Original article

Exploring elements of an effective practitioner-patient relationship in dentistry

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Abstract

Purpose: The present study, having human-centered orientation (empathy) as an index of the doctor-patient relationship, aims to record the degree of user/patient satisfaction with the health services provided by the Department of Oral Medicine/ Pathology, Aristotle University of Thessaloniki.

Materials and Methods: Quantitative analysis of the research was conducted using a four-item anonymous questionnaire on satisfaction: (a) communication (b) information/awareness (c) respect/ acceptance and (d) interest/ understanding. The participants were 600 patients with oral diseases of various severity. Statistical analysis was performed using IBM Statistics SPSS 20 and 25.

Results: The participants were 61.7% females (median age 58.5 years) and 38.3% males (median age 60 years). According to the scores the patients' satisfaction was: a) communication (97.8%), (b) information/ awareness (85.8%), (c) respect/ acceptance (78.8%), and (d) interest/ understanding (67.7%).

Conclusion: Quantitative analysis of the empirical study established that the patients of Department of Oral Medicine revealed a fairly high rate of satisfaction. However some service parameters (interest/ understanding) need further attention and for this reason improvement proposals have been tabled.

Key words: Doctor- patient relationship, Healthcare provision, Empathy, Communication, Education.

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Introduction

The doctor-patient relationship includes the practical concepts of satisfaction and dissatisfaction. Some patients claimed that they were not given the opportunity to actively participate in clinical decision-making, the time spent with them was limited, and there were often long waiting for the medical call (Lionis, Pitelou, 2015). In addition, cases were recorded in which patients interrupted medical follow up for a certain period of time, with a high risk to impact their health, because they were dissatisfied with the doctor's attitude and conduct. The above overall dissatisfaction is reflected in a variety of publications in both Greek and foreign journal press, which record patients' complaints about such attitudes and conduct (Lionis, Pitelou, 2015 & Vargiami, Goula, 2017).

On the contrary, there is recorded evidence that the satisfy patient was the result of the use of simple and language. understandable respect. politeness, no time pressure during the medical call, clear instructions by the doctor, establishment of a friendly and atmosphere, adequate warm clarifications disease's diagnosis and management, as well as listening to the patients' concerns and expectations. Some researchers have documented that patients' expectations can be met when the medical procedure is humancentric patient rather than just as a medical case or incident (Lionis, Pitelou, 2015). Empathy, in surveys is understood as one of the dimensions of compassionate care and an indicator of the patient-centered care model, it underlines the significance of the interpersonal care and places particular emphasis patients' on values, expectations and wishes (Lionis, Pitelou, 2015 & Borghi et al, 2019 & Bodegard et al, 2019). Furthermore, this analysis suggests that such care is a prerequisite for the establishment of a meaningful and effective relationship and communication between the two parties (Lionis, Pitelou, 2015).

It should also be noted that while research studies have recorded patients' specific expectations from the medical encounter, medical staff in some cases are not care about them as much as they could (Lionis, Pitelou, 2015), resulting in: (a) loss of trust in the doctor, (b) patients' dissatisfaction with doctor's conduct and (c) patients' dissatisfaction with the whole healthcare system (Koutsosimou, 2007, p. 186-188). However, it should be underlined that the expression of empathy by medical staff can also exert a beneficial effect on patient treatment (DiMatteo, Martin, 2011, p. 184 & Hojat, 2016). The aforementioned formulation is based on the following theoretical points: (A) The patient sees in the empathic doctor the reliable ally, the beneficial member of the social welfare system, which resembles the wiseprotective parent. Consequently, trust is established, the formulation of the truth about health, the accurate recording of the medical history, with a consequent increases the probability of an accurate medical diagnosis; (Koutsosimou, 2007, p.22). (B) The doctor's empathic components, such as: (1) willingness to listen attentively, (2) long time spent with the patient, (3) easy accessibility if necessary, (4) establishment of a warm atmosphere and respect, (5) voice tone (Hojat, 2016) (6) a sense of caring and expressions of genuine interest. appreciation, and patience, (7) good manners and visual communication, (8) listening carefully to the patient's fears, anxieties, concerns, and worries (Lionis, Shea, Markaki, 2015) (9) exhibiting sensitivity to the patient's emotional (Banyard, 2008, p. Georgianos, Iatraki, Lionis, 2015) lead to the latter's desire to return to his/her doctor (DiMatteo, Martin 2011, p. 185). Visiting the same doctor sets the basis for a constructive doctor-patient relationship(Chandra, Mohammadnezha,

