

Breaking Bad News in Paediatric Oncology: Medical Elective Report.

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Keywords

Medical Elective | Breaking Bad News | Paediatrics | Oncology | SPIKES

Abbreviations

SPKIES – Setting, Perception, Invitation, Knowledge, Empathy, Summary

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Abstract:

This article was written following a period of elective study by a fourth-year student doctor. It gives an insight into the experience of observing a consultant break bad news to parents of a child with a terminal oncological diagnosis, and the influence of this experience on the student's personal and professional development. The article aims to highlight the benefits of conducting a period of elective study, particularly in terms of developing essential communication skills.

Reflection on my Elective:

The Elective

I completed a four-week elective in paediatric oncology. As part of this, I was involved in documenting ward rounds, clerking new patients, attending outpatient follow-up clinics, as well as sitting in on various meetings, including multidisciplinary team and treatment planning meetings.

Elective Objectives

The main objectives for my elective were:

- Understand the diagnosis, treatment, and long-term management of common paediatric malignancies.
- Engage in the assessment and management of acute paediatric

- patients.
- Learn how to have conversations that are emotionally sensitive, including developing skills for breaking bad news.

Reflection

I will explore the experience of observing a consultant breaking bad news to the parents of a patient with an aggressive childhood malignancy for whom no curative treatment remained.

To minimise disruption to the process, relevant staff in the clinic were informed that an important conversation would take place. The parents appeared anxious, and the consultant arranged for the patient to be escorted to the playroom. He began by asking what they already understood before explaining the outcome, which inevitably caused significant emotional distress. His response was empathetic before summarising the palliative care plan and ensuring support was in place to enable them to take their terminally ill child home.

Although I expected it, seeing parents cry inconsolably for the first time in a consultation left me unsettled and wondering how I would manage such a situation. Transparently, I felt bereft of ideas. However, I realised the answer lay not in words, but in silence. I have always found silence uncomfortable but quickly learnt that, when used prudently, it can be a powerful tool, allowing individuals to process information and emotions after receiving bad news (Chaturvedi, 2024).

Through wider reading, I discovered the consultant had adopted the SPIKES framework, comprising **s**etting, **p**erception, **i**nvitation, **k**nowledge, **e**mpathy, and **s**ummary (Baile *et al.*, 2000). As described above, most elements were addressed and, although devastated, the parents left reassured, which I considered a positive outcome.

Initially, I thought the consultant's decision to send the child out of the room was entirely appropriate. However, literature reviews encourage doctors to have open discussions with terminally ill children according to their cognitive maturity rather than age (Stein *et al.*, 2019; Zadeh, Pao and Wiener, 2014). This challenged both my original beliefs and those expressed by the parents, who later disclosed they were glad their child was absent because they wished to protect them from distress, reflecting findings in this area (Granek *et al.*, 2013; Marsac *et al.*, 2018).

This reinforced the notion that breaking bad news is complex. Although frameworks and research provide effective strategies, conversations depend on recognising and responding to cues while tailoring communication to individual patient and family needs.

Conclusion

Overall, I achieved my aim and objective for this elective. Moving forward, I will apply the SPIKES framework in observed simulated patient interactions and seek supervisor

feedback to build confidence. Following this experience and wider reading, I now feel equipped with the theoretical knowledge to apply it during future placements where feasible.

My elective was valuable thought-provoking experience where I gained a salient insight into the profoundly poignant, yet uniquely rewarding, world of paediatric oncology.

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