



Communicating Effectively with Patients in Pain

Patients in pain often experience emotional stress that can interfere with our ability to provide help, information and treatment recommendations.

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Pain is one of the most frequent reasons patients seek our care. Whether our patients are dealing with plantar fasciitis, ingrown toenails, fractures, neuropathy, arthritis, or are recovering from surgery, their pain can have a profound effect on their physical and emotional well-being. Because suffering through pain can alter how our patients think, listen, and communicate, we must adapt our communication style when interacting with them. Effective communication during these encounters has a direct impact on our patients' adherence to our treatment plans, and therefore on their clinical outcomes.

Patients in pain often experience emotional stress that can interfere with our clear communication. The pain can reduce their attention spans and compromise their understanding of complex explanations filled with medical jargon. It can also intensify their response to fear, frustration, confusion, and anger. A patient who is unable to walk comfortably, sleep through the night, or perform ordinary daily activities often arrives at our office already under stress. In these circumstances, our ordinary

communication style may feel rushed or dismissive to them. Recognizing this altered mental state early will better equip you to adjust your approach and communicate more effectively.

Foot and

Communication Strategies for Those in Pain

First, it's important to understand that patients under this type of emotional stress are unable to process information as fast as we can deliver it, so it's important to adjust the pace of your encounter with them. Speaking more slowly, using clear and simple language and pausing to allow patients to absorb what you're telling them and respond, can significantly improve their comprehension. While it might sound like this will mean longer appointment times, it actually has a minimal effect if you simply take a moment to ensure the patient's understanding of their diagnosis and your treatment plan. Doing this can prevent confusion and frustration later, because that often disrupts our workflow even more.

Active listening is crucially important in pain-related visits. Patients in pain often want to tell their story in detail, including how the pain started, how it progressed, and how it affects their daily life. Interrupting too quickly, or prematurely discussing a diagnosis, can make the patient feel unheard. Active listening—with attentive body language, eye contact, and paraphrasing their words back to them—reassures the patient that their

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ankle pain is quite unique because it directly affects our mobility. It could limit our patients' ability to work, exercise, sleep, or even drive. A patient in pain for more than a few weeks may begin to wonder if they will ever be able to return to work, care for their family, or maintain their independence. This can exacerbate their anxiety and stress, further muddling our normal communication techniques. So how can we accommodate this altered psychological state?

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pain matters. When you accurately summarize what the patient has shared, it strengthens their trust in you and improves their compliance with your treatment plan.

Nonverbal communication also plays a powerful role in these encounters. Patients in pain are often sensitive to your facial expressions, the tone of your voice, and body posture. If you appear rushed, distracted, or skeptical

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about their level of pain, it may unintentionally convey disbelief or disinterest. Conversely, a calm demeanor and open posture can create a sense of trust. These nonverbal cues are often just as impactful in shaping a patient's perception of the encounter as much as spoken words.

Empathy is the foundation of effective communication with patients in pain. Empathy doesn't mean that you agree with every patient's perception. Nor does it mean that you will agree to provide unlimited or unnecessary treatment. But it does require acknowledging suffering. Simple statements that recognize the patient's discomfort and its impact, such as "I understand" or "that must be very frustrating", can go a long way toward building rapport. Patients who feel validated are more likely to engage with their treatment, even when recommendations involve lifestyle changes, physical therapy, orthotics, or gradual recovery rather than immediate relief.

Trust is especially important in pain management. Some patients fear that their pain will be minimized or dismissed as normal, or attributed to factors like aging or weight gain, without an adequate evaluation. Others might worry that their pain may be perceived as exaggerating symptoms or seeking medication. These concerns can be particularly prevalent in patients with chronic pain, such as neuropathic conditions, or conditions that are not always visible on imaging. Clear and transparent communication regarding the diagnostic process, the rationale of your treatment recommendations, and the goals of your care, helps reassure the patient that your decisions are valid and customized.

It's also important to communicate differently when discussing the limitations and expectations of your treatment plan. Many foot and ankle conditions improve gradually rather than immediately, and some may require long-term management. Patients in pain may hope for rapid relief and can become discouraged if their progress is slow. Honest communication about timelines and realistic outcomes help align expectations and can reduce their disappointment.

Education is another critical component of communicating with a patient in pain. A true understanding of

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the cause of their foot and ankle pain can help empower a patient and reduce their fear. Education must, however, be tailored to the patient's emotional state and their ability to understand the information. Using analogies, visual aids, printed material, and clear explanations of anatomy can make these details more understandable and accessible, reducing their fears while increasing their compliance with your treatment plan.

Communication is particularly important when discussing the actual pain management strategies used in the encounter. Whether recommending anti-inflammatory medications, injections, physical therapy, orthotics, footwear changes, or activity modification, you should explain what is being recommended, and why. When you determine that certain treatments are not appropriate or should deliberately be avoided, you should explain the reasons behind your thinking to help prevent patients from feeling dismissed or mistrusted. This is especially true when it comes to opioid requests, where clear communication about safety and alternatives is always essential.

Post-visit communication also plays a vital role in treatment plan compliance. Patients in pain may feel anx-

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ious between visits, especially if symptoms persist. Clear instructions about what to expect, reminders of their follow-up expectations, and how to manage symptoms at home can reduce uncertainty. Encouraging questions and providing communication avenues, such as through patient portals, reinforces the sense that you remain engaged in their care.

Changing your communication style when dealing with patients in pain certainly doesn't eliminate their pain, but it can help reduce their suffering by strengthening their rapport with you. By slowing down, being clear about expectations, and avoiding unintentional signs of being dismissive, your success with their outcomes will greatly improve. **PM**



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