MASTERING COMMUNICATION WITH SERIOUSLY ILL PATIENTS

Physicians who care for patients with life-threatening illnesses face daunting communication challenges. Patients and family members can react to difficult news with sadness, distress, anger, or denial. This book defines the specific communication tasks involved in talking with patients with life-threatening illnesses and their families. Topics include delivering bad news, transition to palliative care, discussing goals of advance-care planning and do-not-resuscitate orders, existential and spiritual issues, family conferences, medical futility, and other conflicts at the end of life. Drs. Anthony Back, Robert Arnold, and James Tulsky bring together empirical research as well as their own experience to provide a roadmap through difficult conversations about life-threatening issues. The book offers both a theoretical framework and practical conversational tools that the practicing physician and clinician can use to improve communication skills, increase satisfaction, and protect themselves from burnout.

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Anthony Back, Robert Arnold and James Tulsky
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Balancing Honesty with Empathy and Hope

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Every effort has been made in preparing this book to provide accurate and up-to-date information that is in accord with accepted standards and practice at the time of publication. Although case histories are drawn from actual cases, every effort has been made to disguise the identities of the individuals involved. Nevertheless, the authors, editors, and publishers can make no warranties that the information contained herein is totally free from error, not least because clinical standards are constantly changing through research and regulation. The authors, editors, and publishers therefore disclaim all liability for direct or consequential damages resulting from the use of material contained in this book. Readers are strongly advised to pay careful attention to information provided by the manufacturer of any drugs or equipment that they plan to use.

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PREFACE

I was listening to Mrs. P explain, through tears, how unfair it felt for her cancer to have returned. I said, "You're right, and you are being very polite. This sucks." The oncology Fellow next to me looked a little surprised, but Mrs. P laughed. Later, when we were out in the hallway, the Fellow said, "I've never seen a conversation like that before. She really calmed down." What the Fellow had seen up to this point left her with some common but misguided assumptions – that she should stick to the medical facts, minimize the patient's emotions, maintain an objective distance, and hope the patient has good coping skills. I hadn't done any of those things. "What you said really worked," the Fellow said, "how did you do that?" This book is our explanation.

Who is this book for?

This book is for physicians who want to communicate better with seriously ill patients and their family members. It isn't surprising that many of us struggle as we seek to combine explaining biomedical science, dispensing clinical judgment, and counseling about how to cope with a life-threatening illness. This book seeks to respond to that struggle. Consider this book as an advanced course for those who have some experience and want to use their time with patients wisely, find deeper meaning in their work, and protect themselves against burnout. Nurses, social workers, and other clinicians who find themselves in these situations may value techniques in this book as well.

What's in this book?

In this book, we describe a variety of communication tools and "roadmaps" that you can use to find your way through difficult conversations. In our years of teaching students, residents, Fellows, and attendings, we have found that many have either not seen a really good conversation, or they have not been able to identify what made the conversation work. Master clinicians in action with patients can be so fluid, so seamless, so responsive, that great communication looks easy. In fact, these master clinicians are collecting lots of data from the patients, drawing from a large repertoire of skills, and constantly readjusting their gestures and words. This master clinician could be you.

How will this book help me?

Adopting in your own practice the tools and roadmaps we've laid out will make you a better communicator. What do we mean by better? You'll be clearer about where your patients stand, more skillful at understanding their concerns, and more effective when you make recommendations. You'll be the kind of doctor that people want for their family and friends. And you'll develop a deeper sense of what matters to you in your clinical work because you will be talking to patients about what really matters. We think that in improving your communication you will become a better physician.

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How did we develop this book?

For the past 8 years, we have taught Oncotalk, a series of intensive retreats on communication skills designed for medical oncology Fellows. In the process of creating the workshops, we realized the power of identifying key skills, providing roadmaps for conversations, and having people practice. We have been amazed at how learning a few key tools can change the way Fellows communicate. Listening to them talk about difficult topics with patients before and after their training was like observing completely different doctors. Fellows who have attended our courses tell us that these communication skills have changed how they approach patients, how they deal with emotional moments, and, most important, how they feel about their work.

Why did we write this book?

Difficult patient encounters frustrate physicians daily. When you face demanding – sometimes tragic – situations, using communication skills that are “ok” is like riding a bike with three gears – there are some hills you just won’t be able to climb. For dealing with life-threatening illness, skills that many consider adequate are actually not good enough, and both patients and physicians are paying the price. To make matters worse, research on patient-doctor communication suggests that most doctors aren’t quite as good at communication as they think. And even those who are aware of their shortcomings tell us they don’t have confidence that they can change. In this book, we want to show you that change is possible, and you can become a better communicator. First, we describe what expert clinicians actually do when they talk to patients and their families. Second, we show what you can do to improve your practice. We highlight specific skills to emulate and offer suggestions for how to practice these behaviors. We want to raise the bar on communication skills. We want to change your idea of what really good communication looks like.

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Where possible, we have grounded these recommendations in the growing literature on communication. Yet, we've consciously distilled the communication tools and roadmaps into a reader-friendly format. This is not an academic review of the literature that stresses what we don't know. Our goal is practical – to help you communicate better.

How is the book organized?

We organized the book in a progression that parallels how physicians meet patients (Chapter 2) and follows them through the course of a life-threatening illness, including talking about serious news (Chapter 3), making treatment decisions (Chapter 4), discussing prognosis (Chapter 5), managing between the big events (Chapter 6), conducting a family conference (Chapter 7), dealing with conflicts (Chapter 8), handling transitions to end-of-life care (Chapter 9), and talking about dying (Chapter 10). The last chapter (Chapter 11) will help you know what to expect as your skills improve and describes what getting better feels like. Throughout the text, we include real snippets of conversation, slightly disguised, from our workshops that provide you actual words to use.

Finally, we want to congratulate you for wanting to improve your skills. The first step in the journey is the hardest one. You have made that commitment by picking up this book.