

Let's go bilingual

by Geneviève Dechêne MD



I have in mind a young female intern resident, Mélanie, who was routinely summarizing for me the medical case of a Mrs. White. She manifested some astonishment as I then asked her to proceed in presence of the patient. There she went: "The present case is a 49 years old patient, suffering from a syndrome of hypermenorrhea, with dysmenorrhea for the past six months in association with episodes of coitalgia and asthenia".

I stopped Mélanie and asked her to repeat her story in "plain everyday language" so as for Mrs. White to understand her. After all she is the one being talked about. As the resident manifested further astonishment, I gave her concrete examples from my own real life : when I go to my dentist's and am prescribed a surgical treatment, I expect to get an explanation for every detail of it in words that I can understand so as for me to accept the contract or not ; when I go to my garage because my car has been emitting a strange old jingling tin pot noise for two weeks, the repairman knows he won't get anything undersigned by me before I am given an accurate and logical mechanical diagnostic explanation for it in plain words. When I am myself undergoing any kind of medical care as a patient, I feel entitled to understand it all in detail. Let us not consider our patients as different from ourselves in that respect: they also expect to understand what is going on with their own bodies¹.

Mélanie tried several times to translate her case history into common human language, but I had to do it myself: "The patient is a 49 years old woman with abundant and painful menses, experiencing general fatigue and pain at the moment of penetration during sexual intercourse." I told Mélanie how an open dialogue with patients may motivate them in a positive way to adapt to lifestyle changes and treatments required by their condition.

Mélanie then informed me of her surprise: she hadn't done this type of communication exercise for her whole seven years 'medical training, so she felt far more at ease to discuss the patients' cases outside their presence.

How have we gone to that point regarding the training of our students after so much touting of slogans like "*Physician-patient partnership*"?

How come we have lost to such a degree the minimal ability of clear mutual communication with our patients?

The only reason are bad habits that have been encroaching our practice more and more, easy to change:

- The exclusive use, among professionals, of a common scientific vocabulary where the words that used to denote common bodily states and actions (such as tiredness, pain, menses, sex act, penetration) are now excluded under the fear of sounding scientifically illiterate.
- Discussing patient cases more and more systematically outside of their presence, which of course entails an increased risk of medical error and losing the very useful patient feedback.

Therefore, let us train all our students to discuss any patient case in the patient's actual presence (except for very rare exceptions) and check for the patient's personal understanding of his own record, this as a regular professional habit to be acquired and kept: those communication skills shall save time and reduce misdiagnoses resulting from lack of proper patient feedback.

More generally, we should also take up the habit, when it comes to inter-colleague discussion, of speaking in a "bilingual way", that is to say in medical terms but also in plain language (English or French) as the former endows the professional practitioner with a false aura of superiority that has no justification in this era of partnership between professionals and patients.

Our own specialized language may sometimes save several lines in a chart, but experience shows it is rarely more accurate for the denotation of symptoms experienced by patients. Our medical language has resulted in the loss of the most essential aspect of communication between patients and ourselves: to be understood.

Let's go bilingual, at last.

Reference

1. Entretien motivationnel; Miller W.R. et Rollnick S. L'entretien motivationnel - Aider la personne à engager le changement, trad. par LECALLIER D., MICHAUD P., Paris, Inter Editions, 2013, pp.12.*L'entretien motivationnel est un style de conversation collaboratif permettant de renforcer la motivation propre d'une personne et son engagement vers le changement*

<https://www.afdem.org/entretienmotivationnel/>