

Letter to Editor

# Journal of Musculoskeletal Surgery and Research



# Improving physician-patient communication in rehabilitation: Is the patient's understanding truly verified?

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#### Dear Editor,

Effective communication between health-care providers and patients is critical for optimal rehabilitation outcomes. Despite growing awareness of its importance, there remains a concern that patients' understanding is not adequately verified. This issue can have serious repercussions on clinical and rehabilitation progress, adherence to therapy, and, ultimately, the patient's outcomes and quality of life.

In rehabilitation, the complexity of conditions and treatment plans requires patients to understand the information provided clearly and precisely. Lack of understanding can lead to errors in following the rehabilitation protocol, such as incorrect exercise execution or misuse of assistive devices, significantly compromising the effectiveness of treatment.<sup>[1-3]</sup> Patients often do not fully grasp the information, even when health-care providers believe that they have explained instructions adequately. This raises a critical question: Do health-care providers truly verify if patients understand the instructions at the end of their visit? And if not, why is this practice not more widespread?

Recent studies have shown that many patients leave medical consultations with an incomplete understanding of the information given. The reasons for this phenomenon are multifaceted. First, the use of complex medical and technical terminology can make it difficult for patients to follow explanations. Health-care providers, accustomed to their professional language, often fail to adjust their discourse to the average patient's knowledge level. Second, the anxiety and stress that many patients experience during medical visits can negatively affect their ability to absorb information regardless of their level of education. Concerns about their health, combined with the pressure of a limited consultation time, can create a situation where patients listen but do not comprehend. Choosing the right time to give important information is important, as if the health-care provider is providing the information after surgery to the patient or the patient's relatives when they are in pain or when the parents are concerned about the patient.<sup>[2,4-8]</sup>

Another significant factor is the information overload provided during the encounter. Patients often need to absorb a large amount of data in a short period, which can be overwhelming, especially when there is new unexpected information.

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In addition, linguistic, cultural, and cognitive differences can further complicate communication, making it even more difficult for some patients to understand medical instructions.

An effective method to improve patient understanding is the teach-back technique. This technique involves asking patients to repeat the information given in their own words. Despite its proven effectiveness, the use of the teach-back technique has yet to be widely adopted in clinical practice.<sup>[9,10]</sup> Health-care providers are often under pressure to see a large number of patients in a limited time and may use a different method, considering it time-consuming. However, the reality is that patients' lack of understanding can lead to more frequent subsequent visits and complications that could have been avoided, thus increasing the overall workload.<sup>[1]</sup>

Other strategies, in addition to the teach-back technique, can improve patient understanding. Visual and written support materials, such as brochures, diagrams, and educational videos, can help patients remember and better understand the information. Promoting an environment where patients feel comfortable asking questions is equally crucial. Often, patients may feel intimidated or embarrassed to seek clarification, fearing they might appear ignorant or take up too much time.

Despite evidence supporting these practices, the question remains about how consistently health-care providers apply them. The question we must ask is whether health-care providers systematically verify patients' understanding at the end of each visit. The answer seems to be negative. Many providers may believe that their job is complete once they have provided the information, but the reality is that the work is only done once they are sure the patient has truly understood.

It is therefore essential that medical and rehabilitation education programs include a greater emphasis on effective communication techniques and verifying patient understanding. Health-care providers must be aware that a small time investment in ensuring patient comprehension can lead to significant benefits in adherence to medical instructions and rehabilitation protocols, leading to better clinical outcomes.

# RECOMMENDATIONS

### Communication training in educational programs

- Undergraduate level: Integrate communication skills training into curricula, including techniques like teachback.
- Postgraduate level: Continue emphasizing communication skills in residency programs and ongoing professional development.

#### Teach soft skills

• Prioritize soft skills such as empathy, active listening, and emotional intelligence in medical training.

#### Use visual and written support materials

• Provide brochures, diagrams, and educational videos to enhance patients' understanding of medical instructions.

#### Implement the teach-back technique

• Use the teach-back technique, asking patients to repeat information in their own words to ensure they have understood.

#### Create a supportive environment

• Encourage patients to ask questions and express concerns without feeling judged or rushed.

# ETHICAL APPROVAL

The Institutional Review Board approval is not required.

# DECLARATION OF PATIENT CONSENT

Patient's consent was not required as there are no patients in this study.

# USE OF ARTIFICIAL INTELLIGENCE (AI)-ASSISTED TECHNOLOGY FOR MANUSCRIPT PREPARATION

The authors confirm that there was no use of artificial intelligence (AI)-assisted technology for assisting in the writing or editing of the manuscript and no images were manipulated using AI.

### **CONFLICTS OF INTEREST**

There are no conflicting relationships or activities.

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