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Communication with cancer patients

KEYWORDS: Communication; Professional-Patient Relations; Medical Oncology; Adaptation, Psychological; Psychology Applied

Communication is defined as a process in which information is delivered from one person to another, but in medicine it means much more. It includes some emotional and psychological factors which may transform meaning of information, and it is characterized by personality of both patient and healthcare professionals. If cure begins with smile and doctor is considered as a remedy for patient, it is clear than in spite of advanced medical technology, communication remains the primary mechanism in establishing of relationship between patient and healthcare professionals to achieve their common goal – the patient's wellbeing good balanced apply of most effective methods and approaches in treatment, with safeguarding human dignity of patient. Communication, in words of oncologist, can be, like tumors "benign" and "malignant", invasive; similarly, the effects of bad communication with cancer patient can metastasize in his/her family. Aims of communication are: gaining trust in the patient and the family, maintaining good cooperation, providing information and specific knowledge; decreasing of emotional tension; and promotion of mutual relations among the patient, members of the family and the professional team. Communication principles are based on relation of confidence between the healthcare professionals and cancer patient which is made with mutual respect of conversationalist's personality, sincere approach and understanding of complete situation of the patient and the family. Two parallel principles of effect communicating the truth should be kept in mind: cancer patient has right to know the truth, but thoughtless openness should always be avoided. Communication begins with greetings and mutual introduction. Patient present his/her the main reasons for visit, explains symptoms and problems accurately in the chronological order have occurred. Healthcare professionals continue the communication with question about patient's complaints and comprehensive patient's situation. They listen to the patient, follow up his/her reaction and non-verbal communication, define the problems and create a treatment plan together with patient. For effective communication is mandatory to provide privacy, enough time, modesty in breaking bad news, comfort ambient and relaxed atmosphere. Each meeting with the healthcare professionals, every gesture and word, has psychotherapeutic effect. It is important to apply the first principle of cure: *Primum non nocere!* Words may be as a sharp surgical knife, they very precious weapon, but could be very dangerous when used inadequately. Communication skill should be learned during regular education. Research and the training of healthcare professionals for communication with cancer patients are warranted.

Communication with patients with cancer

KEY WORDS: Medical Oncology; Communication; Physician-Patient Relations; Nurse-Patient Relations; Adaptation Psychological

When talking to people who suffer from cancer, the members of the medical team should not just explain the particulars of their illness, metastasis, and the way the therapy hopefully destroys malignant cells. Because of the situation in which the patient is suddenly involved in, his/her life is affected by wide range of harmful effects in several aspects (attitude toward himself, his family, other people, the illness itself and the treatment which may be unpleasant, and, in particular, the attitude of the family members in patient's terminal phase of the disease). In contact with patients, doctors and nurses should take into consideration the distinctiveness of their patients, their special needs and the way they could be satisfied. Because of fear of the illness and treatment, patients tend to change their behavior and may have psychic disorders. It would be desirable if a psychologist could be a member of the team: such an expert would take care of all psychological aspects of illness and might help patients to develop rational and pragmatic attitude towards his/her illness.