The traditional model of the doctor–patient relationship is being challenged. This relationship is generally asymmetric in terms of power—the doctor asks the patient questions and the doctor makes most of the treatment decisions. Because the patient is expected to obey these directives, the communication between a doctor and patient is relatively one-sided and focuses primarily on the disease or condition being treated.

In the last decades, this paternalistic model has been criticized by health care professionals and patients alike. Health care professionals believe this traditional model lacks efficacy as patients do not necessarily follow doctor’s orders, especially when it comes to the prevention and treatment of chronic diseases. Patients are now far more active players in their treatment decisions and are more likely to express their needs and opinions to their health care providers. The increased role of the patient has resulted in a more balanced relationship between doctor and patient.

The Shift Toward a Patient-Centred Clinical Approach

Patient-centred clinical methods have recently been developed, partly as a response to the criticisms of paternalism in medicine. These new models now form the basis of several medical curricula in Canada, and some voices have called for their implementation in dental schools. Research has shown the benefits of patient-centred clinical methods on such factors as patient satisfaction and adherence to treatment, doctor satisfaction and health outcomes.

A patient-centred clinical method developed in Canada by Stewart and colleagues is made up of 6 interactive components. This method suggests that doctors explore not only the disease, but also the patient’s unique experience of the illness. For instance, a health care provider should try to understand how the patient perceives his or her own symptoms and defines the medical problem. In turn, the doctor tries to evaluate and understand the whole patient, not just the disease. This can be achieved by delving into multiple aspects of the patient’s life, including cultural, familial, professional and social situations. Finally, the doctor and patient can look to find common ground about the nature of the problem, the treatment plan and the respective roles of each party.

Patient-Centred Clinical Method in Dentistry

A patient-centred clinical method specific to the dental profession was developed by dentists for use in socially and economically deprived areas of Montreal. These dentists wanted to identify the necessary skills and attitudes that would help oral health care professionals address the clinical needs of people living in poverty. They conducted semi-structured interviews with 8 dentists practising in disadvantaged communities in Montreal. Based on their own years of experience and these interviews, the researchers developed a 5-facetted patient-centred clinical approach (Table 1). The results of this study show that an original “socio-humanistic” approach can overcome difficulties encountered by dentists treating people living in poverty and meet the needs of this population.

### Table 1
Five facets of the clinical approach developed by dentists in Montreal

<table>
<thead>
<tr>
<th>Facet</th>
<th>Definition</th>
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<tbody>
<tr>
<td>Understanding patients’ social context</td>
<td>Show an openness and interest in patients’ living conditions, social and cultural background, and how this impacts their needs and expectations.</td>
</tr>
<tr>
<td>Taking time and showing empathy</td>
<td>Take time to talk with patients to better understand them personally and to improve the clinical relationship.</td>
</tr>
<tr>
<td>Avoiding moralistic attitudes</td>
<td>Avoid blaming patients and accept compromises to find common ground.</td>
</tr>
<tr>
<td>Overcoming social distances</td>
<td>Adopt a humanistic attitude when interacting with underprivileged patients.</td>
</tr>
</tbody>
</table>
Favouring direct contact with patients
Establish close and warm contacts with patients to create a therapeutic alliance based on trust and respect.

Conclusion
Patient-centred clinical approaches may help dentists interact with their patients, especially those with different social or cultural backgrounds. This approach can also improve patients’ adherence to treatments and help to improve health-related behaviours such as oral hygiene and nutrition. Although these patient-centred approaches are effective, they will likely provide a challenge to practitioners, who will have to hone their communication skills and knowledge.

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This article has been peer reviewed.

References


Comments:

dr. bhavna dave  
July 27, 2I

we , at india have to take this approach only, as there are many many problems regarding oral health and we possibly can not rectify all the issues as far as the pt.’s oral health is concerned.we have different background culture wise and social status wise

Dr. Jeff Glaizel 
July 28, 2I

Excellent introduction to the topic for our profession. The system of care is changing whether dentists like it or not.

I would argue that the term “patient centred” start to be replaced with “person centred.”

There are numerous reasons for this; for me the most prominent being that we are treating the person not only the patient when they are in the chair. We are informing the person of their oral condition and how they can improve their oral health and if they let us we will treat the patient.

I will point you to the Canadian Association for People Centred Health www.capch.ca This is an organization founded by an Ontario Dentist Dr. Vaughan Glover.

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Email: *

Comments: *

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Submit

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Comments submitted in response to articles may be published in the print JCDA.

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