LETTER to the EDITOR

Importance of Patient-Physician Relationship in Cancer **Prevention: A Self Experience-Based Survey**

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Dear Editor

We all know about the significance of the patientphysician relationship, as doctors. Based on our ideas, a couple of times, this relationship would be much more valuable than complicated procedures or diagnostic tests (Dixon, 1989; Lucchiari et al., 2013). As much as patients need treatment, many of them need intrinsic support from their doctors. Maybe it seems irrational, but outcome and prognosis of disease can rely on the doctor-patient relationship (Gill et al., 1972). Consequently, due to improving outcomes in physician practices, developing our relationship with patients is our obligation.

I was observing patients in my clinic on a warm day in the summer of 2012. It was about afternoon when Sarah and her father came in. Sarah was a sweaty 16-year-old girl. Since Sarah was 10 years old, I had been their family doctor and I knew them well over these years. That day Sarah seemed sick that was unusual. She came with chief complaint of a blunt pain in her left knee which had started about two weeks ago. She had also suffered from an intermittent, low-grade fever. An irregularity in anterior side of her left tibia was observed during the physical examination. I ordered a radiographic scan of the left limb for better evaluation. Radiologist reported a central osteolytic tumor in the left tibial metaphysis which expanded toward the knee. Increased level of erythrocyte sedimentation rate and mild leukocytosis were detected in her blood test. How is it possible to tell a 16-year-old girl that she has bone cancer most likely? I was confused what to say. Therefore, I decided to say nothing. "Maybe it is not important" I told her. "Nevertheless I will introduce you for better evaluation to an orthopedic surgeon".

Sarah returned with her both mother and father a month later. It was clear that the surgeon told them the embarrassing news. They delineated the experiences of the past month with downcast faces. Sarah had gone under bone biopsy which is a painful and irritating procedure for patients either adults or children. Her father gave me a bulk of sheets including immunohistochemistry and pathology reports and a plan for treatment. As I had suspected, the results determined that she had Ewing sarcoma. Treatment plan was transfemoral amputation followed by 5 courses of radiotherapy. Among the bulk of papers, I found a request from orthopedic surgeon wanted me to explain the situation to Sarah and her parents and psychological prepare them for the operation.

I felt a difficult task which was ahead of me. I explained the indications of the tumor briefly and requested them to collaborate with the surgeon in order to obtain the best outcome. "Sometimes we have to sacrifice valuable things to receive more important goals" I said. That is what Sarah had to do. To save her life, she had to lose her limb. However this would not be simple. Sarah was a fresh and young girl who would have never faced to any important problems in her life. These likely small cancerous cells became to the biggest obstacle in her life. It was an irritating conversation between us which I wasn't sure at last that I had satisfied them to follow the plan for treatment. They moved their heads. "Certainly you are mistaken?" Then they left in deep grief my clinic.

I didn't see Sarah again until she and her family walked into my clinic almost 4 months later. On the contrary, her limb had been saved. She couldn't walk without helping and seemed cachectic. Her mother began crying and described that it had been unbelievable for them to accept the intention of such an operation, when I asked why Sarah hadn't had the operation yet. They hadn't followed the orthopedic surgeon. Alternatively, they had traveled to abroad to find another way but after spending 2 months they had found the same treatment plan: amputation. During the last days before they returned to me, Sarah developed hemoptysis and dyspnea. The Metastasis to her lungs was found by a radionucleotid scan. There were no treatment plans now. Sarah was admitted to the hospital for palliative care and she passed away 3 weeks later. In the last moment of Sarah's life, I will never forget expression of her pretty face. She asked me to not let this kind of happening again. She left profound sorrow in my heart and left this world at last. Sarah's family might have trusted my advice, if we had a stronger relationship. Sarah taught me about the essential role of trust the patient-doctor relationship and how serious and important this relationship can be. Sarah lives on via my stronger relationships with other patients as she keeps on reminding me how to be a reliable and better physician.

The above history clearly illustrates the importance of patient-physician relationship. Physician should always keep a strong relationship with their patients instead of just focus on diagnosis, especially when dealing with the known cases of any types of cancer. Therefore, patientphysician relationship is important in cancer prevention as much as tumor diagnosis.

References

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Mohamed Amin Ghobadifar

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Mohamed Amin Ghobadifar

Department of Student Research Committee, Medical School, Jahrom University of Medical Sciences, Jahrom, Iran *For correspondence: amin_m505@yahoo.com