



# Communication Skills Training for physicians and nurses

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« Exchanging words »: Mme L,  
Lymphoma, 83 years, CHUV

C Well, Mme L, we will soon have to  
decide if you will undergo  
chemotherapy ...

P You know, doctor, I was raised in an  
orphan house ...

C Mmh ... I will be back in the afternoon

# Key Elements of a Patient-Centered Communication

- Structured informations
- Clinician's agenda
- Rational approach
- Defined timeframe
- Professional relationship
- Routine situation
- Independence

- Comprehension
- Integration
- Negotiation
- Balance
- Alliance
- Common project

- Narrative, general informations
- Patient's agenda
- Individual approach
- Subjective timeframe
- Highly significant relationship
- Exceptional situation
- Dependence

# Key Elements of CST

- Role plays (behavioral elements)
- Case discussions (cognitive elements)
- Video- or audio-analyses with simulated patients (psychodynamic elements)
- Individual supervisions during follow-up

# Main Focus of Communication Skills Training

- Informations (e.g. decrease of load)
- Emotions (e.g. containing)
- Structure (e.g. negotiating agendas)
- Relational aspects (e.g. orphan house)

# Emergence of Communicational Difficulties

- Facing medical limits
- Patient's refusal
- Emotions (aggressiveness)
- Distance / identification

## Indicators of communicational difficulties

- Predominance of clinician's speaking time
- Unbalanced focus on medical themes
- Abrupt transitions and deadlocks (premature consolations, denial of preoccupations, closed questions)
- Introduction of a third person
- Distance, aggressivity, indifference

Guex, Stiefel and Rousselle / Rev Franc Psy 2002



## CST-Example: Introduction of a « Third »

C ... well, that's about what I can tell you about the situation, did you talk to your family ?

P (sights) I have small children ...

C we have also social workers or psycho-oncologists in this clinic, they can be of great help !



# Communicational Difficulties

are related to

- a lack of technique, but also...
- levels of anxiety and defensive styles of clinicians when facing external and internal pressure



# 1. Lack of Technique: Examples

- ❑ Structuring the interview
- ❑ Negotiating the agendas
- ❑ Closing topics, transitions
- ❑ Transmission of information
- ❑ Preparation, setting

## CST- Example: structure / transitions

N: ... before you receive chemotherapy, we will administer a medication against nausea

P: .. Mhm, mhm

N: chemotherapy is not always associated with nausea, but we like to prevent nausea, that's why we prescribe it anyway, eh: what do you work ?

P: I am accountant of a small factory...

N: the chemotherapy should be well tolerated ...

## 2. External Pressure: Examples

- Complex informations
- Disclosure of diagnosis
- Relaps, progression
- Patient's emotions
- Irritated patient

# CST-Example: Relapse

C: ... to summarize, the results show that the cancer has come back again

P: but I thought I was cured !

C: but I have told you that the chance for cure is not 100% !

P: well ...

### 3. Internal Pressure: Examples

- Professional identity
- Ego and Ego-Ideal
- Narcissistic vulnerability
- Ambivalence of the patient
- Identification, projection

# Real Life-Example: Professional identity / ovarian cancer

P: Is there no possibility to clean up this situation with more surgery ?

C: What do you think !

C: Or to utilize again a strong medication ?

P: In your situation, a chemotherapy ? I could rather kill you right away ...

# What can be achieved by CST ?

- Enhanced communicational flexibility
- Patient-centered communication
- Structuration of the consultation
- Increased containing of emotions
- Efficient transmission of information
- Perception of relational aspects
- Awareness of co-constructions, decoding