

Advancing Diagnostic Excellence in Older Adults Key Challenges and Considerations

Patient Perspective

Beverly Canin

Breast Cancer Options, Inc
Cancer and Aging Research Group
Patient advocate/Research Partner

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“The good physician treats the disease; the great physician treats the patient who has the disease.” Sir William Osler

“The great error of our day in the treatment of humans is that some physicians separate treatment of the psyche from treatment of body. Plato

*“The doctors want my
symptoms, but not
my story”*

(Marilyn Gardner, “Between
Worlds: Essays on Culture and Belonging”)

Heart Sisters

“Doctors end up asking about symptoms rather than the story. And [people] then get conditioned to talk about their symptoms instead of their stories. But studies have shown that over 80 per cent of diagnoses can be made just by listening. By that, they mean listening to the story, the open-ended story of what happened, rather than asking a list of yes-no questions.”

Dr. Leana Wen, (with Dr. Joshua Kosowsky) *“When Doctors Don’t Listen: How to Avoid Misdiagnoses and Unnecessary Tests”*

Heart Sisters

“Blame the 18-Second Rule!”

“Eighteen seconds is the average time it takes a doctor to interrupt you as you’re describing your symptoms. By that point, he/she has in mind what the answer is, and that answer is probably right most of the time.” Dr. Jerome Groopman, professor of medicine at Harvard, in *“How Doctors Think”*

waited only 11 seconds on average before interrupting patients.

“Time constraints and the use of electronic medical records can hinder patient-clinician interaction. Patient-facing interactions (in contrast to computer-facing ones) account for only about 50 per cent of the clinical time, potentially promoting more frequent interruptions.” Singh Ospina N, Phillips KA, Rodriguez-Gutierrez R, Castaneda-Guarderas A, Gionfriddo MR, Branda ME, Montori VM. Eliciting the Patient's Agenda- Secondary Analysis of Recorded Clinical Encounters. J Gen Intern Med. 2019 Jan;34(1):36-40. doi: 10.1007/s11606-018-4540-5. Epub 2018 Jul 2. PMID: 29968051; PMCID: PMC6318197.

*“Listen to your patient,
he is telling you the
diagnosis.”*

Sir William Osler

- My overriding sense was that for the first oncologists, it was 'just another diagnosis'. No-one asked me how I was doing or feeling!
- 3 consultations, 4 months to diagnosis, 5 months until surgery
- Stage III tonsil cancer misdiagnosed as infection by two doctors

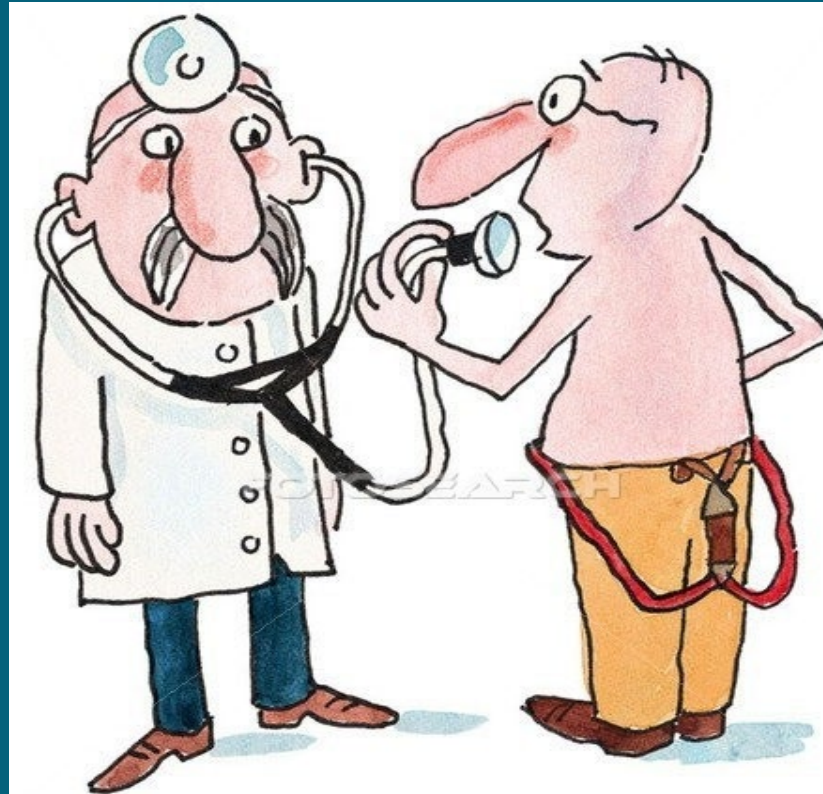
Patient and Healthcare Proxy or Caregiver Companion

- Assess the relationship
- Give appropriate attention to each person
- Older patients want to be heard to maintain dignity and a sense of some control
- Can provide important elements of the patient's story
- Builds a sense of team working together

“What Patients Say, What Doctors Hear”

- **“Patients, anxious to convey their symptoms, feel an urgency to “make their case” to their doctors. Doctors, under pressure to be efficient, multitask while patients speak and often miss the key elements. Add in stereotypes, unconscious bias, conflicting agendas, and the fear of lawsuits and the risk of misdiagnosis and medical errors multiplies dangerously.” Danielle Ofri, MD**

Getting the Doctor to Listen



Doctors need to make a conscious effort to listen as opposed to talk during visits

→ Not One-Way ←

- Tell the whole story
- For chest pain, the story might be:
 - when it started
 - if it's been painful before
 - what you were doing when you first felt it
 - what the pain feels like
 - how often you feel it
- Be sure the doctor has heard
- Patients should carry a written timeline of their symptoms and relative medical history as well as written questions for the doctor.
- Patients should encourage communication among all of their doctors to develop a care team approach

→ Not One-Way ←

- Patients should ask what to do if things don't go as planned
- Patients should know their insurance status and ask questions about coverage and possible out of pocket costs. Basic Medicare covers a lot of things and the Advantage plans cover even more, but none are unlimited or a guarantee that a patient might incur costs for some drugs or treatments.
- Know if and when you may be eligible for other assistance, such as Medicaid.

→ Not One-Way ←

-”the patient leave with an understanding of the why, and that they are wanting to comply because of the good appointment they just had.”

“The problem with communication is the illusion that it has occurred”

George Bernard Shaw

As quoted in *Leadership Skills for Managers* (2000) by Marlene Caroselli

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THANK YOU