

A Perspective on Doctor-Patient Communication in the Dental Office

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“Think like a wise man, but communicate in the language of the people.”
W. B. Yeats

The awareness of the importance of health literacy has synergistically combined with concerns regarding disparities in access to care, questions relative to patients rights, and the growth of consumerism to initiate a reevaluation of how the various health professions communicate with their patients on a daily basis. Practitioners are beginning to examine not only how they communicate but how well the information is being received, understood, and applied to create a more positive outcome for those they counsel and serve. These types of questions have been debated for several years within the dental community, and due to that ongoing discussion I believe the dental profession may be more advanced in this arena than other health professions.

Dentistry has been exploring this issue for quite some time since most people view dental treatment decisions as being more elective than those made in medical offices. Up until recently, this has seemed to be a reasonable assumption given that most dental problems were not perceived as being directly related to systemic disease or as potentially life-threatening. However, new research strongly suggests that there are indeed associations between chronic oral infections and heart and lung diseases, diabetes, stroke, and preterm low birth weight. Therefore, the ability to clearly communicate with patients has taken on a new level of importance from the perspective of the practitioner as well as the patient and other health professionals.

Communication Styles

Currently, dentists use a variety of approaches to help patients understand their oral health status and ways to help make it better. Since most dental school curriculums do not include courses to improve communication skills, most practitioners graduate without any guidance as to how to effectively deliver the information they have acquired. Many dentists don't go any further than merely telling the patient the results of the exam and the recommended treatment. There is no attempt to involve the patient in the discovery or decision-making process. While the paternalistic style of doctor-patient communication may have produced the desired outcome for patients of previous

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generations, members of the current generations want to be more involved in their health care. The rise of consumerism coupled with a more informed public has sown the seeds for a more interactive communication dynamic. In fact, many dentists have begun to define the people they serve as “clients” rather than “patients.” This change in perspective serves to remind dental teams that the people they serve want to be more involved in decisions regarding the care they receive. Many

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patients arrive in the practitioner's office having already done research on the Internet. They are better prepared to ask questions and no longer want to abdicate treatment decisions to the dentist or other members of the dental team. Today, clients seeking dental care expect to have proposed treatment plans presented in an understandable format and to have the opportunity to discuss the merits of possible alternative procedures. They want to be informed consumers and expect practitioners to provide the facts they need to make a decision that best fits their personal goals and values.

In order to assist patients in the decision-making process, some dentists have realized that they need to make a more concerted effort to deliver their findings in a comprehensible form. In fact, one of the more frequently cited barriers to oral health literacy identified by consumers is the practitioners' use of technical dental terminology during their conversations with patients. Although the use of dental jargon seeks to provide clarity when used among dental professionals, its use with consumers tends to widen the communication gap. Unfortunately, most dental teams have not been trained to convey technical thoughts using less intimidating terminology. In many instances, while the dental team may have spent an adequate amount of time informing a patient about their oral conditions and making sound treatment recommendations, the overusage of technical jargon results in patients leaving the office more bewildered than when they arrived.

To further complicate the issue, most patients are reluctant to admit they do not fully understand the explanation delivered by the practitioner. Exacerbating this is the fact that many dentists tend to be introverts and are not comfortable with confrontation. This lack of confrontational tolerance may imply to some patients that their questions are not welcome, thus setting up additional barriers to further understanding by both parties. To counterbalance this situation, many dentists who possess an introverted personality elect to utilize dental auxiliary personnel with more open communication styles to help patients feel more comfortable asking for additional information.

Dental Technology

The ever-expanding use of dental technology has greatly contributed to the ability of the dental team to bridge some of the communication gaps that previously existed in dentistry. Most of these new technologies seek to provide patients with the ability to better comprehend their oral health status. Others provide an opportunity for patients to view possible treatment options that may provide solutions. The first technological breakthrough in this arena was the intraoral camera. This device consists of a small camera lens and a light source positioned in a wand-like device that enables the operator to capture magnified, high resolution intraoral images that are instantly visible to both the patient and the practitioner on a video monitor. Using a close focusing lens, the camera captures views of the oral cavity that have previously gone unnoticed by the average patient. From a patient education and communication perspective, one

of the more useful features is the use of split screen views to illustrate and compare normal, healthy oral structures with those that may exhibit pathology. These images seem to stimulate both curiosity and concern from most observers. It provides the practitioner the opportunity to answer questions that, perhaps for the first time, are truly meaningful to patients since they can relate the images uniquely to their own personal situations or symptoms. When patients are presented with personalized health information and given the opportunity to ask more questions, an environment is created that is much more conducive to learning than situations where patients are presented with a generic brochure that may be poorly written and difficult to understand.

Another technological innovation is the use of digital radiography. In addition to allowing dental personnel to take radiographs at a much lower exposure level than that of traditional radiographs, the instantaneous viewing of captured radiographic images is a major step in assisting clinicians in their diagnostic procedures. These images are magnified and projected on a computer monitor providing greater detail and legibility than the small intraoral films used in the past. Dental team members utilize computer monitors located in the treatment rooms to assist patients in learning what structures are visible on the image and why they are relevant. Like the images taken by the intraoral camera, digital radiographic images may be used as a baseline measurement as well as an adjunct to dentists when helping patients to understand their current dental conditions. Conditions such as decay, abscessed teeth, impacted teeth, and periodontal disease are readily visible on digital radiographs.

