

## Simple intervention helps doctors communicate better when prescribing medications

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When it comes to prescribing medications to their patients, physicians could use a dose of extra training, according to a new study led by a UCLA researcher.

In previous studies, Dr. Derjung Tarn and her colleagues found that when doctors prescribed medicines, the information they provided to patients was spotty at best, they rarely addressed the cost of medications and they didn't adequately monitor their patients' <u>medication adherence</u>.

The logical next step, Tarn said, was to devise an <u>intervention</u> aimed at improving how physicians communicate to their patients five basic facts about a prescribed medication: the medication's name, its purpose, the directions for its use, the duration of use and the potential <u>side effects</u>. And it appears to have worked.

Tarn and her co-researchers found that physicians who completed the training demonstrated a significant improvement in how they communicated this crucial information. Compared to a control group that didn't receive the training, these doctors discussed at least one additional topic out of the five—and they sometimes went beyond the basics, touching on other pertinent facts about medications that are important for patients to know.

The intervention is described in the January issue of the journal Annals



## of Family Medicine.

"We were pleasantly surprised to see that a simple intervention was effective in improving the content of discussions," said Tarn, the study's lead author and assistant professor of family medicine at the David Geffen School of Medicine at UCLA.

The researchers conducted a controlled clinical trial between February 2009 and February 2010 with 27 primary care physicians and 256 patients. The training consisted of a one-hour interactive educational session that encouraged doctors to communicate the five basic facts about prescribed medications. The researchers also gave the participating patients a flier listing the five facts. In addition, they recorded the audio of the physician–patient interactions. The success of the physicians' communication of the key facts to patients was measured using the Medication Communication Index, or MCI.

The researchers found that the mean MCI for the physicians in the intervention group was 3.95 out of five, compared with 2.86 for those physicians who didn't receive the training. The intervention-group doctors also received higher ratings from their patients on how they communicated information about medications than did the physicians in the control group.

And, significantly, the training resulted in more than just better communication about the medications the physicians prescribed, according to the study.

"Interestingly, higher MCI scores also were associated with more reports of communication about topics not directly included in the intervention," the researchers write. "For example, the intervention encouraged physicians to discuss potential medication side effects with patients, but patients also reported better communication about the risk of



experiencing side effects and what to do if side effects occurred."

The study has some limitations. Patients were predominantly white, most had at least some college education, and there were more Hispanics than African Americans. Also, having an audio recorder in the examination room may have enhanced communication for <u>physicians</u> in the intervention group more than for those in the <u>control group</u>, who were unaware of what the researchers were studying. In addition, the researchers didn't examine the doctors' style of communication, and they don't know if any additional time spent talking about new prescriptions might have detracted from conversations about other topics.

Still, the study suggests "that a brief, practical intervention can improve physician communication about newly prescribed medications in ways that affect <u>patients</u>," the researchers write. "The intervention should be tested for its clinical impact."

Provided by University of California, Los Angeles

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