

Poor communication with this vulnerable and growing population can undermine your efforts to provide good patient care.

Improving Communication With Older Patients: Tips From the Literature



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As baby boomers increase in age, the face of the American population will change dramatically. By the year 2030, a projected 71 million Americans will be age 65 or older, an increase of more than 200 percent from the year 2000, according to the U.S. Census Bureau.¹ It's estimated that some 6,000 people turn age 65 every day and, by 2012, 10,000 people will turn age 65 every day.²

Aging health care consumers will increase the demand for physicians' services. In the United States, people over the age of 65 visit their doctor an average of eight times per year, compared to the general population's average of five visits per year.³ Physicians should prepare for an increasing number of older patients by developing a greater understanding of this population and how to enhance communication with them.

The communication process in general is complex and can be further complicated by age. One of the biggest problems physicians face when dealing with older patients is that they are actually more heterogeneous than younger people. Their wide range of life experiences and cultural

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backgrounds often influence their “perception of illness, willingness to adhere to medical regimens and ability to communicate effectively with health care providers.”⁴ Communication can also be hindered by the normal aging process, which may involve sensory loss, decline in memory, slower processing of information, lessening of power and influence over their own lives, retirement from work, and separation from family and friends.⁵ At a time when older patients have the greatest need to communicate with their physicians, life and physiologic changes make it the most difficult.

Because “unclear communication can cause the whole medical encounter to fall apart,”⁶ physicians should pay careful attention to this aspect of their practice. This article provides suggestions compiled from an extensive review of the literature to help physicians and staff improve communication with older patients. Many of the suggestions can be applied to patients of all age groups; however, they are particularly important with older adults, for whom less-than-optimal communication may have more negative consequences.

Communication tips for physicians

If you walked into a room and wanted to listen to the radio, you would first have to plug it in to a power source. Similarly, when you walk into the exam room to communicate with your older patients, the first thing you have to do is “plug in,” that is, make a connection with them physically and emotionally.

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Once you’ve made that connection, you can then begin to communicate necessary information and instructions. Below is a list of tips to help you achieve this.

1. Allow extra time for older patients.

Studies have shown that older patients receive less information from physicians than younger patients do, when, in fact, they desire more information from their physicians.^{7,8} Because of their increased need for information and their likelihood to communicate poorly, to be nervous and to lack focus, older patients are going to require additional time. Plan for it, and do not appear rushed or uninterested. Your patients will sense it and shut down, making effective communication nearly impossible.

2. Avoid distractions. Patients want to feel that you have spent quality time with them and that they are important. Researchers recommend that if you give your patients your undivided attention in the first 60 seconds, you can “create the impression that a meaningful amount of time was spent with them.”⁹ Of course, you should aim to give patients your full attention during the entire visit. When possible, reduce the amount of visual and auditory distractions, such as other people and background noise.^{10,11}

3. Sit face to face. Some older patients have vision and hearing loss, and reading your lips may be crucial for them to receive the information correctly.¹² Sitting in front of them may also reduce distractions. This simple act sends the message that what you have to say to your patients, and what they have to say to you, is important. Researchers have found that patient compliance with treatment recommendations is greater following encounters in which the physician is face to face with the patient when offering information about the illness.¹³

4. Maintain eye contact. Eye contact is one of the most direct and powerful forms of nonverbal communication. It tells patients that you are interested in them and they can trust you. Maintaining eye contact creates a

■ The physician-patient communication process is often complex and can be further complicated by age.

■ Basic strategies, such as sitting face to face and maintaining eye contact, are crucial when you’re dealing with elderly patients who may have trouble hearing or concentrating.

■ The most common complaint patients have about their doctors is that they do not listen.

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more positive, comfortable atmosphere that may result in patients opening up and providing additional information.¹⁰

5. Listen. The most common complaint patients have about their doctors is that they don't listen.¹⁴ Good communication depends on good listening, so be conscious of whether you are really listening to what older patients are telling you. Many of the problems associated with noncompliance can be reduced or eliminated simply by taking time to listen to what the patient has to say.¹⁰ Researchers have reported that doctors listen for an average of 18 seconds before they interrupt, causing them to miss important information patients are trying to tell them.¹⁵

6. Speak slowly, clearly and loudly. The rate at which an older person learns is often much slower than that of a younger person. Therefore, the rate at which you provide information can greatly affect how much your older patients can take in, learn and commit to memory.^{10,12} Don't rush through your instructions to these patients. Speak clearly and loudly enough for them to hear you, but do not shout.

