

Communication Skills: The Lifeline of Health Care

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ABSTRACT

The word infodemic is a blending of two words information and pandemic. Modern information technologies have mixed facts with fear, speculation, and rumor that has caught the world with information overflow. Medicine is an art and science. Uncertainty is one of the key principles of medicine. "Medicine is a science of uncertainty and an art of probability" mused William Osler. The information collected from available data from world regulatory bodies of public health reflects the nature and importance of uncertainty with newer facts emerging from more studies regarding the virus and the disease. The indirect gesture of a leader not wearing a face mask projected by social media negatively influences ordinary people to decide whether to wear a mask or not. The 100-day agenda of President-elect Joe Biden of the USA mandates that every citizen wear a face mask after millions of US citizens were infected by coronavirus disease-2019 (COVID-19). Social media have a more social responsibility to relay true information regarding the wearing of face masks. The process of communication regarding the pandemic like any other research question must go through tests of veracity, validation, and reliability. As health issues have become a global phenomenon, social media need to have a physician-scientist to verify the information to be relayed. It will be more effective if that information is communicated by a physician forming the media team, say a TV channel. The art of communication skills relating to pandemics needs to be taught and trained to disseminate facts by social media.

Keywords: Communication skills, COVID-19, Social media.

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INTRODUCTION

"The patient will never care how much you know, until they know how much you care".

Communication in simple terms can be explained as simply an act of transferring information say from the physician to the patient and from the patient to the physician. Active communication between the physician and the patient has to be trustworthy, honest, and unambiguous. The physician has to be a good communicator and active listener.¹

The different categories of communication are:

- Spoken or verbal communication (face-to-face, telephone, radio or television, and other media).
- Non-verbal communication includes body language, gestures, the tone and modulation of voice, the way one dresses up, and the body image.
- Written communication: The written communication can be letters, email, social media, the internet, and other platforms.
- Visualizations: Graphs and charts, maps, logos, and other visualizations like virtual presentation, teleconferencing including telemedicine.

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Physician and Communication Skills

A physician needs to develop communication skills to attain patient satisfaction as well as protect himself from possible legal issues related to health care. To achieve maximum benefit to the patient, to be a good clinical teacher and above all to be a good physician what one speaks, what one teaches, what one conveys, and how

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compassionate one is as a physician depending upon the art of communicating.³

Types of Communication Skills

There seem to be three types of communication skills:

- **Content skills** — The ability to extract information from the physician and patient's conversation.
- **Process skills** — The skill to structure the communication between the doctor and the patient so that a healthy relationship is created.
- **Perceptual skills** — Being sensitive to the values and emotions of the patients so that patient-centered communication is developed. The skill so developed will take into consideration the likes and dislikes of the patient, cultural uniqueness, and the capacity to create an amicable and amiable environment allowing the patient to discuss the problems and expectations from the healthcare provider.⁴

Patient Satisfaction

Good communication skills help to develop a stable relationship with the patient and promote patient satisfaction. The main independent predictors of satisfaction are reported to be the

patient's perception of communication and partnership and a positive attitude from the doctor. Satisfaction is considered to be a complex notion with many determinants and is conceived as the outcome of the delivery of health services.^{2,4,5}

Therefore, the communication skills of a physician lay the foundation for a healthy and trustworthy patient-physician relationship.

It involves gathering information to arrive at an accurate diagnosis, provide professional advice and therapeutic instructions to the patient, and establish a caring relationship with the patient.

The development of such communication skills helps to achieve the best clinical outcome and patient satisfaction. It develops shared perceptions and emotions regarding the nature of the clinical problem, treatment goals, and psychosocial support.

There is a considerable body of evidence to show that patients need better communication with their doctors. Therefore, effective and continuous communication between the physician and the patient is necessary for providing holistic care to the patient.^{4,6}

BENEFITS OF EFFECTIVE COMMUNICATION

Effective communication between the patient and physician forms the core component of delivering proper health care. The main components of good doctor-patient communication are having a good interpersonal relationship, a free exchange of information, and the participation of the patient in decision-making.⁶⁻¹⁰

The non-verbal communication reflected by the physician's bedside manners helps to develop a good relationship between the two and is also perceived as a sign of the doctor's competence.¹ The initial development of a good relationship through communication helps to ease the emotions of the patient, improves the understanding of the clinical information, facilitating identification of the patient's needs, perceptions, and expectations.^{6,10,11}

Thus, the healthy relationship developed through communication makes the patient satisfied with health care. This leads to sharing of relevant information for accurate diagnosis, to follow advice, treatment, and recovery.¹²

Better communication between the provider and the patient leads to greater patient satisfaction. This forms the patient-centered approach to treatment. Patient satisfaction gives professional satisfaction to the doctor, lessens stress, and burnout syndrome is reported.^{7,13}

Barriers to Good Communication

Patient's anxiety and fear, the burden of work for the doctor, fear of physical or verbal abuse, and irrational patient expectations are some of the barriers that impede the development of good communication between the two.¹⁴

Deterioration of Doctors' Communication Skills

The good communication skills developed seem to decline with students as they progress through their medical education. The heavy load of learning to complete the curriculum, heavy workload with limited manpower, greater expectation from peers and mentors, the monotony of daily routine cause a slow deterioration of communication skills of medical students. The clinical work becomes mechanical and results in a loss of empathy.¹⁵

Avoidance Behavior

The busy schedule of clinical settings and impaired physician syndrome have resulted in avoiding discussion with the patients.

