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The lost "Art" of Medical Communication

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Editorial

To older Medical Practitioners, it is well known that the practice of medicine is both an art and a science. Finding this balance between the two is often a struggle for younger doctors in today's world. Their constant reliance on technology to aid their diagnosis puts them at risk of becoming extensions of the technology that was developed to serve and assist them with making a diagnosis. It erodes their ability to communicate information to patients with compassion and empathy. Some practitioners appear to have almost morphed into extensions of the very technology they use, interacting with patients at a level that appears to be lacking in "humanism"! Courses in medical school that deal with the art of doctor patient communication, although well taught, seem to have been forgotten fairly quickly by younger doctors. They become like conduits that quickly transmit to their patients, the information obtained from their "Technology Masters", often neglecting share this information in an empathetic manner.

To a Physician like myself, many years out of medical school, and now a patient of younger providers, I find myself comparing them to highly trained technicians or service personnel, much the same as any other whom I might call on to repair an appliance or fix my plumbing. They seem to use the same diagnostic tools and deliver the "diagnosis" in pretty much the same "matter of fact" manner. I cannot help but reflect on how the practice of what was once an art, blended with science, has now become no different than purchasing a service from a business.

While the current system in which young doctors practice is becoming more fast-paced and technology based, in many cases replete with graphics and animations that mimic the video games they played as children, a way has to be found to help them understand that the practice of medicine is much more than a video game, played in the setting of virtual reality. Their

patients are not mechanical appliances or, in the case of Telemedicine, animated figures on a video screen, but are humans who have feelings, and often seek empathy when they visit their doctor. It is clear that medical schools have to try and do a better job with identifying ways in which to preserve the "art of medical communication". This "art" is in danger of becoming extinct because of ever increasing interaction and total reliance on technology by young doctors, who themselves are at risk of becoming nothing more than "Automatons", and no longer "Doctors"!

It is unfortunate that more attention is not given to this very important issue as it does significantly impact the level of confidence patients have in their physicians. A lack of confidence does have an effect on the level of patient compliance, and ultimately patient outcomes. Empathetic communication can make a huge difference in the physician patient dynamic, and lead to better patient outcomes and satisfaction.

References

- Heitkamp DE, Cuskaden JH, Tahir B, Gunderman RB (2016) PACS and the erosion of professional relationships. Acad Radiol 23:905– 907
- Yacoub JH, Swanson CE, Jay AK et al (2021) The radiology virtual reading room: during and beyond the COVID-19 pandemic. J Digit Imaging.
- Yu J-PJ, Kansagra AP, Mongan J (2014) The radiologist's workflow environment: evaluation of disruptors and potential implications. J Am Coll Radiol 11:589–593.
- Smith EA, Schapiro AH, Smith R et al (2021) Increasing median time between interruptions in a busy reading room. Radiographics 41:E47–E56.
- Glazer GM, Ruiz-Wibbelsmann JA (2011) The invisible radiologist. Radiology 258:18–22