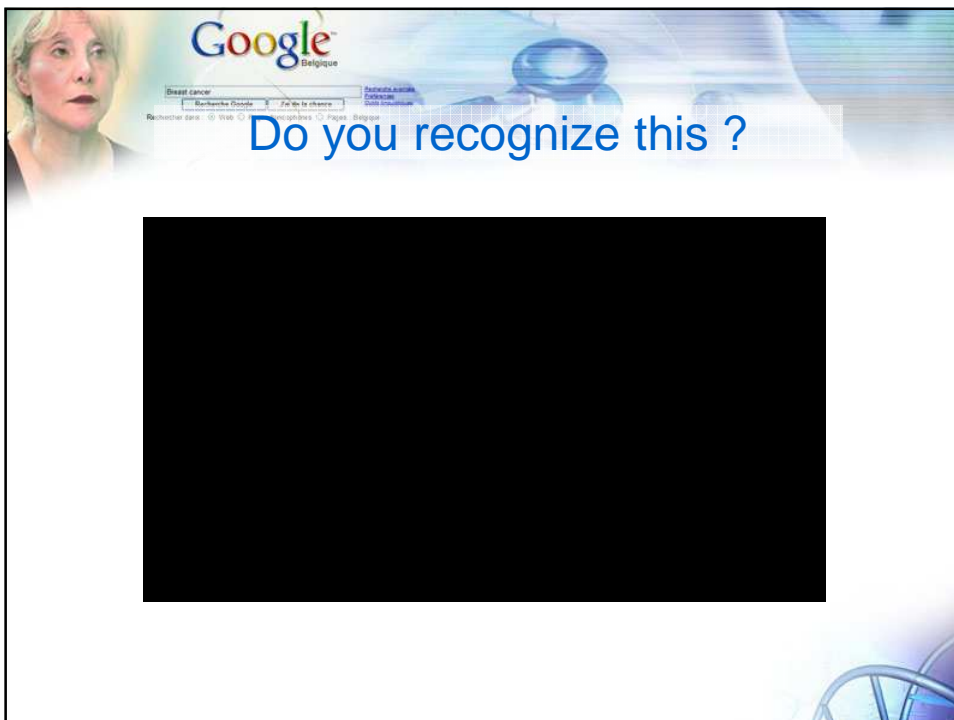


Mrs Google consults for her cancer therapy

How to create the therapeutic alliance



Do you recognize this ?

1. Never happens to me
2. Patient forget most information given
3. Patient involvement is difficult to achieve
4. I feel the need for efficient consultation skills
5. Other concerns

**Based on recent scientific data
Consultation Skills have been developped**

American Family Physician
October 15, 2005
Supporting Self-management in Patients with Chronic Illness
MARY THOESSEN COLEMAN, MD., PH.D., and KAREN S. NEWTON, M.P.H.
University of Louisville School of Medicine, Louisville, Kentucky

BMJ helping doctors make better decisions
BMJ 2007;325:697-700 (28 March)
Clinical review

Consultation Skills
BVA Congress, Belfast
27 Sept 2007
Dr ML Deriney FRCGP, FHEA, MMed Sc
Training & QA Lead, RCGP Clinical Skills Assessment
Teacher in Consultation skills

How to Tell Patients They Have (or Do Not Have) HIV
HIV InSite Knowledge Base Chapter
Paul A. Volberding, MD, University of California San Francisco

Good doctors communicate effectively with patients—they identify patients' problems more accurately, and patients are more satisfied with the care they receive. But what are the necessary communication skills and how can doctors acquire them?

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Medscape Medical News

Motivational Interviewing Improves Weight Loss in Women With Type 2 Diabetes CME/CE

News Author: Laurie Barclay, MD
 CME Author: Désirée Lie, MD, MEd
[Disclosures](#)

Release Date: May 18, 2007; Valid for credit through May 18, 2008

Credits Available
 Physicians - maximum of 0.25 AMA PRA Category 1 Credit(s)™ for physicians
 Nurses - maximum of 0.25 ANCC Category 1 Credit(s)™ for nurses

MI demonstrated greater weight loss and significantly better glycemic control.

