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# Doctors must do a better job of talking and listening to patients

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February is Heart Month, a time when our thoughts turn to the love of our sweethearts and, for many, our love of chocolate and beautiful flowers.

It would be a convenient segue for me, as a cardiologist, to offer a Heart Month homily about the importance of maintaining a healthy heart, but my thoughts are more diverse this month. My focus is turned to how we, as physicians, can better express our love for our patients and for our profession.

There is no better way to accomplish those intentions than to acknowledge, in word and deed, that patients and doctors have fundamental rights, and that with those rights come inherent responsibilities. Neither group's rights and responsibilities are subordinate to the other. Rather, they are equal and mutually inclusive.

Physicians who routinely confront illness and death can become jaded or indifferent. For some, it is a coping mechanism, a way to distance themselves from the debilitating despair they see and feel in their patients every day. Other doctors use their busy schedules as excuses not to engage themselves in their patients' lives.

Falling into that trap of indifference, or otherwise failing to provide attentive, whole-person treatment to patients, happens far too frequently. It is a flaw in the health-care delivery system that must be corrected, and if physicians are unwilling to police themselves on this front, they can count on patients and patients' advocates to do it for them.

In survey after survey, patients are dissatisfied with the way physicians communicate, both with the patient and with other physicians. There really is no excuse for that shortcoming, but there may be explanations.

One theory is that miscommunication is a side effect of the age of specialized medicine. With so many medical specialties and subspecialties, it is not uncommon for a patient to be under the care of four, five or even six doc-

tors. Getting that many physicians to communicate in a meaningful way about a single patient is not just difficult, it is rare. In the meantime, the patient and his or her family are saddled with the daunting task of collecting information from several sources who are basically speaking a foreign language, and trying to interpret it and process it so as to make an informed decision about treatment.

Of course, all decisions about treatment should be shared by the doctor and the patient, or the patient's designated representative. But those decisions should be made only if both doctor and patient agree on these points:

- Patients and physicians both have a right to be heard.
- Patients and physicians both have a responsibility to listen.
- Patients have a right to know their treatment options. Physicians have a responsibility to inform the patient of all treatment possibilities, not just the one recommended by the doctor.
- Patients have the right to expect not only competence from their physician, but also kindness and compassion. (The latter skills may be more difficult to quantify, but they are nonetheless essential elements in the doctor-patient relationship.)

A more detailed list of patients' rights and responsibilities, as set down by the state Legislature in Florida Statute 381.026, can be found at [www.doh.state.fl.us/mqa/profiling/billofrights.htm](http://www.doh.state.fl.us/mqa/profiling/billofrights.htm).

Every patient, and perhaps more importantly, every physician, should be constantly aware of these requirements. In the meantime, I implore my colleagues in the health-care industry — doctors, nurses, technicians, office managers, billing clerks and receptionists — to show they have heart during Heart Month and throughout the year, by affording every patient the time, compassion and dignity they deserve.

Remember, the best way to show you love your job is to show love to the person who makes your job possible — the patient.