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Cohort Study of Communication Skills in Medical Sciences

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ABSTRACT

Introduction: "The art of medicine is intricately tied to the art of communication." "Medicine is an artist whose magic and creative ability have long been recognized as residing in the interpersonal aspects of patient-physician relationship". In traditional medical curricula, communication is not taught formally. Aim and Objectives: To study the perception of medical students about the usefulness of the communication skills lab. The perception of medical students about the use of communication skills lab. Materials and Methods: This observational study was carried out at the Communication Skills Medical Lab of Medical College. Feedback was obtained with the help of a prevalidated questionnaire from 100 final DMLT students about their perception of the utility of the module taught in the Communication Skills Medical Lab. Results: A total of 78.46% of students were of the idea that Communication Skills Medical Lab posting is a must for all medical undergraduates. 93.83% perceive that the module taught was very relevant and useful and were satisfied with the duration of the posting (81.47%). 78.46% of students experienced an improvement in their communication skills. More emphasis should be given to communication between doctor and patient. Conclusion: The students found the communication skills lab very useful. They desired more emphasis on communication between doctor and patient and sought more interactivity, and video demonstrations to be part of the module.

Keywords: Communication module, Medical laboratory activity

INTRODUCTION

"The art of medicine is intricately tied to the art of communication" [1]. "Medicine is an artist whose magic and creative ability have long been recognized as residing in the interpersonal aspects of the patient-physician relationship" [2]. Clinical communication skills encompass a series of skills that facilitate the communication between doctor and patient. In today's era, there is an increased demand for time, and information by patients for answering their questions related to the disease, investigations, and treatment options. The patients expect the

doctor to be polite, and empathetic and to possess a human touch [3]. Doctors who are skillful at communicating, may more easily identify the needs of the patient and provide an adequate response to the patient's "illness perspective", which may also assist in promoting the doctor's effective management of the patient's health concern [4]. The key areas of communication during a medical interview include asking open-ended questions more than direct questions, effective listening, appropriate praise to the patient, providing enough information in a language that the patient can understand as a part of advice and finally checking their understanding [5].

However, during interviews with patients, most doctors tend to concentrate on medical aspects associated with the disease rather than on the patient's unique experience of his or her "illness", including the patient's ideas concerning the cause and outcomes of the disease [6,7]. This was illustrated by a study showing that doctors interrupted their patients' opening statements after a mean period of 18 seconds. This behavior may lead to the loss of valuable information that is vital to arriving at a correct diagnosis [8]. Placing the patients' concerns on the back foot creates a negative doctor and patient relationship [9]. Ultimately the objective of any form of doctor-patient communication is to find the cause of a patient's problems and improve the patient's health and medical care [3]. Even though many doctors considered their communication adequate or even excellent, studies on doctor-patient communication have demonstrated discontent from patients' viewpoints [10,11]. Though communication is an important component of patient care, in traditional medical schools it was never included in the teaching-learning methodology and was incorporated informally as a part of clinical rounds and faculty feedback without specific or in-depth focus on communication skills per se leaving gaps in the reliability and consistency of these teaching methods which are gaining increased attention from medical schools and accreditation organizations [1]. Some of the important barriers identified for good communication are time constraints, arrogance, telephone calls, language barriers, and cultural insensitivity. Research has shown that patient satisfaction can be improved if the doctor has undergone training to acquire good communication skills [5]. Over the last decade, many medical faculties have introduced practical communication skills training for their students to improve satisfaction levels at the patient end by correcting the behavior of doctors. Some studies showed superior performance of students trained in communication behavior skills, in terms of acquiring accurate and relevant information from patients. But other studies have found no difference between the communication skills of those who have received training in communication skills and those who did not receive any training [12]. There is also an increased interest in research in this field of doctor-patient communication, recognizing the need to experiment with the teaching methods and to measure clinical skills [1]. The attitude of medical students toward learning communication skills has long been a matter of concern for medical teachers, curriculum planners, and policymakers [13,14]. Like any other skill, good communication skill is an art that can be acquired and improved by putting conscious efforts into day-to-day practice. Such skills should also be incorporated as part of the medical teaching curriculum [5].

Given importance of training in communication skills, it was included in the curriculum of students of Datta Meghe Institute of Medical Sciences, Sawangi. Wardha has got probably the first communication skills lab in a medical college in India. The Communication Skills Medical Lab was started in the year 2011 and was under the aegis of the Department of Medical Education. Department of Medical Education was later upgraded to school

for Health Professions Education and Research. Since it was a new venture, this study was carried out to get feedback from the students and recommend any necessary changes in the module of the skill lab.

To study the perception of medical students about the use of communication skills lab. The perception of medical students about the use of communication skills lab, to study factors facilitating and hindering learning in the lab, and to study their preference regarding particular components of communication skills.

MATERIALS AND METHODS

This observational study was carried out at the Communication Skills Medical Lab of the Medical College. Feedback was obtained with the help of a pre-validated questionnaire from 100 final Diploma in Medical Laboratory Technology (DMLT) students about their perception of the utility of the module taught in the Communication Skills Medical Lab including factors that helped and which hindered learning. Descriptive statistics were used for the quantitative data and categorization for qualitative data.

