

Patient, doctor communication priorities differ in ulcerative colitis

February 11 2019



(HealthDay)—There is discordance in communication priorities for patients with ulcerative colitis (UC) and their gastroenterology physicians (GIs), and the emotional impact of UC should not be underestimated, according to two studies presented at the 2019 Crohn's & Colitis Congress, held from Feb. 7 to 9 in Las Vegas.

Jean-Frederic Colombel, M.D., from University of Chicago Medicine, and colleagues surveyed eligible adult patients with UC; data were included for 2,100 patients and 1,254 GIs. The researchers found some overlap between patients and GIs in their priorities for discussion during routine appointments. For patients, the top priorities in discussions were ability to manage symptoms, symptoms/problems experienced since their last visit, how to control inflammation, and [cancer risk](#) (32, 29, 29, and 24 percent, respectively); the highest priorities for GIs were symptoms since the patient's last visit, the patient's ability to manage symptoms, and the side effects of the patient's current treatment (53, 40, and 40 percent, respectively).

David T. Rubin, M.D., also from University of Chicago Medicine, and colleagues surveyed the same patient group to examine views on emotional health. The researchers found that 21 and 15 percent of patients had been diagnosed with anxiety or depression; as part of their UC management, 7 percent were seeing a psychiatrist, psychologist, or therapist. Eighty-four percent of patients found UC mentally exhausting. Only 7 percent of GIs and 13 percent of patients prioritized discussing the emotional impact of UC. Fifty-two percent of [patients](#) felt comfortable having discussions about emotional concerns with their GI.

"The mental burden and exhaustion of UC should not be underestimated and GIs need to initiate these discussions during consultations," Rubin and colleagues write.

One author from both studies was employed by Pfizer.

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Citation: Patient, doctor communication priorities differ in ulcerative colitis (2019, February 11)
retrieved 25 April 2024 from

<https://medicalxpress.com/news/2019-02-patient-doctor-priorities-differ-ulcerative.html>

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