Everyone wants to be found.

BILL MURRAY   SCARLETT JOHANSSON

Lost In Translation

The new film written and directed by Sofia Coppola
Communication with patients and families: Are we lost in translation?

Peter Brindley MD FRCPC FRCP-Edin
Full-Time Clinical Doc...proud of it too.

Other Stuff:
Professor, CCM, UofA
Adjunct Professor, Dossetor Health Ethics
Adjunct Professor, Anesthesiology
Vice-chair, Canadian Resuscitation Institute
Why Bother?

Dispose of your ugly children here
Communication: greatest skill/liability

• CAN'T be assumed; CAN be taught
• Greatest outcome determination/failure
  • safety/outcome; pt satisfaction; care gap

✓ Know (& practise) communication skills.
✓ Know the basics (hazards) of translators.
✓ Understand issues/ avail the resources

ICU’s most dangerous procedure!
ICU → RRU
Relationship Repair Unit

• 2 decades of newspaper coverage

• 9% “ageism”
• 8% “anti-disabled”
• 5% “euthanasia”

• 2% concerned c “over resuscitation”
• 6% regarding pre-emptive decision-making

Beed, De Beer, Brindley. Resuscitation 2014 (In press); Also thanks to Dr J Ronco
“What we have is a failure to communicate”
BETTER

Pain
Anxiety
PTSD
Legal action
Compliance

Placebo
20mg

Take one caplet in the
and two caplets in the


WORSE

Nocebo

DANGER: THIS WARNING MAY INCREASE POTENCY

INGREDIENTS:
Water, food colouring

THIS PRODUCT CONTAINS NO ACTIVE INGREDIENTS AND AS SO HAS BEEN FOUND TO BE POTENTIALLY HIGHLY DANGEROUS TO HUMAN HEALTH

If swallowed Nocebo may cause abdominal pain, anorexia or and weight loss, attention difficulties, burning or and flushing, chest discomfort, chills, diarrhea, dizziness, dry mouth, dyspepsia, fatigue, headaches, injection site reaction, insomnia, language difficulties, memory difficulties, nasal signs and symptoms, nausea, numbness, paresthesia or and tingling, pharyngitis, somnolence or and drowsiness, stinging or and pressure sensation, taste disturbance, tinnitus, upper respiratory tract infection, vomiting, weakness.

Keep out of reach of children
Store in a cool place

"Scientific" vs "Natural"
"Information" vs "Feelings"
What families think?

The Age of Aquarius
What ICU Doctors think?
The Age of Eos and Tithonus
The family and followers of one of India’s wealthiest Hindu spiritual leaders are fighting a legal battle over whether he is dead or in a deep state of meditation. Ashutosh Maharaj, right, founder of the Divya Jyoti Jagrati Sansthan religious order, which owns property worth about US$180-million, died in January, say his wife and son. But disciples at his Punjabi ashram say he went
into a deep *samadhi* and have put his body in a commercial freezer. Local police confirmed the death, but the Punjab High Court dismissed the police report. Officials said the guru’s followers could not be forced to believe he is dead. Now the guru’s family has filed a court application calling for a probe into his death and that his body be released for cremation. *The Daily Telegraph*
CRISIS IN CONFIDENCE

DO YOU TRUST YOUR DOCTOR?

An exclusive poll shows that an increasing number of Canadians don’t. P.16

PLUS

FESCHUK TO HARPER: Are you bored with us? P.81
“Comfort the afflicted &
Afflict the comfortable”

American Humorist, Finley Peter Dunne
All About Me

My Name is:

I like to be called:

My Family and Friends are:

My Favorite Things:
- Color:
- Foods:
- Hobby:
- Pets:
- Movie:
- Song:
- Book:
- TV Show:
- Actor:
- Musician:
- Sports:
- Other Things:

To Cheer me up:

I am most Proud of: You should also know: I am stressed when:

My work before I got sick was:

At Home I Use:
- Glasses
- Dentures
- Contact lenses
- Other: ______
- Hearing Aid

With thanks: Patty Graham RN, UCSD
“Goal-Directed” Communication

6 goals within 24 h
i) surrogate ii) code status; iii) advance directive iv) pain v) dyspnea vi) give out brochure.

4 more goals within 72 h
i) larger family ii) discuss prognosis iii) assess goals iv) offer spiritual care

REFS:
“Engineering” communication

General Tools

CALGARY CAMBRIDGE questionnaire
• Initiate; Gather; Build relationship; Explain/Plan; Close

GREAT
• Greeting/Goals; Rapport; Evaluate/Explain; Ask/Answer/Acknowledge; Tacit agree/Thanks

LAURS
• Listen; Accept; Use approp. words; Reframe; Suggest

Communication II: SOPS; Fail-safes

Shared decision-making

VALUE

• Value; Acknowledge; Listen; Understand as person; Elicit

Breaking bad news

SPIKES

• Setting; Perception; Invite sharing; Knowledge; Empathy; Strategy/Summary

And with language discordance...

• We ALL act differently
  • Docs: Less counseling/psychosocial concerns
  • Patients: Less trust/compliance/ more PTSD

• Alteration with translators (>50%)

• Translators vs interpretors (vs buffers)

• What to do:
  - Pre- and post-briefing
  - Learn (practice) resources

Refs: i) Brindley et al. CRJ 2014. 21 (2): ii) 89-91; Cyan et al. OUP 2011
Two (or more) Solitudes

A Eng/Fre CCM primer

- 85% “workable” Eng; 30% Fr; <20% both

- Words difficult to find

Brindley, Cardinal. Smith, Leblanc.
CJGIM 2014. 9;1:26-31
BUT what are WE about?

- Resuscitation
- Diagnosis
- Disease Management
- Procedures
- Perioperative-Care
- Comfort and recovery
- End of Life Care
- Paediatrics
- Transport
- Safety
- Professionalism
SO, what does “resuscitation” mean?

- Resuscitation?????
  - receive chest compression...or not?
  - be apneic.....................................or not?
  - includes fluids/abx only........or not?
And what is our survival?

E.G following adult in-hospital CPR?

i) <1 in 2
ii) <1 in 3
iii) <1 in 4
iv) <1 in 5

Brindley P.G, Markland, Kutsogiannis CMAJ 2002;
Getting our message across?

- CPR Outcome depends most upon:
  - WHO NOT HOW
    - Arrest type; If witnessed; If reversed in 10 mins

- Address public assumptions
  - Diem et al NEJM 1996

Brindley et al CMAJ ’02; Kutsogiannis et al CMAJ ’11; Brindley and Beed BJA ’14
“everything” vs “nothing”

“Assault”

“Natural Death”

“Neglect”

“Giving up”
Alberta Health Services:
Advance Care Planning & Goals of Care

http://www.albertahealthservices.ca/3917.asp
<table>
<thead>
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"""Patient focused care""""?

- **What it is:**
  - Communication
  - Partnership
  - Includes values

- **What it is not:**
  - Technology-centered
  - Doctor/Hospital centered
  - Autonomy-centered

Irwin and Richardson CHEST 2006
And why does it matter

70% die in hospital; 90% following w/d or w/h.

Death is now institutionalized and technology dependent

Personal communication G Rocker, S Shemie, D Cook
Brindley and Singh. Handbook of Palliative Care 2008
A sense that you can make things better...
Burnout: everybody suffers!
"We'd now like to open the floor to shorter speeches disguised as questions."