

Communication difficulties at the emergency department and the relation with the attachment style of doctors and patients.

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Ethical review	Approved WMO
Status	Recruitment stopped
Health condition type	Other condition
Study type	Observational non invasive

Summary

ID

NL-OMON42164

Source

ToetsingOnline

Brief title

How does attachment influence communication in the emergency department?

Condition

- Other condition

Synonym

injuries, medical emergencies

Health condition

psychologische invloeden op de communicatie arts-patiënt

Research involving

Human

Sponsors and support

Primary sponsor: medische psychologie

Source(s) of monetary or material Support: bij het Landsteiner instituut is een subsidie gevraagd voor de onkosten van het onderzoek

Intervention

Keyword: Attachment, communication, doctor-patient relationship, emergency department

Outcome measures

Primary outcome

We hope to be able to analyse the influence of attachmentfactors on the quality of doctor-patient communication. We also expect to gain insight in the way stressfactors influence the relationship of these variables.

The ECR-r (experiences in close relationships questionnaire-revised, dutch version) will be used to get a measure of the attachmentfactors (attachment fear and attachment avoidance) of both doctors and patients. The DDPRQ-10 (difficult doctor patient relationships questionnaire, dutch version) will be used to measure problems in the interaction. We will use some additional questions and the BSI-18 (Brief symptom inventory) to control for stress and other expected confounders. All the used questionnaires have proper psychometric characteristics.

Secondary outcome

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Study description

Background summary

Communication between doctors and patients is a complex process which influences the quality and safety of the healthcare a patient receives. Earlier research on communication problems was mainly aimed on patient characteristics that influence communication. Recently the attention is shifted more to the interactional aspects of the communication. The attachment theory that Bowlby developed is suitable for research on the interaction between doctors and patients.

Study objective

We expect to gain insight in the difficulties in communication in medical settings. This insight will help to improve the training of doctors and other caregivers. We also think that it can improve interventions directed to prevent and solve problems due to miscommunication especially with difficult patients.

Study design

We will ask 220 patients of the emergency department of the MCH to fill out a survey. With this survey we will obtain a measure of the attachment factors, stress and the experiences in the interaction with the doctor. We will ask the doctors of the patients that are included in the study to fill out the same questionnaires with small adjustments to their role. In this way we will obtain the same measures from the doctors.

Study burden and risks

The expected time needed for completing the questionnaires is 30 minutes, once. The biggest part of the questions can be answered during the waiting time for medical treatment. The extra time asked from the participating patients is approximately 10 minutes. The questionnaires are carefully selected to obtain minimal burden in terms of time and psychological intrusiveness.

We expect the study to contribute to improvements in communication between doctors and patients. As is said before good communication improves the outcome of the healthcare process in many ways. We expect the results of this study to be used in improving the training of doctors and other caregivers. The researchers in this study are also involved in developing the training of new doctors and the coaching of practicing health professionals. The questions we hope to answer with our research originate from this work. We believe that the answers we will find to have an important impact on these training programs. It will also help to improve interventions in conflicts or other difficulties in doctor-patient communication.

Contacts

Public

Selecteer

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Scientific

Selecteer

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Trial sites

Listed location countries

Netherlands

Eligibility criteria

Age

Adults (18-64 years)

Elderly (65 years and older)

Inclusion criteria

- 18 years or older
- the medical situation allows participation in the study
- the patient speaks and understands Dutch spoken and written

Exclusion criteria

If a patient gets code red or orange, indicating great medical, urgency, we will not ask them to participate.

Study design

Design

Study type: Observational non invasive

Masking: Open (masking not used)

Control: Uncontrolled

Primary purpose: Other

Recruitment

NL

Recruitment status: Recruitment stopped

Start date (anticipated): 17-03-2015

Enrollment: 220

Type: Actual

Ethics review

Approved WMO

Date: 10-11-2014

Application type: First submission

Review commission: METC Leiden-Den Haag-Delft (Leiden)

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Approved WMO

Date: 17-07-2015

Application type: Amendment

Review commission: METC Leiden-Den Haag-Delft (Leiden)

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Study registrations

Followed up by the following (possibly more current) registration

No registrations found.

Other (possibly less up-to-date) registrations in this register

No registrations found.

In other registers

Register	ID
CCMO	NL49777.098.14