Ward, 2018) and leads to: 1. adequate recording of the patient's health problems, 2. enhancement of his/her compliance with both the treatment process (Koutsosimou, 2007 p. 172 & Turabian, 2018) and scheduled appointments (Trant et al, 2019) and thus to an improvement of his/her health, (Scott, 2011, p. 197-199) 3. faster recovery and therefore consequent reduction of hospitalization time, (Anterioti, Antoniou, 2014) 4. reduction of patients' stress due to health disturbances, (Shrivastava, R. Shrivastava, P.S., Ramasamy, 2014 & Lan, Yan, 2017) with a better control over chronic diseases, 5. reduction of the rate of complaints due to medical errors, (Tsimtsiou, 2006) 6. boosting of the morale and rewarding the staff of healthcare facilities, (Aletras et all, 2009) and 7. further improvement, organization (Collins, O'Cathain, 2013) and assessment of the quality of health care services and clearly in the increase of patients' satisfaction with health care facilities (Lionis, Pitelou, 2015). This study aims to record the degree of user/patient satisfaction with the health services provided by the Department of Oral Medicine/ Pathology, Dental University School. Aristotle of Thessaloniki.

Materials and Methods

The cross-sectional research was conducted using an anonymous questionnaire consisting of demographic characteristics, closedended significance questions [Likert scale from 1 (strongly disagree) to 4 (strongly agree)]. A higher score indicates a higher satisfaction from patient's perspective in dentist - patient relationship. The survey comprised of empathy oriented items in four domains: A. The communication domain comprises five items: 1.whether the doctors described in an understandable and detailed way the patients' oral health; 2. whether the staff pays attention to patients' concerns

and questions about their oral health; 3. whether the staff is willing to answer patients' questions; 4. whether the staff approaches the patient with humor; and 5. whether the patients talk as much as they would like. B. The Information – domain comprises four Awareness items: 1. whether the dentists informed the patients about their rights; 2. whether the dentists informed patient sufficiently about their medical treatment; whether the medical instructions were clear; 4. whether the dentists informed the patients sufficiently about their medication. C. The respect – acceptance domain comprises three items: 1. whether the dentists are polite with the patients; 2. whether the dentists are patient with the patients 3. whether the dentists exhibit good manners towards patients. D. Finally the Understanding/ Interest domain comprises four items: Whether the dentists show understanding and interest about patient's: 1. fears 2. worries (due to their illness) 3. needs 4. disease course. The research data were evaluated summing the score of each of the aforementioned four domains separately. The reliability, as measured with Cronbach's Alpha (internal consistency) coefficient was for the domain communication 0.83, for the domain Information – Awareness 0.7, for the domain respect – acceptance 0.8 and for the domain Understanding/ Interest 0.89. Any coefficient values greater than or equal to 0.7 are considered statistically significant. The criterion validity was assessed by the test-retest procedure for N = 40 patients who visited the Department Medicine of Oral/ Pathology twice in period of three months.

The participants were all patients with a variety of oral diseases (from mild disorders even cancer) who visited the Department of Oral Medicine/Pathology from October 2016 to June 2017. The sample size deemed necessary to obtain reliable results was calculated by the

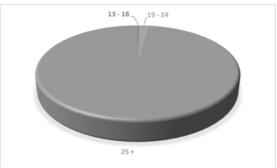
formula N= $(za/2)2 \cdot p \cdot (1-p)/(\epsilon \cdot p)2$, with za/2=1.964 power analysis. Therefore, it was suggested that N=578 patients should fill in the questionnaire. Descriptive statistics were performed using pie charts for quantitative variables. The assessment of the scores of items A, B, C, and D on positive attitude was performed with nonparametric Friedman and test pairwise comparisons with Bonferroni's Type I error correction method. The correlation demographic characteristics with items A, B, C, D was performed with the chisquare test of independence (X2). The entire analysis was performed with IBM Statistics SPSS 20 and 25.

