Effective communication in the doctor-patient relationship: An Indian context

Abstract: This article examines the doctor-patient relationship with special emphasis on communication. The article begins with personal experiences of clinicians breaking news of poor prognosis to patients and further elaborates on using effective communication as a tool to reduce the gaps, which are developing in the doctor-patient relationship. This article looks at simple steps in improving communication and how simple steps can cause great change on a larger Indian context. Lastly, it examines how breakdown in communication may be a possible cause of violence against doctors.

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Author: Reetobaan Datta, Student (MBBS Final Year Pt. I), Kasturba Medical College, Manipal.

Contact: [reetobaan@yahoo.com](mailto:reetobaan@yahoo.com); 9051138302; 656/1, Sarat Chatterjee Road, Kolkata: 711102.

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While I was in my Neurosurgery rotation in the third year of training, one of the challenges I recognised in this field was talking to patients about the possibility of an early death. There are hardly worse things imaginable for a human being to do than to impart to another that they have little time left on the clock.

I remember standing in the clinic witnessing sweat dripping down the brows of an experienced clinician talking to a father of three. The patient, a local artisan was the sole earning member of the family, had the responsibilities of taking care of an ailing father, children who were still too young to be employed. There was an expression of disbelief and an unnerving sense of helplessness.

When one takes the Hippocrates oath, one enthrals upon a journey where there are peaks of happiness yet the caveat of inability stands firm. In medical school, we are given dry leathery carcasses of bodies from which the soul has long expelled out. Yet, much like sheltered parents, our physician teachers often guard us against death and patients who can’t be saved.

This institutionalises a belief system of infallibility and hope. The real world isn’t so rosy-eyed. Understanding one’s own fallibility and capability are two of the most essential skills in Medicine, along with the ability to communicate this to the patient. This is as important as theoretical knowledge.

In an Indian setting, this is very evident in that most of the doctors who have a successful practice are great communicators. They may not be the best of students. Conversely, too, a lot of medical school toppers fall back in the patient care system due to the lack of communicability. Albeit, this is a trend than a rule.

What needs to be understood is that to err is only human. Surgical errors or errors in diagnosis are commonplace and most of the times still treatable. In Medicine, we do get second chances. However, the escape from communicating these errors is what leads to the vast amount of malpractice claims and violence against doctors that we see today1. No one wants to be lied to or deceived when it comes to the mending of their health.

Most patients, if told properly, explained their conditions, the limitations, prognosis and the challenges in treatment preoperatively or during the first few visits tend to be more understanding. Communicating the limitations of what we, as doctors can do leads to a relationship where both parties work with each other and try to mend the disease that dawns upon the patient. In one talk, a physician lists out four very important things in Palliative Care2: one, to explain the prognosis of the patient; second, to recognize the challenges the patient faces; third, to establish a series of goals with the patient (medical or otherwise) and lastly, to understand the trade-offs between surgery and pain. A patient may want to lead a life without any surgical invasion or medicines. Understanding these perspectives and respecting them is paramount instead of pushing for healthcare, which may only extend the life span by a few months.

The challenge we face in India is to decrease the violence against doctors and the latter half of this essay will explain how effective communication can heal a broken system. According to a survey, about three-fourths of doctors have faced violence in the workplace3. Patient’s lack of satisfaction has been found to be due to a scenario where they are seen as unequal partners in the process of healthcare4. This stems from a belief system, as mentioned earlier, of infallibility. The arrogance and use of security forces to deal with patient situations is problematic.

What needs to be meaningfully understood is that the patient plays an equal role to the caregiver: there won’t be a person to whom to impart care otherwise, would there?

Effectively breaking the news of a doctor’s incapability to treat a condition, which has progressed beyond repair, is better than masquerading in the shadows of false hope. A patient can deal with the disability in peace once told of the limitations of treatment.

The incidences of violence5 have all one thing in common: A breakdown in the communication followed by a tumultuous worsening of the relationship between a patient and a doctor. It is justifiable, to certain extents to see this rise in violence given the rise in healthcare costs and an ocean of distance between the physician and his patient.

In all circumstances, honesty is indeed the best policy. Being honest to a patient empathetically, expressing concern and sharing the sorrow are the stepping-stones to reaching out to the patient. No matter the cruelty, empathetic understanding of the human suffering can soften even the hearts of the Gunda Raj.

The case for the doctor is intriguing. While the fault is not wholly one sided, efforts from one side can have great reciprocal outcomes.

Presently, the situation is on a downward spiral. Reports of violence have been cropping up from almost all the states of the Indian Republic. It’s a failure on our part to absolve ourselves of any wrongdoing. Without introspecting our own shortcoming, we can’t sit on high horses and profess litany.

Communicating, reaching out and empathizing can break the walls of mistrust that have been built, creating edifices of a meaningful relationship. Ultimately, our roles as doctors is to provide the healing touch and dissipate human suffering: to this end, if effective communication can help, let us embrace it rather than stranding ourselves in sea.

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