

Patient-centred Care: Striking the Balance

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Abbreviations

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About this paper: This 750-word piece of reflective writing by a first-year medical student, won the Peter Pettit Prize for Reflection on Practice, and for its focus on patient-centred care.

Reflection on Practice:

Our exposure to practice this year has been entirely GP based, meaning that we have seen a variety of people and their problems, bringing a range of personalities, opinions, and views into the consultation room. A large emphasis from our on-campus teaching has been patient-centred care and what this looks like in practice versus the archaic discipline of paternalistic medicine, pitted against each other as the new replacing the old. I have thought on several occasions however, that the lines between these schools of thought are surprisingly blurred. As first-year medical students, we observe consultations from an interesting limbo:

between the patient's perspective and the clinician's. Different doctors have their different approaches, and different patients come with their different expectations, and I have often wondered afterwards, was that patient centred? Or was that doctor centred, paternalistic? Where is the balance between 'this is my professional advice in your best interests' versus, 'here are your options and I won't influence your choice.'?

This is where I have become stuck, because I think that there is actually a large proportion of patients who want paternalism. I have heard variations of the phrase 'well you tell me, you're the doctor' countless times, and many of these instances have been from older patients, maybe for whom this supposedly "new-fangled" idea of patient-centred care is foreign, or from those who simply do not want the burden of decisions. In these cases, perhaps it is fair to say that the choice to relinquish your care solely to your doctor can still be considered patient centred, as this is exactly what a patient may want. This then calls into question whether paternalistic medicine and patient-centred medicine truly are polar

opposites, as is often widely considered, so long as the patient has chosen this approach.

Then there is the other end of the spectrum - a patient calling about an innocuous lump on the ear, which turned into a discussion about COVID-19 vaccination conspiracies. In this case, it was entirely about what the patient wanted; the doctor could only express that they respected the patient's autonomy and would request on their behalf that communication about vaccinations be ceased. I thought, 'shouldn't the doctor have said more?' Told the patient why their YouTube conspiracy videos were irreputable and presented the hard facts about the vaccine, rather than just recommending some resources that were likely to be ignored? Should the doctor have played the 'this is my job and I know best' card? I asked them why they hadn't, and they said that sometimes you can tell when people aren't to be swayed, and you just have to respect their wishes. Was that patient-centred care? Taken so far that the patient could completely disregard professional medical advice to the detriment of not only themselves, but

those around them? Stepping back from that situation now, I can see that my knee-jerk reaction came from a place of bias and indignation. The crux of the matter in patient-centred care is that patients reserve the right to consent to or withdraw from whatever interventions they wish, even if it may not be in their best interests to do so. Even saying “best interests” is subjective and can only be applied strictly to medical outcomes, as we cannot say with complete confidence what a patient’s best wishes may be for every aspect of their lives. Ultimately, if they have all the necessary facts and know where and why we stand on the matter as medical professionals, then it is their decision whether they listen or not. I cannot critique patients’ decisions whichever stance they take, whether they choose paternalism or their own brand of care, because at least they will have chosen either way. Practice has shown me that patient-centred care does not always look the same for every patient, because if it did, then it wouldn’t be patient centred anyway.