

Compassionate, Patient-Centered Care in the Digital Age

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Reflecting on My Patient Experience

Doctors told me I had a large tumor attached to a nerve in my spinal cord. The tumor was precariously expanding into my chest cavity, and there was a likelihood of paralysis if I did not act. Surgery was my only option.

I am a professor of medicine and a board-certified anesthesiologist who has treated countless patients while educating hundreds of students on compassionate care. But it was not until I was on the receiving end of that care that I truly understood the vital importance of what I taught. My experiences as a patient taught me to value human connections—a lesson known to many of my colleagues in the health professions.

The challenge for all of us is balance. Pressure to maximize efficiencies through health care technology means that genuine, face-to-face patient interaction is gradually disappearing. This is especially true in medicine, where time is an ever-diminishing commodity. As a patient and now survivor, I saw firsthand the tension between technological efficiency and personal relationship building.

Robotic surgical techniques added a high degree of precision to the procedure I went through. Make no mistake – I am forever grateful to my surgeons for their skill in managing the technology. But what I value most is the team of experts from multiple professions who worked together to support me through a successful operation to remove a rare tumor. When I emerged from postsurgical anesthesia to excruciating and intractable pain, with little relief from the administered medications, it was the nurse's gentle touch and her comforting words that touched me most deeply —“Breathe. Stay strong. I am here with you.”

Busy providers who found the time for a real conversation, emphasized shared decision making, and remained positive throughout our interactions had the most significant impact on my mental and physical health outcomes. When providers remained calm no

matter the situation and expressed empathy with all of my challenges, I felt assured that I could trust them and the information they shared with me. With trust in my providers and treatment, I started my journey to survival with confidence.

As my own experience demonstrated, research shows that effective communication focused on building trust and rapport between patients and providers is associated with improved patient outcomes [1]. Patients want to fully understand their choices, including all pertinent data about their condition, so they can make informed decisions.

I recognized the value of provider-patient relationships as a physician, but I truly *learned* the power and significance of these relationships as a patient-survivor.

Increasing Dependence on Technology

With the rise of electronic medical records, virtual apps, robotic surgery, and different forms of telemedicine, doctors' relationships with patients are becoming more physically and emotionally distant – resulting in highly structured interactions with limited time for real conversation. In this era of “machine medicine,” providers are pressured to value input from health applications and electronic health records as much as information gathered from face-to-face interactions with patients. Health care professionals rarely have time to sit down and discuss patients' critical medical and social needs. Building real connections with patients in the digital age will be a significant challenge for providers.

In some ways, deficiencies in medical education curricula contribute to this challenge. Medical education is struggling to keep up with technological advances. Artificial intelligence tools gather and place an unprecedented amount of data at the fingertips of health care professionals. Doctors and medical students are now required to master a deeper understanding of medical

information within a context of probabilities, uncertainties, and risk. While vitally important to advancing medicine and medical education, these increased pressures threaten what is, in my opinion, the most important role of physicians and other care providers – forming a bond with patients.

The Case for Compassionate Care in Medical Education

This apparent conflict between efficient and compassionate care may begin to be addressed using a few simple but transformative approaches within medical education. Best practices for patient-physician communication, at their root, must consider that patients have varying levels of comfort with medical information [2]. At the same time, providers must balance patients' comfort with the fact that shared decision making mandates full, honest, and open communication. Realizing this ideal requires patients who can guide providers in how to actively listen, administrators who acknowledge physicians' time constraints, and faculty who guide learners in how to provide the best, safest care to patients in the most compassionate way possible.

While I was in medical school, I wish there were patients to teach my classmates and me the importance of compassion in the same way we learned about organ systems and statistics. Adding patient perspectives, like mine, to the medical curriculum requires active collaboration among educators, patient advocates, medical schools, and practicing clinicians [3]. Specifically, educational programs can integrate simulation training on empathy and compassion early in the curriculum, focus on shared decision-making skills throughout all aspects of education, and teach students the risks and benefits of shared decision making for both patients and providers.

The role and potential of medical technology, of course, should not be undervalued. But, rather than allowing technology to create distance between patients and providers, we need strategies to embrace technology in ways that facilitate and enhance patient-provider bonds – and we should develop and teach these strategies in medical schools.

Bridging Compassionate Care with Technology

The patient-provider relationship must start with a face-to-face connection. However, once a bond is established, properly designed technology can enhance that connection. In fact, in some ways and for some people, digital communication technologies are an

ideal platform to meaningfully incorporate patients into the care team. These technologies, which tend to be relatively user-friendly, enable patients to provide continuous feedback and serve as an efficient hub to share needs, questions, or concerns [2]. By leveraging technologies such as these, providers can strike a balance between compassionate care and technological efficiency.

When I reflect on my journey, I realize that health professionals who listened compassionately and provided an opportunity for shared decision making helped me get through the toughest time of my life. It was through their humanity and compassion that I found the hope I needed to start my long, painful journey to survival and a productive life.

As time becomes increasingly scarce and increasingly valuable in the medical setting, it is critical that we learn to bridge compassionate care with technology. Technology can be an effective tool to supplement patient-centered care and shared decision making. Designing medical education and care delivery with this principle in mind will contribute to stronger bonds between patients and their care teams – and, hopefully, better mental and physical health outcomes.

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