better analyse whether they are communicating better.
5. Enrolling with refresher course on communication skills⁷.
6. A study has shown that the patients' satisfaction with their doctors seems to rely strongly on their perceptions or evaluations of physicians' empathic communication⁸.

In India, till few decades back, health was usually relegated to the last of a person's list of priorities and most people only visited a doctor when handling an illness got completely out of their hands. With the exponential rise of incomes of the salaried persons in the recent years, and keeping with their consumerist lifestyles, more people have become conscious of their health. They have started believing in participative role in own medical care rather than submitting themselves as a plain passive customer. This has led to class of people who believe in preventive healthcare as well as regular check-ups, which has resulted in

an increase in demand of patient-centered doctors (i.e. doctors who invest more time with their patients) practicing modern medicine¹. Thus, a new focus of doctor-patient communication becomes imperative not only for its known benefits but to also keep up with the rising demand of such health consultants.

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