Specially configured digital cameras have also become available and are a wonderful communication tool. Using a macro lens and specialized flash designs, these cameras can capture oral conditions in great detail. Those images are useful in many ways to the practitioner for the benefit of the patient. A growing number of dentists use the digital camera as frequently as radiographs to render a diagnostic opinion, especially when the area of concern includes a soft tissue component. Examples of soft tissue parameters that are better illustrated using a photograph include gingival inflammation, swelling, recession, or the presence of exudate. Prior to rendering a diagnostic opinion, those images may be sent to other practitioners, including dental specialists, to provide the most comprehensive information to the patient.

The field of dentistry that has experienced the most growth in recent years is cosmetic dentistry. Practitioners who provide cosmetic services have become highly dependent upon digital photography to communicate with patients. Sophisticated software programs utilize imported digital photographs that permit dental personnel to provide clinically accurate renderings of various cosmetic procedures for patient consideration. Dentists also use these images to illustrate desired cosmetic changes to laboratory personnel who may not have the benefit of direct communication with the patient.

Any discussion of technology relating to patient communication would be incomplete without mentioning the

growing use of software programs that allow patients to better understand treatment options. These programs usually provide visual presentations of treatment choices delivered in easily understandable terms by a professional vocalist. Some vendors even offer interactive software that allows the viewer to control not only the subject of the information but also how the message is delivered. Although these new technological advances can come with a steep price tag, most dentists feel that the expense is justified since it invariably helps patients make better choices. It also provides the patient with a consistent message, thereby eliminating the possibility that important points might be inadvertently omitted from the discussion by the dentist or auxiliary personnel.

While technology has definitely had a positive impact on dentistry's ability to communicate with patients, there is no substitute for the personal touch. In fact, any attempt on the part of the practitioner to humanize the health care experience will be appreciated. Most people prefer health care professionals who are truly interested in them as persons rather than just being remembered as a number or a name on a chart. The challenge for the practitioner is to develop a delivery model that allows this interaction to take place without sacrificing timeliness and efficiency. Many practitioners have come to appreciate the value of incorporating a brief interview into their new patient experience. The dentist or a trained auxiliary can spend this time reviewing the patient's health history, clarifying prescription drug information, and asking open-ended questions that will help discern the patient's expectations for the day's visit as well as their oral health literacy level. A highly trained and intuitive person can gather a great deal of information in this short time frame that will support the rest of the dental team in their efforts to personally connect with this particular patient. Following the interview, some patients will appreciate a brief office tour. This affords an opportunity for the staff to familiarize the new patient with the physical layout of the office while also providing the chance to meet other team members. It is also a great time to introduce some of the technology that is available. The astute auxiliary will not only explain what the technology does but also how it helps patients better understand and participate in their treatment.

Some Ideas Enhancing Communication

There are several ways dentists can help patients make better decisions relating to their oral health. First, we need to realize that most patients are not well-informed about their oral health. Since the oral cavity is not readily visible, and many

dental disease processes remain asymptomatic for long periods of time, dentists and auxiliary personnel need to make sure that they schedule enough time to allow patients to ask questions and learn more about their conditions. Second, dentists should consider purchasing various technologies that enable the patient to learn via the modality that is most effective for their individual learning style. Third, dentists and their teams need to evaluate their own ability to communicate with their patients. How well are they able to assess a patient's literacy level? Do they have a "one size fits all" approach or are they able to adjust their communication style to one that best serves the patient's level of understanding? During my years in private practice, the ability to individualize and tailor my communication was clearly the most challenging for me. Remember that dentists usually have contact with every patient who walks in the door, even those who are there for their routine continuing care visit. This means that the dentist must be able to change his or her style of personal interaction several times within a relatively brief time frame. With experience, practitioners will be able to identify those patients who want to "get in and get out" as well as those who look at their dental appointment as a social occasion.

Conclusion

The May 2000 document, *Oral Health in America: A Report of the Surgeon General*, drew national attention to the importance of oral health and provided scientific evidence of the integral relationship between oral health and general health. It alerted the entire medical and dental community that the gap between the oral cavity and the rest of the body needed to be addressed in a way that informed patients and changed behavior in an effort to improve the quality of life for all Americans. Seven years later, oral health literacy remains a challenge. America continues to become a more diverse country. Each ethnic background exhibits its own unique culture, customs, and communication preferences. Recognizing those challenges, dental education has begun to incorporate communication training into its curriculum. Dental technology continues to be developed that will help enhance the ability of patients to understand more about their oral health. It is incumbent on those who did not receive formal communication skills training to assess their own abilities. Then, they can take the appropriate steps to ensure they have done everything possible to provide their patients with the information they need to become partners in both their dental treatment and the prevention of future oral health problems. **NCMJ**