



The Doctor's Condolence Letter: Standardisation Necessary?



The results of a new survey published in *ecancermedicalscience* indicate that a majority of oncology professionals believe that writing condolence letters to the families of deceased patients is an important component of cancer palliative care.

The study explored whether institutions should consider changing policies to raise condolence letters to a more official standing.

But because this practice is a personal grace note, it has rarely been studied or discussed. In particular, this issue hasn't been researched in the UK, where cultural practices surrounding grief are often private.

Researchers led by Dr Naveen Vasudev of St James's Institute of Oncology and the University of Leeds, UK and Ms Jessica Hayward, a medical student at the University of Leeds, surveyed 47 local oncologists and palliative care consultants to learn more about this overlooked chapter of the cancer care story.

"I was reflecting on my own practice, and I became aware that my colleagues all seemed to be doing different things when expressing condolences," says Dr Vasudev, corresponding author of the study.

"So, we thought it would be interesting to document this variation and try to understand the underlying reasons."

These [preliminary findings](#) suggest that this habit is very personal and should remain so.

"The doctors in our survey felt strongly about when and how they wished to express their condolences to bereaved relatives," says Ms Hayward.

"Trying to make practice more uniform may be seen as a good thing, but this doesn't seem to be appropriate or feasible."

Notably, the majority of doctors surveyed (72 percent) were not in favour of introducing policies to unify their practices.

"Condolence letters are a matter of professional discretion and judgement and should not become a 'policy'," one doctor wrote in response to the survey.

Other doctors stressed that every letter should ring with a personal note, lest families be hurt by perceived indifference or formulaic treatment.

"This is a small study, with lots of scope to build on these initial results," says Dr Vasudev. "It would be

interesting to document practice on a much wider scale, both increasing numbers and also perhaps to include other specialties beyond oncology and palliative care.

It would also be important to find out the views of bereaved relatives themselves."

"We hope that it might inspire readers to think about this issue, and to reflect on their own current practice following the death of a patient," adds Ms Hayward.

For doctors, this overlooked practice appears to be an important - and now acknowledged - part of the cancer story.

Source: [EurekaAlert](#)

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