



Breaking bad news

- communicating with the cancer patient

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Breaking bad news



Problems

- The „cancer stigma” - a diagnosis perceived as a death sentence
- More bad news than good news
- Emotional difficulty
- Pressure of time
- Constraints to meet targets and contain costs
- Lack of training



Breaking bad news



Tools

- medical knowledge, confidence
- psychological knowledge, experience
- communication skills, body language
- acknowledging own constraints
- own emotional well-being
- practice, practice, practice



The patient's perspective – type of physician



The inexperienced messenger

- lack of experience
- lack of knowledge of the specific and serious medical, psychological or social situation of the patient
- feeling that the doctor had been sent by the more experienced senior doctors to deliver the serious message



The patient's perspective – type of physician



The emotionally burdened expert

- emotionally burdened
- strong personal feelings of their own
- almost too emotionally involved, sometimes with tearful eyes or even crying with the patients
- patients often interpret these feelings as a sign of help
- lessness when cure was no longer possible



The patient's perspective – type of physician



The rough and ready expert

- rough and hardhearted
- little or no knowledge of psychology
- information delivery in a short, explicit, concentrated way, and fast, preferably with medical facts
- wrong setting, wrong words, without regard for timing, with incongruous or rejecting body language



The patient's perspective – type of physician



The benevolent but tactless expert

- friendly and sympathetic attitude
- without the capacity to communicate in a good manner
- uses emotionally distressing words
- wounds the patient, but without that intention



The patient's perspective – type of physician



The “distanced” expert

- formal character
- good theoretical knowledge of patients' reaction
- behaving in a way that kept them at a distance
- objectivity and dominance
- manipulating the communication in such a way as to avoid deeper discussions



The patient's perspective – type of physician



The empathic professional

- balancing medical competence and empathy for the patient
- interested in both physical and psychological concerns
- capacity to read the emotional state of the patient
- acceptance of the patient's feelings
- active use of his own security and experience
- adoption of a educative/pedagogic role



SPIKES protocol



The **SPIKES protocol** for breaking bad news has four objectives:

- Gathering information from the patient
- Transmitting the medical information
- Providing support to the patient
- Eliciting patient's collaboration in developing a strategy or treatment for the future.

SPIKES protocol



SPIKES protocol for breaking bad news

- **S** – Setting
- **P** – Perception of condition/seriousness
- **I** – Invitation from the patient to give information
- **K** – Knowledge: giving medical facts
- **E** – Explore
- **S** – Strategy and summary, emotions and sympathize

SPIKES protocol



Setting

- Arrange for some privacy
- Involve significant others
- Sit down
- Make connection and establish rapport with the patient
- Manage time constraints and interruptions.

SPIKES protocol



Setting

- What?
 - Make sure you have checked all the available information and have test results (including getting the right patient!)
 - Decide general terminology to be used
- Where?
 - Arrange for some privacy,
- Who?
 - Should break the news, should other staff be there or significant others?
- Starting off?
 - Introductions and appropriate opening

SPIKES protocol



Perception of condition/seriousness

- Determine what the patient knows about the medical condition or what he suspects.
- Listen to the patient's level of comprehension
- Accept denial but do not confront at this stage.

„What have you made of the illness so far?“

„What did doctor X tell you when he sent you here?“

SPIKES protocol



Invitation from the patient to give information

- Ask patient if s/he wishes to know the details of the medical condition and/or treatment
- Accept patient's right not to know
- Offer to answer questions later if s/he wishes.

“If this turns out to be something serious are you the kind of person who likes to know exactly what’s going on?”

SPIKES protocol



Knowledge: giving medical facts

- Use language intelligible to patient
- Consider educational level, socio-cultural background, current emotional state
- Give information in small chunks
- Check whether the patient understood what you said
- Respond to the patient's reactions as they occur
- Give any positive aspects first e.g.: Cancer has not spread to lymph nodes, highly responsive to therapy, treatment available locally etc.
- Give facts accurately about treatment options, prognosis, costs etc.

SPIKES protocol



Explore emotions and sympathize

- Prepare to give an empathetic response:
 1. Identify emotion expressed by the patient (sadness, silence, shock etc.)
 2. Identify cause/source of emotion
 3. Give the patient time express his or her feelings, then respond in a way that demonstrates you have recognized connection between 1 and 2.

SPIKES protocol



Strategy and summary

- Close the interview
- Ask whether they want to clarify something else
- Offer agenda for the next meeting eg: I will speak to you again when we have the opinion of cancer specialist.

SPIKES protocol



The additional „S” – self care

- Admit you are affected
- Check on your own feelings
- Take a minute to vent if necessary
- Take care to deal with the next patient sensitively
- Prevent and treat burnout



Thank You

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