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Physician Role in Enhancing Patient Communication
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Background
Communication between patients and physicians is critical as it engages patients in their health, answers their questions, and thus brings a positive impact to patients. The patient is able to improve self-esteem because of the comfort the physicians provide. Despite having serious health concerns, an increasing number of patients do not visit physicians or obtain medical information from them. Who is more responsible to ensure healthy communication takes place? Additionally, are there any psychological barriers preventing patients from communicating openly?

Telemedicine
With increased use of technology, medicine has also accessible by a multitude of online resources. However, an increased use of this telemedicine in more independent patients can deteriorate patient-physician communication. Blake et al. (2012) noted that telemedicine has been beneficial to some extent, but by choosing to find medical information independently, patients are unable to synthesize and comprehend the nature of a medical concern, thus incorrectly treating the problem. While these independent patients are more proactive in their health, they also put themselves at a risk for incorrect diagnosis and treatment if they do not maintain a level of communication with their physicians.

Language Barriers
Low literacy in English can be detrimental in one’s health as it increases the chance of miscommunication between the patient and the physician. Sarkar et al. (2011) attempted to improve this and used translators as middlemen for patients, but the indirect communication made the patients feel inadequate as they were unable to independently resolve their issues. A factor of intimidation and independence is associated with the language barriers that could potentially degrade the level of patient-physician communication.

Social Support
Community engagement can have influential roles on patient health in various facets. Eriksson and Emmelin (2013) suggest that a strong sense of belonging in one’s community has shown to have a positive correlation with self-perception and health in patients. Because patients feel valued in the community, they would feel encouraged to care for themselves more. Contrastingly, society can also negatively impact one’s health; the community can sometimes set “norms” for health that pressure patients to fit into these expectations. Guassora et al. (2014) have seen that it becomes a matter of honor to live up to these expectations, which is why patients only choose to mention positive aspects of health during physician consultations.

Conclusion: Physician Responsibility
Physicians will be able to create a more comforting and peaceful environment for patients if they take more proactive responsibility. If patient-physician communication is not improved, an increasingly larger number of patients will turn to outlets other than their healthcare providers for medical information. This could be harmful for patients because they could misinterpret the information and thus improperly diagnose himself, later elevating the risk of the previous concern. Hence, physicians need to take more action in their patients’ lives. They need to ask more questions (whether they are uncomfortable or not), provide more sources to eliminate language barriers (such as more comprehensive translators), and display confidence in their profession more. These changes will help increase patient-physician communication and thus improve overall patient health.

Chart 2 Interactive Communication Loop in Clinician-Patient Education
As proposed by Schittinger et al., there are multiple times a physician must confirm patient understanding and agreement to the treatment proposed. It is crucial in the medical environment to not only clarify any explanation for the patient but also to ensure the patient comprehends the new information presented. In this manner, physicians should be taking more care to provide all information possible for patients so patients are fully aware of their health and treatments.

Chart 1 Consequences of Improper Topic Initiation by Physicians in HIV Related Discussions

References

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