7. Use short, simple words and sentences. Simplifying information and speaking in a manner that can be easily understood is one of the best ways to ensure that your patients will follow your instructions. Do not use medical jargon or technical terms that are difficult for the layperson to understand.^{10,16} In addition, do not assume that patients will understand even basic medical terminology. Instead, make sure you use words that are "familiar and comfortable" to your patients.⁹

8. Stick to one topic at a time. Information overload can confuse patients. To avoid this, instead of providing a long, detailed explanation to a patient, try putting the information in outline form. This will allow you to explain important information

in a series of steps. For example, first talk about the heart; second, talk about blood pressure; and third, talk about treating blood pressure.¹⁶

9. Simplify and write down your instructions. When giving patients instructions, avoid making them overly complicated or

TAKE-HOME MESSAGES FOR YOUR PATIENTS

Providing patients with a visit summary such as the one shown here can help them remember the key points of their visit. Download a blank template from the online version of this article at <http://www.aafp.org/fpm/20060900/73impr.html>.

VISIT SUMMARY

Key points we discussed today:

Your blood pressure is 150/90.

Your goal is less than 130/85.

Diet and exercise are key to controlling your hypertension.

New medications:

benazepril (Lotensin) 10 mg - one tablet per day

Instructions:

Take your new pill when you first get up in the morning.

Walk around the block every morning.

Walk around the block every afternoon.

Cut back on salt and alcohol.

Come back for a follow-up visit in 2 weeks.

Call our office if symptoms worsen or if you have any questions.

John Smith, MD

Physician

9 / 6 / 06

Date

Your staff can contribute greatly helping patients feel comfortable

confusing. Instead, write down your instructions in a basic, easy-to-follow format. Writing is a more permanent form of communication than speaking and provides the opportunity for the patient to later review what you have said in a less stressful environment.¹⁰

One way to accomplish this is to provide an information sheet that summarizes the most important points of the visit and explains what the patient needs to do after he or she leaves your office. (See an example on page 75.) For example, instead of just telling older patients to take their medication and get some exercise, you can give them a visit summary to take home that includes detailed instructions, such as “Take a pill when you first get up in the morning,” “Walk around the block in the

morning,” and “Walk around the block in the afternoon.”

With such a list, the patient can mentally check off each item as it is completed each day. Posting the information on the refrigerator or a bulletin board can help keep instructions fresh in the patient’s mind.¹⁰

10. Use charts, models and pictures.

Visual aids will help patients better understand their condition and treatment. Pictures can be particularly helpful since patients can take home a copy for future reference.¹² You can find free images online in Medem’s Medical Library at http://www.medem.com/medlb/medlib_entry.cfm. Click on “Anatomy and Medical Illustrations” under the heading “Diseases and Conditions.”

11. Frequently summarize the most important points. As you discuss the most important points with your patients, ask them to repeat your instructions. If after hearing what the patient has to say you conclude that he or she did not understand your instructions, simply repeating them may work, since repetition leads to greater recall.¹⁶ The National Council on Patient Information and Education recommends having a nurse or pharmacist repeat instructions for taking medications, and it advises always combining written and oral instructions.¹⁷ However, be aware that if patients require a second or third repeat, they may become frustrated and disregard the information altogether. An effective technique to try at that point is to rephrase the message, making it shorter and simpler. You may also want elderly patients to bring a family member or friend in during the consultation to ensure information is understood.¹²

12. Give patients an opportunity to ask questions and express themselves. Once you have explained the treatment and provided all the necessary information, give your patients ample opportunity to ask questions. This will allow them to express any apprehensions they might have, and through their questions you will be able to determine whether they completely understand

20 COMMUNICATION TIPS

The tips provided in this article, summarized below, can be an excellent training tool for new physicians and staff.