Prior to participating in this study, the participants were given adequate information on the aim, procedure, nature and confidentiality of the study, and their oral consent to participate was obtained. The ethical principles of anonymity, voluntary participation and confidentiality were considered. The study and consent procedure was approved by the ethics committee affiliated with Aristotle University of Thessaloniki. Faculty of Sciences, Department of Dentistry (No: 21/23-12-2015).

Results

From the 600 participants 61.7% were females and 38.2% males, permanent residents of the Prefecture of Thessaloniki (71%) and of Greek nationality (97.7%). The satisfaction quantitative analysis unfolded on four items based on the interaction of patient with medical staff of the Department of Oral Medicine/ Pathology.

Specifically, the first item **A** (**Communication- figure 1**) scored a rate of 97.8%, which indicates that patients rated the communication skills of the scientific staff quite high.



1. Figure COMMUNICATION **(97.8%)** Doctor described in understandable way the health issue / pay attention to patients' concerns /willing to answer questions /approach with humor / Patients talk as much as they would like) "13 STRONGLY DISAGREE or I DISAGREE (0.2%); "19 - 24" I AGREE (2%); "25 +" I STRONGLY AGREE(97.8%)

The second item **B** (Information – Awareness- Figure 2) scored 85.8%, indicating that patients rated quite highly the willingness of medical staff to inform and update patients on issues related to their attendance to the Department.

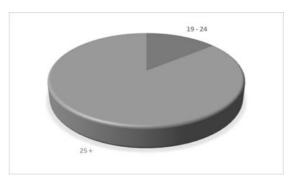


Figure 2. INFORMATION-AWARENESS(85.8%)

Information for patients rights/ medical treatment/medical instructions/medication) "19 - 24" I

instructions/medication) "19 – 24" I AGREE (14.2%); "25 +" I AGREE or I STRONGLY AGREE (85.8%) In the third item C (Respect – Acceptance- Figure 3), a percentage of 78.8% was scored indicating the high degree of respect and acceptance of medical staff towards patients.

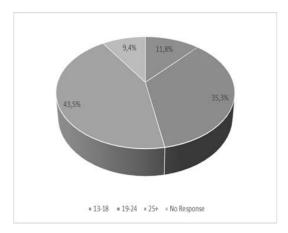


Figure 3. RESPECT – ACCEPTANCE (78.8 %) Whether the dentists are polite/ patient/ exhibit good manners towards patients) "13 – 18" I STRONGLY DISAGREE or I DISAGREE (11.8%); "19 – 24" I AGREE (35.3%) "25 +" I STRONGLY AGREE (43.5%); NO RESPONSE (9.4%)

In the fourth **item D** (**Interest** – **Understanding- Figure 4**) a percentage of 69.7 % was scored indicating the satisfactory degree of scientific staff's interest and understanding towards the patients.

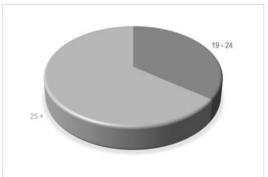


Figure 4. INTEREST – UNDERSTANDING (69.7 %) (Whether the dentists show understanding/ interest about patient's fears/worries needs / disease course)

"19 – 24" I AGREE (30.3%); "25 +" I STRONGLY AGREE (69.7%)

