

Medical Letter

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Understanding Approaches to Empathy in Dermatologic Patient Care

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Journal of Cutaneous Medicine and Surgery 00(0) 1-2
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DOI: 10.1177/12034754221100191
journals.sagepub.com/home/cms



Keywords

dermatology, empathy, quality, improvement

Empathy is integral to medical practice and has positive impact on physicians and patients. It is challenging to provide empathetic care while remaining efficient in clinical work. This study aimed to gather perceptions among dermatology clinic staff physicians and residents and develop actionable strategies for empathetic patient care.

We employed a qualitative thematic study design. A 2 hr virtual empathy educational program was used—the Learning Empathy and Efficiency in Practice, or LEEPTM program designed by Eli-Lilly Canada. The education consisted of a PowerPoint presentation with videos depicting different stages of a patient clinic visit. This program was presented to a total of 21 physicians, 5 practicing dermatologists (clinical years of experience ranging from 11 years to over 20 years) and 16 resident physicians via Zoom on October 7, 2020, followed by focus group discussions and individual survey feedback regarding empathy. From six group discussions and survey responses, a total of 101 comments were collected and grouped per clinic visit stage.

Four overarching themes were identified inductively from textual comments which informed the development of empathetic interventions. Theme one was patient-centered communication and the subthemes were personalized communication, delays communicated to patient and care team and providing guidance for empathetic physical examination. The second theme was maintaining patient dignity, respect and comfort, based upon subthemes of positive body language and maintaining patient privacy and choices. The third theme was shared-decision making from subthemes of active listening, patient involvement, and patient dermatological understanding. Final theme was improving patient waiting room experience (Supplemental Materials).

From these themes, practical empathetic interventions were identified: (1) annual education regarding empathetic practices; (2) empathetic scripts and tip sheets for healthcare staff; (3) a patient welcome/orientation poster for waiting areas; (4) patient waiting time tracking labels; (5) provision of informational resources pertaining to patient diagnoses

and therapies; and (6) patient surveys assessing patient experience of empathy during the clinic visit.

Interventions identified in this study have been supported by literature. The use of specific skills by physicians acquired from empathetic education enhanced patient outcomes.² Another study documented the positive impact of using welcome informational signs in an orthopedic and plastic surgery clinic.³ Tracking patient time throughout stages of a clinic visit was trialed in a study, noting reduced patient time spent in the clinic overall.⁴ Informational resources are cited to enhance patient understanding of their medical condition.⁵ Identified interventions of empathetic scripts and tip sheets for healthcare staff, and patient survey about empathy will be investigated to determine effect, adding to the literature.

Purposive sampling of participants was used, which may have introduced selection bias as the data collected represent physician perspectives only; other members of the care team did not participate. Use of an artificial case study educational approach may have biased participant opinions and perspectives. The program provided background empathy knowledge such that participants could recognize and develop empathetic actions. Physician understanding and application of empathetic practices enhance interactions with patients, and serve as a role model for empathetic behaviors in patient care.

Declaration of Conflicting Interests

The author(s) declared no potential conflicts of interest with respect to the research, authorship, and/or publication of this article.

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Funding

The author(s) disclosed receipt of the following financial support for the research, authorship, and/or publication of this article: We declare the use of Eli-Lilly Canada's LEEPTM (Learning Empathy and Efficiency Program) presentation in this study, and a speaker honorarium received from Eli-Lilly Canada. The honorarium was used to buy thank-you gifts to the participants following the presentation. The gifts were not known to the participants before, during the presentation, nor after feedback parts of the study, and did not serve as an inducement to participation.

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Supplemental Material

Supplemental material for this article is available online.

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