

THE PRESENTING COMPLAINT

UNIT 2

Two approaches to history taking

- Patient - centered approach
- Doctor - led approach

George Angel (1913 - 1999)

- The US psychiatrist was known for his pioneering work on doctor-patient relations.
- Deep understanding of patient's problems could be achieved through a bio-psychological model (BPsM)
- BPsM - the working of the body can affect the mind and vice-versa.

Presenting complaint

- PC is the chief complaint the patient presents to the doctor
- Asking about the presenting complaint requires a series of questions in a particular order

Question types

- Open questions (*what, why, where*) allow patients to express themselves in their own words
- Closed questions (require *Yes/No* answers) do not allow patients to express themselves (only in specific situations)

Avoid the following question types

- Multiple question (several questions asked at the same time) can be confusing
- Leading questions put words into the mouth of the patient and lead the patient to a particular answer
- Tag questions tend to guide patients in a particular direction

You are not sleeping too well, are you?

Patients tend to agree with the doctor's point of view

Effective question technique

- *‘Cone technique’* moves from open to closed questions.
- The doctor obtains a picture of the problem starting the interview with an opening question. If he needs to confirm some specific information on symptoms, he uses more closed questions

- A PATIENT -CENTERED APPROACH
- VERSUS
- DOCTOR-LED APPROACH

- Read the text in ex. 1a, p.22
- Find the concepts of both approaches
- Find the differences between the two approaches

Doctor-centered approach

- Disease and patient are completely separate
- Tightly controlled
- Doctors take the dominant role
- Patients have limited participation
- Patients' health is entirely in the doctor's hands
- Doctors ask leading questions
- Impact of disease on patients' life is barely considered

Patient-centered approach

- Patient is expert of his/her own disease
- Patient is the main source of information
- Holistic approach
- Social, physical and economic factors are important
- Doctors show more empathy
- Patients are more likely to comply with treatment
- Doctors are more responsive to patient's cues

Reasons for the change

- *Patients expect information about their condition and treatment and want doctors to take their opinions into account. They like to be involved.*
- *Patients expect humanity and empathy from their doctors as well as competence.*

Benefits of the change

- *Improved health outcomes*
- *Increased patient adherence to therapies*
- *Reduces litigation*
- *Improved time management and costs*
- *Patient safety*

Barriers and difficulties

Clinician factors	Patient factors
Lack of knowledge	Anxiety
Authoritarian manner and negative attitude to a patient	Feeling powerless
Avoiding difficult topics	Reticence to disclosed concerns
Using professional jargon	Misconceptions
Lack of empathy	Conflicting information
	Forgetfulness
	Hearing/ visual/ speech impairment

Shared factors

- Different first language
- Lack of privacy
- Lack of time
- Different cultural backgrounds