

1 November 2011: Thank you, doctor

The old man looked expectantly at the doctor. While suffering from symptoms for quite some time, he had waited long before seeing a doctor, being reluctant to saddle someone with his troubles. Now he was back for the results. The doctor looked up from his papers. "You suffer from lung cancer, Mr Hendriks. That in itself should not pose a problem, if your hadn't also been diagnosed with liver metastases. Since those are hard to treat, you'll be subjected to a palliative therapy. I should expect you to live another 6 to 12 months." Mr Hendriks rose from his chair, shakes hands with the doctor while uttering a friendly "Thank you, doctor", and left. Back home, he told his daughter that things would turn out all right as long as those metastases got the right palliative treatment. "By the way, do you have any idea what they are? Those metastases, I mean. And can you see why this palliative therapy must take 6 to 12 months?"

In the course of my past seven years as a cancer patient, I have had the good fortune of having a doctor who was transparent about the progress of my disease as well as the pros and cons of the various therapies. While I was the one who eventually decided what therapy I should undergo, I always did so on the basis of her comments and advice. In fact, my sessions with my doctor consisted of a genuine dialogue and ended with a joint choice. This is how it should ideally go. In reality, though, "consultations" of the kind described in the first paragraph are no exception. Sensing that the doctor is pressed for time as the next patient is waiting, the patient will think twice before asking him to explain difficult medical terms. In such a set-up, the disease is the focus of attention, rather than the patient.

There is no denying that informing a patient diagnosed with cancer of his situation and the possible treatment is among a medical doctor's less enviable duties. But no matter how difficult, a duty it is. So, how best to go about it? Well, a good start is, as I once heard a young physician put it, to "look into the patient's eyes to see if your words are being understood. If they tell the opposite, then start explaining again, using different words." After each explanation, interview your patient to see if he has understood so well that he will be able to inform his dear ones back home. Meanwhile, try not to think of the other patients in the waiting room. They will just have to wait a bit longer. And they will not mind once they know you need more time as you are more focussed on the patient than on the disease.

A doctor must endeavour to be as explicit as possible when informing a patient of his condition, no matter how unfavourable this information is. His chance of surviving or the need to undergo a severe treatment is no information any patient should be left in the dark about. Moreover, a patient has a right to know what to expect in order to be able to prepare for a treatment or the few months left him. But it is not just the doctor who is responsible for transparency towards his patient. The latter, too, has a duty to get to the bottom of his situation. And if he is unable to do so himself, he should bring along someone close to him to ask the relevant questions.

Mister Hendriks meanwhile knows where he stands, because his daughter felt she should contact the doctor. That very same day, she and her father went to the hospital to discuss everything in detail. Aware now that he is terminally ill, Mister Hendriks can plan how he will spend his last months with his daughter. And his doctor? He is relieved, to be honest. It feels good to have informed a patient properly so he knows what he is up to.

Better doctors and better patients. That's what it's all about.

Peter Kapitein
Never ever quit!

Anderen faciliteren en inspireren om Goed, Gelukkig en Gezond te leven met kanker

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