This avoidance behavior hurt the emotions of doctors and patients. Such avoidance behavior is reported to harm the recovery of the patients.¹⁶

Communication Skills

It is recommended that in medical education communication skills must be taught, at a time when there is a loss of empathy in medical providers. There is also a lack of skilled mentors and trained trainers to train the skill of communication.

Communication skills involve both style and content.¹⁶ Attentive listening skills, empathy, and use of open-ended questions are some examples of skillful communication. Improved doctor-patient communication tends to increase patient involvement and adherence to recommended therapy; influence patient satisfaction, adherence, and healthcare utilization; and improve quality of care and health outcomes.¹⁷

Breaking bad news to patients is a complex and challenging communication task in the practice of medicine.¹⁷ Relationship building is especially important in breaking bad news.¹⁸ Important factors include understanding patients' perspectives, sharing information, and patients' knowledge and expectations.¹⁹ Miscommunication has serious implications, as it may hinder patients' understanding, expectations of treatment, or involvement in treatment planning.¹⁷ In addition, miscommunication decreases patient satisfaction with medical care, level of hopefulness, and subsequent psychological adjustment.¹⁷

Communication Training

Doctors are not born with excellent communication skills, as they have different innate talents. Instead, they can understand the theory of good doctor-patient communication, learn and practice these skills, and be capable of modifying their communication style if there are sufficient motivation and incentive for self-awareness, self-monitoring, and training.¹⁹ Communication skills training has been found to improve doctor-patient communication.^{20,21} However, the improved behaviors may lapse over time. It is therefore important to practice new skills, with regular feedback on the acquired behavior.²² Some have said that medical education should go beyond skills training to encourage physicians' responsiveness to the patients' unique experiences.

Collaborative Communication

A reciprocal, dynamic relationship that involves a two-way exchange of information is considered collaborative communication.²³ Such an exchange of information will ensure that health concerns are elicited and explored. The explanations of therapeutic options are balanced to allow for a shared decision-making process.²⁴ In this method, the doctor promotes discussion and negotiation with patients. Treatment options are evaluated and help to tailor to meet the needs of the patients.^{24,25}

Health Beliefs

Doctors use a biomedical model to understand illness and patient's perceptions of illness are influenced by social and behavioral components. The Cartesian model describes the relationship between disease and illness. In the shorter version, the disease is a verifiable component (organic-real) and illness is the patient's perception of the disease (functional) (Fig. 1).

Beliefs and values differ from patient-to-patient and good communication along with understanding divergent beliefs

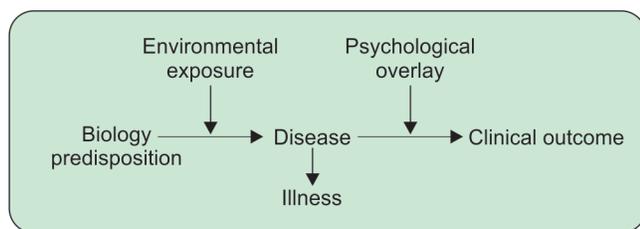


Fig. 1: Biomedical model

and values by the doctor will have a positive effect on patient satisfaction and offer better treatment opportunities.^{10,26}

Therefore, well-established doctor-patient communication will help to gain an understanding of patients' social context, expectations, and experience.^{23,27}

LIMITATIONS AND FUTURE DIRECTIONS

Doctor-patient relationships are usually long-term, involving multiple visits, and require special attention to each patient's expectation, benefit, and values.

- The greatest mistake in the treatment of disease
- Is that there are
- Physicians who treat the body
- Physicians who treat the soul
- Although the two cannot be separated
- Plato

Therefore, good communication skills with good doctor-patient relationship healthcare delivery will be beneficial and long-lasting.

Patient Satisfaction and Communication Skills

Availability of the physician, coordination in a multidisciplinary team, competence, communication, and relationships, ability to provide information and educate patients, responsiveness to emotional needs of patients, ability to provide holistic care, and ability to support patients' decision-making formed the important components that will promote patient's satisfaction. Satisfaction results in better clinical outcomes by fulfilling patient's expectations. Patients with better outcome and better care become more satisfied and that will lay the foundation for maintaining and continuing the existing doctor-patient relationship.²⁸

Satisfaction needs to be investigated with a tightly defined and homogeneous case mix to explore the cause and effect of various factors on doctor-patient communication.²⁴ In addition, the Hawthorne effect (awareness that one is being observed and evaluated) is difficult to avoid in observational studies and may affect behavior.²⁹

CONCLUSION

Communication between the doctor and the patient forms the major component of health care.³⁰ Doctors command a unique position in society. They have a position and respect in society. Effective doctor-patient communication is a good source of motivation, incentive, reassurance, and support.³¹⁻³⁴ Most of the complaints related to health care and doctors are related to issues of communication and are in no way connected to clinical competency.

Coronavirus disease-2019 (COVID-19) pandemic has taught a lesson that infodemic is more dangerous than the virus.

The process of communication regarding the pandemic like any other research question must go through tests of veracity, validation, and reliability. As health issues have become a global phenomenon the social media need to have a physician-scientist to verify the information to be relayed. It will be more effective if that information is communicated by a physician forming the media team of saying a TV channel. The art of communication skills relating to pandemics needs to be taught and trained to disseminate facts by social media.

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