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How to communicate effectively about complementary, integrative and alternative medicine

Abstract and key points

Health professionals and cancer patients: how to communicate effectively about complementary, integrative and alternative medicine

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Background

The use of complementary and alternative medicine (CAM) in oncology settings is widespread < http://www.cam-cancer.org/About-CAM-Cancer#rationale. Improving CAM-related communication within the sphere of conventional cancer care is crucial to patient safety, optimal treatment outcomes and the patient's trust in healthcare professionals.

Studies have revealed, however, that only a few oncologists and physicians feel comfortable discussing CAM with cancer patients. This situation may have arisen as the result of various barriers to communication, including insufficient scientific knowledge, of the risks and positive outcomes of CAM. Other factors might involve lack of time during clinical consultations and also concerns about the financial costs associated with CAM use.

Although many cancer patients express a wish to disclose their use of CAM to healthcare professionals, less than 50% actually do so. Of the cancer patients raising the subject of CAM use in oncology settings, quite a number have reported negative experiences as a consequence; some of these may even have led to a decision

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to delay or even decline important conventional treatment. Effective communication is thus an essential component in upholding the cancer patient's trust in healthcare professionals, as well as acting to encourage the patient's likelihood of adhering to evidence-based recommendations. Delays in conventional cancer treatment, or negative interactions between conventional and CAM treatments, might thereby be more effectively avoided.

Practical guidelines - the 'how' and the 'what'

It has been emphasised that conventional healthcare professionals have an ethical responsibility to open a dialogue with their patients regarding the use of CAM. Being a CAM expert is by no means necessary in order to engage in a respectful, balanced and helpful discussion about CAM use with cancer patients. Effective communication on the use of CAM requires the use of such general skills as:

- experience in listening
- encouraging hope
- the ability to convey empathy and compassion

An effective and supportive communication process can be divided into the 'how' and the 'what'. The 'how' relates to the process of information exchange in shared decision-making, the 'what' relates to the content of that information exchange, which would be based on reliable information resources such as this website (http://www.cam-cancer.org/) and others, such as the Society for Integrative Oncology (http://www.integrativeonc.org/) and the US National Center for Complementary and Alternative Medicine (http://nccam.nih.gov).

The 'how' relates to:

- change in clinical attitude
- process of information gathering
- shared decision-making integrated with empathic communication
- addressing patients' unmet physiological and emotional needs
- discussing issues of uncertainty

Truly supportive communication behaviour has been described in the literature as being affective, socio-emotional and interactional, with a focus on each patient in the context of their individual psychological and social circumstances. In-depth studies of cancer patients who use CAM show that such patients are searching for:

- patient–provider relationships based on mutual trust
- doctors who understand patients' individual illness experiences and healthcare needs
- doctors willing to discuss patients' use of CAM openly
- doctors who value patients' own efforts involving treatment processes
- doctors who address issues related to mind, body and spirit

From the perspective of a cancer patient using CAM, the overall goal in effective communication between

physician and CAM user is to ensure that the decision-making process is shared, and also supported by the best available evidence. Medical evidence is essential, but so is an understanding of what actually influences a patient's quality of life and how patients make their decisions. It has been maintained by CAM users that they have, on occasion, become aware that their healthcare professionals harbour uncertainties about CAM because of their own lack of relevant education and scientific information about it. Under such circumstances, patients would prefer that physicians and oncology experts admit to those uncertainties, particularly with regard to the possible benefits and risks associated with a CAM treatment. In light of this, the professional could then help patients in their search for reliable information.

Schofield and colleagues (2010), Frenkel and colleagues (2010, 2014) and Salamonsen (2013, 2015) have provided recommendations for how healthcare professionals could communicate more effectively with their patients regarding CAM. Their recommendations are summarised here:

- Explore what conventional treatments have been tried, have failed or have been avoided because of safety, quality-of-life concerns, costs or other issues
- Explore and respect different understandings of health, illness and treatment leading to the patient's interest in CAM
- Explore and discuss the patient's understanding of prognostic factors associated with his or her disease stage and the potential benefits and risks of conventional therapy
- Explore and discuss the patient's understanding of the situation, such as self-defined healthcare needs and levels of support from family, community, faith and friends
- Respect cultural and linguistic diversity
- Explore and respect the patient's spiritual and religious values and beliefs
- Explore and respond to the patient's emotional state
- Explore and discuss perceptions of benefits and risks associated with both conventional cancer treatment and CAM
- Explore the patient's main concerns about integrating CAM into his or her cancer care
- Provide balanced, evidence-based advice based on reliable sources of CAM information
- Summarise discussions about treatment decisions
- Include/document such discussions in medical records
- Monitor and follow up

Literature

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Document history

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