

Volume 12, Issue 4 /2010 - Roadmap to Top Quality

The Communication of Risks - The Risks of Communication

It is widely accepted that 30-50% of medical errors could be avoided. Conen believes that risk in our hospitals is poorly defined; it is uncertainly expressed in empirical fact in numbers. Patients need to weigh the benefits with the risk of harm; those who understand this situation have a better forecast

Conen took the example of a patient whose potassium levels were at the upper limit. The doctor informed the patient of this fact, who in turn asked what it meant exactly. The doctor replied that it did not matter, it is not serious but that he wanted to keep the patient informed. As long as you can make decisions for your patients you do not need to explain. There is however a need for figures and knowing how to handle them.

The presentation emphasised that communicating risks with patients depends on their level of literacy. Surveys have found that only 15% of patients are competent in reading, writing and critical thinking. OECD launched an initiative called "Are you a prepared patient?" illustrating the need to move from a patronised patient to a competent patient. For this we must look to the doctor, they have a responsibility, as do patients. Communication is key.

So how do we do this? Doctors must assess what patients already know, what they would like to know and then describe the risks, implications, processes according to their level of literacy. This should be done with empathy and sincerity. Communicating the risks like this can build trust.

Patients must be faced with clear and easy decisions. Qualitative statements should be used (whether something is positive, likely, common, unlikely or rare). Conen believes that we need a standardised method of risk communication with less numerical answers; people think in categories rather than percentages. This is also important in the media, as they use only percentages, which scares the public.

Also important is telling patients where they can get more information from. For example, risks and damages from medication. Indeed, it is very hard to distinguish between the benefit and damage of medication. We only hear about the approval of new medication, not the associated risks. Moreover, cash interests often taint drug advice.

For Conen the key importance is telling the truth and in doing so, conveying hope. Facts must be provided along with a message of hope, which is not possible using technical jargon.

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