Four most important objectives in BBN

- Gathering information about/from the patient
- Transmitting the medical information
- Providing support to the patient
- Eliciting the patient's collaboration in Mx plan
Breaking Bad News - SPIKES

- Setting up
- Perception
- Invitation
- Knowledge
- Emotions
- Strategy & summary
Basic process

Communication Model

1. message sent
2. message received
3. interpretation
4. reaction

Remember
The majority of patients find the attitude of the news giver, combined with the clarity of the message and the news giver's knowledge to answer questions as the most important aspects of giving bad news.

S – SETTING up Interview

- PREPARATION, PREPARATION, PREPARATION
- Gather full information about patient
- Involve significant others
- Environment - privacy, tissue
- Sit down face to face
- Make a connection with the patient
- Manage time constraint - uninterrupted time
- Undivided attention
P – Assessing the Patient’s PERCEPTION

- Patient’s understanding of their condition
- Patient’s ability to believe you
- Patient’s engagement - illness denial/hope
- Patient’s ability to listen and concentrate
Does he care for me?

I'm listing your condition as 'battle hardened.'

I'm prescribing that you be stretched thin. We don't define that as torture.
I – Obtaining the Patient’s INVITATION

- Ask question to get them ready-
- Most patients wish to hear about the diagnosis and prognosis
- Respect their anxiety and eagerness
- Empathise, get them on your side
K – Giving KNOWLEDGE and Information to the Patient

- Direct and truthful
- Warning shot can be helpful
- Medical facts- pace to level
- Plain layman language-Avoid jargons
- Avoid excessive bluntness
- Small chunks of info, periodic check of Understanding
- Honest but supportive discussion
Contents

- Diagnosis
- Way of arriving dx and reliability of method
- Nature of disease
- Course/ usual prognosis
- Management options
- Disease recurrence
- Spread of disease
- Failure of treatment to affect disease progression
- Presence of irreversible side effects
- Revealing positive results of genetic tests
- Raising the issue of hospice care and resuscitation when no further treatment options exist
E – Addressing the Patient’s EMOTIONS with Empathic Responses

- Toughest part of breaking bad news
- Emotion vary silence - crying, self pity - anger, denial to sadness, dependency and hopelessness

- Empathic responses of doctor
  - Observe the emotion - tearfulness, sadness or shock
  - Identify and name the emotion
  - Let them know that you have connected the emotion to the reason for the emotion.
  - Give time to express his or her feelings

Emotional Intelligence
Have you always respected the emotions of others?
S – STRATEGY and SUMMARY

- Ask if patient ready for further discussion
- Present the treatment options
- Share responsibility in decision-making
- Clear future plan - patient less anxious and more in control of his or her life
- Follow up meeting if needed
- Document all communications
Practice makes a woman.. perfect

See, Bernard? Julia's approach was just that tad more sensitive. OK- so who wants another crack at breaking the bad news?

Be sensitive while breaking bad news
ABCDE of breaking bad news

- **Advance preparation-**
  - arrange adequate time and privacy,
  - confirm medical facts,
  - review relevant clinical data,
  - emotionally prepare for the encounter.
- **Building a therapeutic relationship-**
  - identify patient preferences regarding the disclosure of bad news.
- **Communicating well-**
  - determine the patient's knowledge and understanding
  - proceed at the patient's pace
  - avoid medical jargon or euphemisms
  - allow for silence and tears, and answer questions.
- **Dealing with patient and family reactions-**
  - assess and respond to emotional reactions
  - empathize with the patient.
- **Encouraging/validating emotions-**
  - offer realistic hope based on the patient's goals
  - deal with your own needs.
Any question?