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Letter to the Editor

Unmasking communication challenges with personal protective equipment amid the COVID-19 apocalypse

Sir,

The ongoing COVID-19 pandemic has dramatically changed our lives and health care system too. According to World Health Organisation (WHO), there have been 164,523,894 confirmed cases of COVID-19 including 3,412,032 deaths in the world (20 May 2021).¹ This unprecedented public health emergency has affected both patients and clinicians experience regarding traditional face-to-face consultations. Amongst the most pressing of these challenges is the requirement to wear mandated personal protective equipment (PPE) which includes gloves, gowns, shoe covers, head covers, masks, respirators, eye protection, face shields, and goggles.² These protective gear helps in preventing the transmission of the COVID-19 virus to both health professionals and the patients.

Though PPE provides a shield of protection for the healthcare workers yet there are various concern associated with it. It can heighten patients fears of isolation and make them feel vulnerable and afraid. It imposes a significant challenge to rapport building. These physical barriers can hinder effective communication which can be distressing for patients as well as doctors. Not only do they attenuate sound and muffles the physician's voice but also impair non-verbal communication. Facial expressions, an essential part of communication, are also masked. The compensations made in paralinguistics (pitch, tone of voice) such as speaking in a loud tone when in PPE can be misinterpreted as aggressiveness. In a study by Agarwal et al, around 55% of healthcare workers reported problems and confusion due to patients not recognizing the staff in the PPE kit and 80% reported impaired communication issues with patients.³ These findings were consistent with study by Parush et al who reported the associations of PPE with greater communication difficulties, namely hearing and understanding speech.⁴

Other challenges that PPE brings – such as additional weighted kit, excessive sweating, pressure on the face and body, fatigue and dehydration which is a problem in a tropical country like India. However, communication, which forms the core of health care, is one such aspect, that is perhaps less talked about while working in PPE. Finding a way of improving communication without compromising either healthcare workers safety or impacting patient care is needed in the current scenario. By demonstrating empathy, understanding of a patient's concerns and effective communication may lead to better

clinical outcomes. The present manuscript highlights the various numbers of practical solutions to promote communication with the patients in the current ongoing pandemic.

The old proverb 'necessity is the mother of invention' holds in the present scenario. The pandemic has already ignited a huge leap increase in the use of video consultations, online meetings and apps resulting in digital transformation. However, the major challenge is the optimization of communication under these challenging circumstances. This issue can be addressed by writing the name and designation on disposable placards or even attaching a photo in the front of the PPE kits. Devising sign language for commonly used phrases or directions can also help in better communication. Other measures like decreasing the speed of speech, increasing volume, and lowering pitch can be effective measures to compensate for the limitations of PPE. Health care providers need to be patient and can rephrase sentences rather than simply 'repeating them louder. Taking time for short introductions including greeting the patient by folding hands (namaste), gently patting the patient's shoulder/back while conversation can help in building a supportive therapeutic relationship with the patient.

Use of a plastic 'see-through' visor, transparent masks, facing the patient by directly looking at them and giving prompt response during conversation can improve communication without compromising either healthcare workers' own health and safety. Listening carefully to their complaints and concerns can make small but impactful modifications to enhance communication in patient care. The endeavour should be made to promote communication between patients and their families. This will help in making them more comfortable by hearing a familiar voice. Voice and video calling between a patient and their relatives should be encouraged.

To decrease the fear and anxiety in children admitted to hospitals, sticking the surface of PPE with cartoon stickers can make the attire more child-friendly. Good clinician-patient communication plays an important role in geriatrics; many of them may not understand why they are being approached with such caution. Using nonverbal communication ways such as sign language may be beneficial. The use of visual information (drawings, diagrams, or photographs) and empathetic speaking during conversations can help to ease their anxiety.

A sustainable and holistic approach to the communication challenges presented by full PPE is the need of the hour. The various aforesaid methods may serve as a guide to health care workers and will help in ameliorating the problems encountered with the use of PPE kits. Open communication with patients relies on the physician's ability to engage in empathetic speaking and listening to promote a therapeutic environment. Utilization of the optimal combination of verbal and non-verbal communication strategies must be a part of their training of all health care workers. This may further help in overcoming the existing obstacles to interpersonal interactions and smoothens the patient care.

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