

Editor's Desk



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COMMUNICATION SKILLS, IS IT INTRINSIC OR ACQUIRED? CAN TEXT BOOKS TEACH US?

Effective communication skills are well rooted in nurturing good patient doctor relationship. Not all of us are bestowed with the gift of the gab. Even the top notch professionals have sometimes subjected themselves to em

Harassment when their communication with patients have gone lop sided. We have also observed this anamoly that some young professionals have esteemed communication skills while some high end clinicians are in want of better skills. Possession of successful communication skills, denied to someone, cannot be gifted by any medical text book. It is an art which fattens and gets sharpened with practice and experience.

This was not in our curriculum during our time. We learn from our mistakes. So how do we achieve this and get on top of communication paralysis? Essentially this should happen in a calm and tranquil environment, free from interruption, both clinician and patient seated in the same level with good eye to eye contact and using clear, concise, coherent, simple and courteous language. Empathetic listening, mindful of the body language, patient's emotional state, being consciously aware of their cultural differences and language preference have to be taken to heart. Use of interpreters and translator's assistance have to be borne in mind in relevant circumstances. Learning to listen is the key to career success.

We should avoid forcing our opinions and loud voice. If you have nothing more to say, say nothing and refrain from false promises and hyped up claims. So how do we acquire richness in communication skills? In some situation shaving a nurse or attender during communication interaction can infuse confidence in patients. Also parting with information in small aliquots, using sketches, diagrams and posters, avoiding medical jargons can add to successful results. We can even advise them to come prepared with the list of doubts, questions and come accompanied with their spouse or close confidante to free up their stress and anxiety. Many of the patient population, on feedback reveal that they are exposed to telephone, mobile phone interruption by clinicians and distracted by computers during consultation.

Even the erudite patient only manages to absorb and retain far less than the intended amount of clinical information due to multiple factors. To reinforce this one needs to say what is planned to be said, say what you wanted to say and repeat what you have just said (like the politicians). Additional written materials, leaflets and pictures drawn during explanation can boost the amount imbibed in the memory. One has to be conscious of the emotionally loaded situations like breaking bad news relating to terminal illness, malignancy and the like (avoid alarmist attitude) Frequent pauses and assessing their level of understanding is also advised. While closing the conversation invite their understanding and ask whether they want to know



more or repeat some segments of conversation. As part of training and education one can also video record the conversation (with informed patient's consent) with a view to future improvements. Practice makes perfect and helps to hone the skills. As we all know that this aspect of medical practice was not given enough thought in earlier years and been highlighted it's importance only in recent times. So, fellow professionals let me bend your ears, effective communication though not a child's play and it is easier said than done, bookish knowledge is not on its own is going to make you a Pundit but regular practice and self-appraisal will always pay dividends in the long run.

Learn to Listen, Listen to Learn...

Best wishes

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