Journal of Correctional Health Care, Vol. 14, No. 1, 48-62 (2008)
 DOI: 10.1177/1078345807308846
 © 2008 NCCHC

Effectiveness of Motivational Interviewing on Changes in Fitness, Blood Lipids, and Exercise Adherence An Outcome-Based Action Study

Mark H. Anshel, PhD
 Department of Health and Human Performance, manshel@mtsu.edu, Department of Psychology, Middle Tennessee State University, Murfreesboro, Tennessee

MI showed to markedly improve change in health behaviors (e.g. exercise, smoking cessation, treatment adherence)

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Why Advanced Consultation Skills ?

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- Clinicians conduct up to 150K interviews over 35 year career (1)
- Experience is a poor teacher – it's (also) a series of skills (2)
- Clinicians identify their patient's problem more accurately (3)
- Clinician is more time efficient (4)
- Patients are more satisfied and are more likely to adhere (5)

1- 3 - 5 Ramirez et al. Lancet 2005 – Roter et al.
 2-4 ThomArch Intern Med 2009

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Heart cancer

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A practical approach :

DO MI NO

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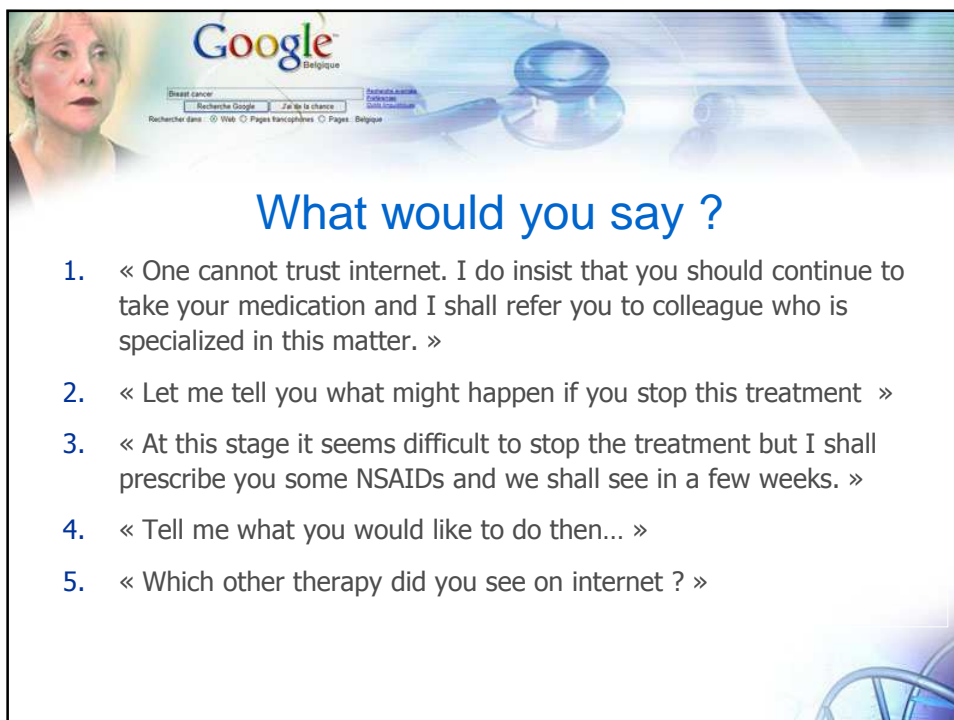
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« Un dimanche qui a tout a changé... »