1. Allow extra time for older patients.
2. Minimize visual and auditory distractions.
3. Sit face to face with the patient.
4. Don’t underestimate the power of eye contact.
5. Listen without interrupting the patient.
6. Speak slowly, clearly and loudly.
7. Use short, simple words and sentences.
8. Stick to one topic at a time.
9. Simplify and write down your instructions.
10. Use charts, models and pictures to illustrate your message.
11. Frequently summarize the most important points.
12. Give the patient a chance to ask questions.
13. Schedule older patients earlier in the day.
14. Greet them as they arrive at the practice.
15. Seat them in a quiet, comfortable area.
16. Make signs, forms and brochures easy to read.
17. Be prepared to escort elderly patients from room to room.
18. Check on them if they’ve been waiting in the exam room.
19. Use touch to keep the patient relaxed and focused.
20. Say goodbye, to end the visit on a positive note.

to your communication success by and prepared for your consultation.

the information and instructions you have given.¹² If you have doubts, you may want to have a staff person contact the patient in 24 hours to review educational points.

Communication tips for staff

Using the radio analogy again, how nice would it be if, when you wanted to listen to the radio, it was already plugged in and playing music when you entered the room. This is where your staff can help. They can contribute greatly to your communication success by helping older patients feel comfortable and prepared for your consultation. Here's how:

1. Schedule older patients earlier in the day. Older patients often get tired later in the day, and medical offices tend to get busier as the day goes on. Scheduling older patients earlier in the day will bring them in when the office is quieter and will allow your staff to spend more time with them.¹⁸

2. Greet them. This is an important step in making older patients feel comfortable and important. Staff members should greet patients warmly when they arrive at your practice and should introduce themselves by stating their name and position.¹⁹

3. Seat them in a quiet, comfortable area. Because reception areas can be noisy and confusing, staff members should help seat older patients away from noise and disruptions. In addition, your waiting area seating should be firm and of standard height, with arm supports to make it easier for older patients to get around independently.

Once the patient has checked in, bring them any forms that need to be filled out. Be prepared to provide any assistance the patient may need in reading or filling out forms. This will lower the amount of stress the patient may feel during the initial visit.¹⁴

4. Make things easy to read. Lighting in the waiting and exam areas should be bright and spread evenly throughout the room. Reduce all glare and avoid sitting older patients in shadows. Good lighting will help

the patient's ability to read printed material, see facial expressions and read lips. In addition, use large, easy-to-read print on all of your business cards, appointment cards, brochures and educational materials. Easy-to-read signs posted throughout the practice can also help to provide important information, since older individuals may be reluctant to ask seemingly obvious questions of the medical staff.¹⁴

5. Be ready to physically escort patients. Assisting the elderly patient from room to room may be necessary, especially if there are steps or risers in the office. Make sure the patient is comfortable and that any immediate needs are filled.¹⁹

6. Check on them from time to time. If older patients will be in the examination or consultation room unattended for an extended period, check on them so they know you have not left them or forgotten them. If the doctor is delayed with another patient, let patients know that and keep them updated on how long the wait might be.

7. Keep the patient relaxed and focused. This is key to obtaining reliable information from the patient. Lightly touching the patient's shoulder, arm or hand will help them relax and increase their level of trust. Also, call the patient by name (e.g., Mr. Thomas or Mrs. Johnson) so the visit seems personal and important.¹⁴

8. Say goodbye. You want patients to have a good feeling about their visit and your practice. You want them to leave knowing how much you care about them and their health. One way to accomplish this is to walk the patient to the checkout desk, thank them for their visit and tell them goodbye.¹⁹

Getting your team ready

Communication is not an exact science; you will need to experiment and find which strategies work best for you and your staff. You will also need to remember that different patients have different communication needs, which may require different techniques. ➤

■ Elderly patients are more likely to follow through with your instructions if you summarize your most important points, write them down and give patients a chance to ask questions.

■ Staff can set the stage for improved communication with older patients by greeting them warmly and making sure they are comfortable.

■ Elderly patients are more likely to leave with good feelings about your practice if you escort them to the checkout desk and tell them goodbye.

However, if you begin with the tips provided and if you train your staff to follow them, you will find increased levels of comfort and satisfaction among your elderly patients, and you will be better able to care for this growing population. **FPM**

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