



Making sense of communication

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It would be gratuitous of me to remind RHIME's readers of how important communication is in medicine – enough is spoken about it already, and I doubt if there is anyone who does not understand and accept its importance in our field.

We communicate in many ways – most commonly through spoken language. In the words of Paulo Coelho, “Life is short. There is no time to leave important words unsaid.”[1] That being ‘said’, does the cacophony of words make us forget that communication involves all of our senses? Are other means of communication receding into the subconscious or passing unnoticed in our rush to use a convenient, obvious mode?

Consider the patient who does not know our language – how do we communicate with her? How do we listen to one who cannot speak? Don't veterinary surgeons communicate with their patients? What about those who cannot hear - how do we talk to them?

We employ our other senses, that's how, even going so far as to use the sixth sense,

our gut instinct.

For this to happen we could start by becoming more mindful – we could train ourselves to notice the whole person and not just the part that is sick – ‘see’ the glances and the grimaces, the tears and smiles; ‘touch’ the trembling hand, the burning forehead; ‘hear’ the despondent sighs, the anguished moan; ‘smell’ the pathos of poverty or hunger; and ‘taste’ the fear of defeat and death, or the joy of success. We could employ all our senses to really communicate.

How do we train ourselves, and medical students, to acquire this skill? An engaging way that has little to do with the conventional didactic curriculum is via the humanities. Through exposure to the visual arts, and to theatre and dance and music, medical practitioners can learn and hone the vital skill of critical observation and non-verbal communication.[2-4]

RHIME has always given great priority to communication – I may go so far as to say that the very genesis of the journal lies in

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the need to talk about issues that get short shrift in specialty journals. These are the issues enshrined in the ABCDE paradigm that was developed as a result of humanities endeavours at the University College of Medical Sciences, University of Delhi.[5]

The ABCDE attributes - Attitude and Behaviour (ethical and professional), Communication, Diversity and Empathy - are not overtly targetted in the conventional curriculum, but are key to a successful patient-doctor, student-teacher, or interprofessional relationship. A medical

practitioner with these attributes, particularly good communication skills, can ensure that healing is holistic and involves the whole being of the sufferer rather than just the ailment.

The cover of this issue of RHiME is a piece of artwork that highlights the ability to communicate without words.[6] We invite submissions from our readers on issues that are pertinent to the medical profession and that can be explored through the lens of the humanities.

References

1. Paulo Coelho Writer: Official Site. 2009 Oct 12 [cited 2017 Jan 2]. Available from: <http://paulocoelhoblog.com/2009/10/12/quote-of-the-week-15/>
 2. Kasthuri RR, Vekatesan S. Picturing illness: history, poetics, and graphic medicine. RHiME. 2015;2:11-17.
 3. Narayan ST. Should knowledge of classical dance be essential for medical practitioners? RHiME. 2014;1:16-18.
 4. Moreno-Leguizamon CJ, Patterson JJ, Rivadeneira AG. Incorporation of social sciences and humanities in the training of health professionals and practitioners in other ways of knowing. RHiME. 2015;2:18-23.
 5. Dhaliwal U, Singh S, Singh N. Promoting competence in undergraduate medical students through the humanities: The ABCDE paradigm. RHiME. 2015;2:28-36.
 6. Ramalingam S. The Tree of Life. RHiME. 2017;4:3-4.
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