

How to break the ice — preparing for the bad or sad

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Madam, any news that seriously and adversely affects an individual's view of his or her own future is considered as bad.¹ Clinical conditions such as diagnosis or the relapse of cancer, developmental errors of the conceived foetus, suspicions of comorbid, transmittable or infectious diseases and acute emergencies that has to be communicated to the patients or to their relatives is considered bad news. Breaking bad news is indeed an unpleasant and difficult task, but it is a mandatory part of communication skills that we should learn as healthcare professionals.

Confronting the news is stressful; it may put the patient in despair and affect his psychological health. However, the patients want their doctor to be honest and reveal the news in a compassionate and detailed manner in a private setting.² Sometimes, several meetings are needed to convey the information in a two-way dialogue.

Empathy, kindness and clarity are the basic hallmarks that can help in breaking distressing news. The doctor should be attentive, calm and listen to the problems of the patient. He should also try to ascertain the perception of

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the patient and answer questions relating to patient's disease. The doctor must cope with his own emotional fall and watch out for any non-verbal message.³ Speaking in the language of the patient is also of utmost importance. In the end, he should reassure the patient and the family that the best options have been reviewed, summarise the information that has been discussed and lay out the plan of action that will be used in the management of issues.

The way such information is communicated is of consequence itself. If done well, it helps to maintain trust and promote open communication between patient, his or her family and the doctor. It creates a healthy doctor-patient relationship, improves treatment plan, impacts patient's psychological and physical health and also helps the patient and their close ones to adjust emotionally and make realistic plans for life ahead.⁴ Hence, education and training on the communication of bad and difficult news must become an integral part of curriculum in the training of medical professionals.

References

1. Buckman R. Breaking bad news: why is it still so difficult? *Br Med J* 1984; 288: 1597-9.
2. Ishaque S, Saleem T, Khawaja FB, Qidwai W. Breaking bad news: exploring patient's perspective and expectations. *J Pak Med Assoc* 2010; 60: 407-11.
3. Beecham L. Learning to break bad news. *BMJ* 1997; 314: 1502.
4. Maguire P. Breaking bad news. *Eur J Surg Oncol* 1998; 24: 188-91.