



## Article Review

### **Communication at Times of Transitions: How to Help Patients Cope with Loss and Re-Define Hope**

Evans, Wendy G., Tulskey, James A., Back, Anthony L. Arnold, Robert M.

*Cancer Journal Sep/Oct2006, Vol. 12 Issue 5, p417-424, 8p*

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#### Key Points

- ✓ Patients undergo multiple transitions during the course of their cancer care
- ✓ Oncologists are uniquely positioned to help patients through transitions by (1) giving biomedical information, (2) showing care and understanding for patients, and (3) balancing realism and hope.
- ✓ Patients want oncologists to realistically discuss their disease state while fostering hope -- emphasizing what can be done: pain and symptom control, emotional and practical support, having dignity, being in a caring environment.
- ✓ Hopes are very personal, unique to the individual, and may include being cured, living longer, finding meaning in life, having special time with loves ones, finding spiritual meaning, and having a peaceful death.
- ✓ Patients want oncologists to help them set realistic goals for the future and to discuss the practicalities of day-to-day living
- ✓ Patients define attributes of a good death as
  - Freedom from pain and other symptoms
  - Having a sense of completion
  - Affirmation of the whole person
  - Being at peace with God
  - Being kept clean
  - Clear decision-making
  - Preparation for death
  - Contributing to others
  - Being in the presence of family
  - Trusting one's physician
- ✓ Ask-Tell-Ask is a technique for providing patients with information while balancing hope and realism.
- ✓ "Hope for the best, prepare for the worst" is a technique to discuss the possibility of less desirable outcomes.

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Hospice Compassus Team**

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## Techniques To Help Physicians Meet Patient Communication Goals

### Technique for Nonverbal Expressions of Empathy

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|----------|--|
| <b>S</b> | Face the patient <b>SQUARELY</b> to indicate interest in his/her story.                        |
| <b>O</b> | Adopt and <b>OPEN</b> body posture as a sign that you are open to the patient.                 |
| <b>L</b> | <b>LEAN</b> toward the patient to show intimacy and flexibility toward the patient's position. |
| <b>E</b> | Use <b>EYE CONTACT</b> to show you are paying attention.                                       |
| <b>R</b> | Maintain a <b>RELAXED</b> body posture to decrease patient anxiety.                            |

### Technique for Verbal Expressions of Empathy

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|----------|--|
| <b>N</b> | <b>NAME</b> the emotion: "You seem frustrated."  |
| <b>U</b> | <b>UNDERSTAND</b> the emotion: "It must be so hard to be in pain like that."   |
| <b>R</b> | <b>RESPECT</b> (praise) the patient: "I'm so impressed that you've been able to keep up with your treatment and the rest of your life while having these headaches." |
| <b>S</b> | <b>SUPPORT</b> the patient: "I and my team will be here to help you with the headaches."   |
| <b>E</b> | <b>EXPLORE</b> the emotion: "Tell me more about how these headaches are affecting you."  |

### Example using Ask-Tell-Ask in a conversation about prognosis

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|------|--|
|      | Patient: "How long do I have, doctor?"   |
| Ask  | Doctor: "That is important for us to talk about. So that I make sure to give you the most helpful answer, can you tell me first why you are asking?" |
|      | Patient: "My daughter is getting married in July – I really want to be there."   |
| Tell | Doctor: "With the treatment you are getting, I fully expect that you will be able to go to her wedding in July."                                     |
| Ask  | Doctor: "Does that give you the information you were hoping for?"  |
|      | Patient: "Yes, that puts my mind at ease to know that."  |

### Example using "hope for the best, prepare for the worst" in a conversation about prognosis

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|----------|--|
| Doctor:  | "Jim, the cancer being in your bones means that though we still have treatments that can lengthen your life, this cancer won't ever completely go away." |
| Patient: | "I have to keep my hope that I'll be cured."   |
| Doctor:  | "I share that hope with you then, Jim. I'm wondering whether we could also talk about what will happen if things don't go as we hope."                   |

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