

Review: Providing recordings or summaries of consultations may help patients with cancer

Scott JT, Entwistle VA, Sowden AJ, Watt I. Recordings or summaries of consultations for people with cancer. Cochrane Review, latest version 14 Jul 1999. In: The Cochrane Library. Oxford: Update Software.

QUESTION

What is the effectiveness of providing recordings or summaries of consultations with practitioners to patients with cancer and their families?

DATA SOURCES

Studies were identified by searching 20 databases, checking bibliographies of relevant studies, and contacting experts in the field.

STUDY SELECTION

Studies were selected if they were randomized or nonrandomized controlled trials that assessed the provision of recordings (audiotapes or videotapes) or written summaries of practitioner consultations to patients with cancer and their families.

DATA EXTRACTION

Data were extracted on the consultations, type of medium used, delivery of recording or summary, and interventions used. The outcomes were information access, use, and understanding; experience of health care

(satisfaction, participation in subsequent consultations, complaints, and litigation); and health and well-being.

MAIN RESULTS

8 randomized controlled trials (> 664 patients) were included. Heterogeneity among the studies prevented a meta-analysis from being done. 1 trial compared written summaries with usual care, 5 compared audiotapes with usual care, 1 compared audiotaped consultations with general cancer information tapes, and 1 compared audiotapes with summary letters. Of 6 studies that assessed information recall, 4 showed better recall among patients who received recordings or summaries than among those in control groups. Of 4 studies that assessed patient satisfaction with the consultation, 1 study showed that patients who received a written summary were more satisfied than those who did not receive a summary; another study showed that patients who received an audiotape of their consultation were more satisfied than those who received a general cancer information

tape or no tape. 1 study showed that patients who received a tape of their consultation were more likely to ask questions in the subsequent consultation. No studies reported complaints or litigation. 6 studies that assessed anxiety or depression showed no differences between intervention and control groups. 96% of patients in 7 studies that provided data reported that tapes or written summaries were useful as reminders of what was discussed and to inform family members.

CONCLUSIONS

Providing recordings or summaries of consultations with practitioners helps patients with cancer remember what was discussed and thus better inform family members. Evidence for improvement in satisfaction and health and well-being is inconclusive.

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For correspondence: Dr. T. Scott, Health Studies, University of York, Genesis 6, York Science Park, Heslington, York YO10 5DQ, England, UK. FAX 44-1904-434102. ■

COMMENTARY

The conclusions of this review by Scott and colleagues are limited by the marked heterogeneity of the populations studied, unstated hypotheses, a paucity of intention-to-treat studies, and the possibility of inadequate sample sizes. The goal is laudable, however, because patients recall information poorly and benefit when information is provided effectively (1). Extensive guidelines for providing medical information, including bad news, have been published and include checking a patient's baseline understanding, encouraging questions, categorizing information, and using patient-centered communication and relational skills (2).

The studies included in this review describe exciting, innovative approaches for enhancing recall, but we do not know whether other principles of effectively providing information were missed. For example, were the physicians systematically trained, and how patient-centered were they, if at all? Was patient-centered communication measured? A systematic patient-centered method that includes patient education can be effectively learned and used by physicians (3).

I am concerned that simply providing a tape or written summary to patients without attending to the other principles of patient education will not educate patients adequately. This concern is particularly relevant to patients with cancer because physicians are known to

have more difficulty with patient education in such emotion-laden situations (4, 5).

The published evidence suggests that the simple provision of tapes or summaries to patients assists in recall and informing family, but it is otherwise insufficient. It remains to be shown how such simple methods compare with alternative approaches to the complex, multi-dimensional task of patient education.

*Robert C. Smith, MD
Michigan State University
East Lansing, Michigan, USA*

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