

Person, Patient, Public, Peers: the four pillars of physician practice

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Abstract

More often than not, the root cause of unsatisfactory diabetes care can be traced to inappropriate communication. In this brief article, we share the four pillars of communication that a successful physician should be able to address: person, patient, public and peers. A good physician should be able to understand herself or himself, communicate with patients and the society at large, and handle professional relationships. This quadruple helps us identify our strengths and shortcomings and facilitates attempts at self-improvement, so as to improve the quality of our life.

Keywords: diabetes distress, compassion fatigue, psychosocial aspects, professional hazards.

Introduction

Physicians face multiple challenges and obstacles in their personal and professional life.¹ These issues may create difficulties in achieving optimal professional satisfaction and happiness. More often than not, the root cause of professional dissatisfaction can be traced to inappropriate communication. In this brief article, we share the four pillars of physician practice: person, patient, public and peers. This quadruple helps us identify our strengths and shortcomings and facilitates attempts at self-improvement, so as to improve the quality of our life.

The four pillars

The physician is surrounded by (and is an inclusive part of) four different stakeholders:² his or her persona, the patients whom he or she treats, the public or community which he or she lives in, and peers (from the same profession and/or different disciplines). To deliver effective services to patients, one has to engage in meaningful dialogue with them, the public and one's peers. This, however, is easier said than done. Communication³ may be one-sided (from physician to patient), may be non-

existent (between peers), or may be held to ransom by conflicting viewpoints (such as e-hearsay and professional trolling). The physicians own self-awareness and psychological health may limit his or her ability to achieve desired professional goals, by precipitating compassion fatigue and/or burnout.¹

The persona

Each physician should analyze one's thoughts, words and actions, and understand the motivating factors which drive these. Using psychometric tools, one can appreciate one's own psychological make. Diagnostic tests for compassion, fatigue and burnout, coupled with screening tests for anxiety and depression, help in early identification of disorders. This, in turn, allows timely addressal of these professional hazards and prevention of potential complications.

The patient

Diabetes cannot be managed without two-way communication between patient and provider. This process also termed as 'diabetes therapy by the ear'⁴ includes both careful listening and empathic counseling. Physicians must learn and inculcate the skill of diabetes therapy by the ear. This will help ensure effective bidirectional communication, and help enhance satisfaction and therapeutic outcomes. Conditions like diabetes distress, which are commonly encountered in persons living with diabetes, can be resolved through appropriate communication. Discordance between suggested management plans and their acceptance can lead to poor adherence and persistence. This can be managed by creating equipoise through information sharing, and practicing shared decision making.

The public

Diabetes is said to be a social disease or community disease, and justifiably so. The person with diabetes lives as part of a larger community, and is influenced by it. Thus, an astute physician should communicate not only with the patient and his/her family, but with society or 'the public'.² Handling e-hearsay, building up a brand for one

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self, and being trusted by one's community are important aspects of a physician's career. The concept of diabetes therapy thus includes a third pillar, that of filtering our patient's ears from unwanted misinformation, and ensuring that the correct knowledge reaches them. Society's help is also required to provide a diabetes-friendly psychosocial, culinary and physical environment for people to live in.

Peers

No health care professional can manage diabetes single-handedly. We all need the help of peers to do so. Thus, a prerequisite for efficient diabetes care is to ensure effective communication between peers and colleagues. Sadly, though, this is easier said than done. Professional trolling is common place in the medical guild, and may hamper efforts to control diabetes. Thus, a physician's competencies should include handling such trolling, and creating avenues for communication amongst peers.

Communication is the key

The common thread between the 4Ps: persona, patients, public and peers, is communication. Thus, this concept note underscores the importance of communication, which creating a rubric to make it user-friendly. The discussion in the preceding paragraphs should stimulate readers to introspect their own strengths and weaknesses, and encourage them to strive to improve themselves continually.

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