Discussion

The vital and therapeutic significance of doctor-patient communication has been emphasized as early as the era of Hippocratic medicine. To ensure the quality of fruitful communication, the doctor encourages the patient to state the reasons for the appointment, as well as any symptomatology, thoughts, feelings and expectations in order to understand his/her condition. Related studies reveal that the factors equality, mutual trust. empathy, respect, honesty, acceptance warmth are significant conditions for successful doctor-patient communication (Lionis, Pitelou, 2015 & Shrivastava, R., Shrivastava, P.S., Ramasamy, 2014). Of course, communication, as a vital parameter of cooperation in health sector, has been shown to render duration, continuity and effectiveness to the doctor-patient relationship, elements which lead to patient satisfaction (Lionis, Pitelou, 2015). Such satisfaction is expressed by the patients coming to Department Oral Medicine/ of Pathology, who rated the health services provided quite highly. However, it can be observed that there is room for further improvement, as the item of the questionnaire "interest understanding" scored lower (69.7%figure 4) than the items communication (97.8% -figure 1), information - awareness (85.8% figure 2), and respect – acceptance -figure (78.8% 3). Such improvement is necessary as studies highlight that despite all the sweeping advances in medical methods and appliances, doctor-patient the relationship remains a key component of healthcare (Song, Luzzi, Brennan, 2020).

In international surveys the level of patient satisfaction from his/ her

appointment with the dentist (with emphasis put on the empathy factor), it has been recorded that: 1. Empathy positively was associated increased patient satisfaction and anxiety for reduced the appointment; (Jones, Huggins, 2014) 2. Empathy-based and caring-based communication skills benefit both the doctor and the patient in terms of satisfaction, compliance, treatment effectiveness; (Lipp et al, 2016) 3. Empathy is considered vital for establishing a satisfactory doctorpatient relationship; (Bratek et al, 2015) 4. Irish patients rank empathy as one of the main traits of a good doctor; (Brady, Bambury, O'Reilly, 2015) Doctor-patient 5. through communication, engagement of the empathy factor, has a strong/positive effect on: a) the doctor-patient relationship; b) patient health outcomes; c) patient satisfaction; (Nguyen, Hong, Prose, 2013) 6. Empathy, which has been identified as one of the most frequently cited components humanistic medical patient care, can be a valuable ally in chronic patient care (Kourakos, Vlachou, Kelesi, 2018).

In compliance with all the above and with the assumption that: (a) every effort for a creative, functional and effective doctor-patient relationship presupposes, apart from the high level of the doctor's diagnostic and therapeutic skills. also that effective communication with the patient; (b) the patients' criteria and needs always have a psychological and social background; (c) in our country the education in health schools is rather conventional and traditional: (Lionis, Pitelou, 2015 & Shiraly, Mahdaviazad, Pakdin, 2021) it is considered vital to train undergraduate healthcare students in empathic communication skills and to instill patient behavior patterns. Such standards can then be applied by health professionals in the medical and nursing centers where they work, thus improving the quality of the healthcare sector (Lionis, Pitelou, 2015). In this context, there is a need for academic. multi-disciplinary training that provides health schools with the convergence creative and interdisciplinary cooperation between the humanities, social and medical sciences, always with a view to deeper understanding and the satisfaction of the patient (Hojat, 2016 & Tsironis, 2015). Furthermore, a future transnational research proposed, in order to obtain data from various health areas, which will give rise to an in-depth investigation of the factors that satisfy patients (Tsimtsiou, 2006).

The present study took place in the Department of Oral Medicine/ Pathology of Aristotle University of Thessaloniki. As the questionnaire reflects the views of patients of a specific area and a defined period of time, it is well understood that an attempt to generalize the conclusions would be unfair, because the sample is not representative of all Greek patients and refers to the specific time when the survey was conducted in the Oral Medicine Laboratory.

Conclusion

Recording of patients' satisfaction with health services constitutes a significant tool for identifying and improving the factors of both increased patient satisfaction with their communication with their doctor and high regard of the health services quality. In the present study, an attempt was made for the first time to record the level of patient satisfaction with the health services provided by the Oral Medicine Laboratory applying as an indicator the empathy factor in the doctor-patient relationship/communication.

According to the studies, the empathy

factor is one of the most important qualities of health care personnel; it supports in various ways the doctorpatient relationship, and adds quality to health services. It is precisely for this reason that suggestions have been made to improve the training of health students in empathic communication and approach to patients. In addition, a future transnational survey is proposed in order to obtain data from different health care settings, which will give rise to an in-depth investigation of the factors that satisfy patients, from the health care sector.

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