RESULTS

A total of 78.46% of students were of the idea that Communication Skills Medical Lab posting is a must for all medical undergraduates. 93.83% perceive that the module taught was very relevant and useful and were satisfied with the duration of the posting (81.47%). 78.46% of students experienced an improvement in their communication skills. They opined that more emphasis should be given to communication between doctor and patient (61.53%).

DISCUSSION

Our results are comparable to other studies done on communication skills in medical students. Neupane MS et al., in their study of, "Attitude towards learning communication skills in medical students of Chitwan Medical College, Nepal" also found similar results, where the students in lower terms had a stronger tendency to learn communication skills than the ones in higher terms [13]. One of the important observations in this study was that along with positive attitudes about communication skills, negative attitudes should also be taken into consideration and steps should be planned and executed to modify or eliminate them. In their study, some of the most important constituents of negative attitudes were: "My ability to pass exams will get me through medical school rather than my ability to communicate", "Nobody is going to fail their medical degree for having poor communication skills", "learning communication skills is too easy" and "I haven't got time to learn communication skills". Such negative attitudes if not channelized and controlled might have a negative effect on positive attitudes as well. Not only is it recommended to place more importance on communication skills but also to provide greater opportunities for students to learn communication skills. Overall (78.46%) students agreed on the point that the Communication Skills Medical Lab posting had helped them in improving their communication skills. The students rated their communication skills significantly lower at the end than before the start of the course. By the end of the course, even positive attitudes towards learning communication skills become significantly lower as compared with the start. In this study as per the researchers, the reason might have been the overconfidence of students about their abilities to communicate with patients, which was brought down to more realistic levels after learning the communication issues during their training.

The literature review suggests that medical students' perception of the importance of communication skills is determined by their attitude towards communication skills training and attitude may eventually influence the learning and adoption of communication skills in the clinical setting. The student's self-assessment of their ability to communicate effectively with the patient is responsible for the development of attitude toward communication skills training.

CONCLUSION

The students found the communication skills lab very useful in improving their communication skills. They desired more emphasis on communication between doctor and patient. They sought more interactivity and video demonstration to be part of the modules. The methodology used to teach the modules should be more interactive. Apart from doctor-patient communication, communication between students and teachers and between students themselves also needs to be taught. Video demonstrations should be added to the teaching methodology. Power backup should be provided to the communication skills lab.

LIMITATION

There are chances of bias on part of the responders. Very few responders answered the open-ended questions. Focus group discussion in addition to the feedback form might have helped in getting a better perception.

DECLARATIONS

Conflict of Interest

The authors declared no potential conflicts of interest with respect to the research, authorship, and/or publication of this article.

REFERENCES

- [1] Teutsch, Carol. "Patient-doctor communication." Medical Clinics, Vol. 87, No. 5, 2003, pp. 1115-45.
- [2] Hall, Judith A., Debra L. Roter, and Cynthia S. Rand. "Communication of affect between patient and physician." *Journal of health and social behaviour*, 1981, pp. 18-30.
- [3] Ha, Jennifer Fong, and Nancy Longnecker. "Doctor-patient communication: a review." *Ochsner Journal*, Vol. 10, No. 1, 2010, pp. 38-43.
- [4] Kurtz, Suzanne, Juliet Draper, and Jonathan Silverman. "Teaching and learning communication skills in medicine." *Chemical Rubber Company press*, 2017.
- [5] Shendurnikar, Niranjan, and Pareshkumar A. Thakkar. "Communication skills to ensure patient satisfaction." *The Indian Journal of Pediatrics*, Vol. 80, 2013, pp. 938-43.
- [6] Tuckett, David. "Meetings between experts: an approach to sharing ideas in medical consultations." 1985.
- [7] Beckman, Howard B., and Richard M. Frankel. "The effect of physician behaviour on the collection of data." *Annals of Internal medicine*, Vol. 101, No. 5, 1984, pp. 692-96.

- [8] Cassell, Eric J. "Talking with patients, volume 2: Clinical technique." MIT Press, Vol. 2, 1985.
- [9] Duffy, F. Daniel, et al. "Assessing competence in communication and interpersonal skills: the Kalamazoo II report." *Academic medicine*, Vol. 79, No. 6, 2004, pp. 495-507.
- [10] Stewart, Moira A. "Effective physician-patient communication and health outcomes: a review." *CMAJ:* Canadian medical association journal, Vol. 152, No. 9, 1995, p. 1423.
- [11] Claramita, Mora, and Gerard Majoor. "Comparison of communication skills in medical residents with and without undergraduate communication skills training as provided by the Faculty of Medicine of Gadjah Mada University." *Education for Health: Change in Learning & Practice*, Vol. 19, No. 3, 2006.
- [12] Dans, Peter E. "Self-reported cheating by students at one medical school." *Academic Medicine*, Vol. 71, No. 1, 1996, pp. S70-S72.
- [13] Neupane, M. Sharma, et al. "Attitude towards learning communication skills in medical students of Chitwan Medical College, Chitwan, Nepal." *International Journal of Pharmaceutical & Biological Archives*, Vol. 3, No. 5, 2012, pp. 1058-61.
- [14] Kevin B. Wright, et al. "Medical student attitudes toward communication skills training and knowledge of appropriate provider-patient communication: a comparison of first-year and fourth-year medical students." *Medical Education Online*, Vol. 11, No. 1, 2006, pp. 4594.