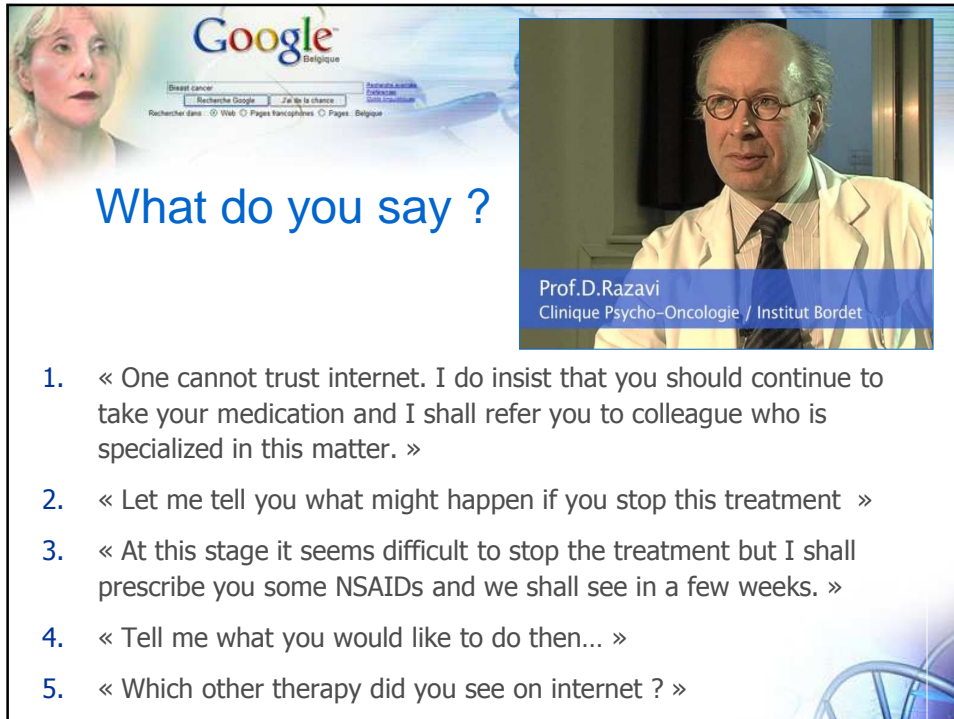


« Suite de l'histoire clinique... »



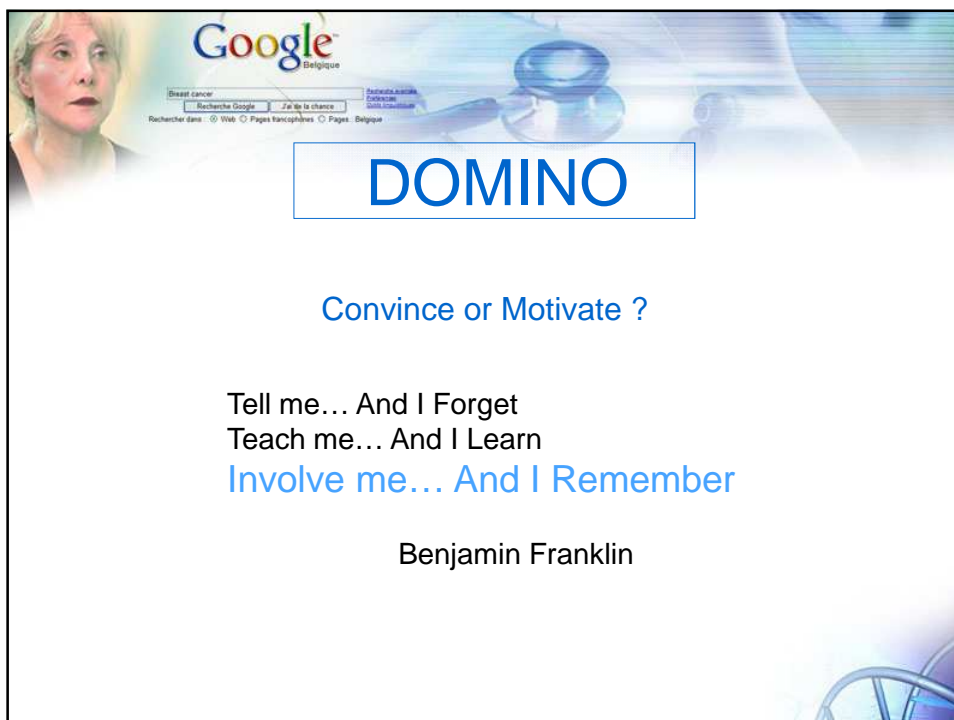
What would you say ?

1. « One cannot trust internet. I do insist that you should continue to take your medication and I shall refer you to colleague who is specialized in this matter. »
2. « Let me tell you what might happen if you stop this treatment »
3. « At this stage it seems difficult to stop the treatment but I shall prescribe you some NSAIDs and we shall see in a few weeks. »
4. « Tell me what you would like to do then... »
5. « Which other therapy did you see on internet ? »



What do you say ?

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DOMINO

Convince or Motivate ?

Tell me... And I Forget
Teach me... And I Learn
Involve me... And I Remember

Benjamin Franklin



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Breast cancer

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A practical approach :

DO MI NO



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1. DO : Discover with Open questions

- Open question: « Do you know this is a problem? »
- What does she know – what concerns her emotionally
- Readiness to change: « Are you interested to...? »



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Adopting the client's perspective

The Differential Effects of Perspective Taking and Empathy in Negotiations

Adam D. Galinsky,¹ William W. Maddux,² Debra Gilin,³ and Judith B. White⁴

- **Control** : Win – Win
- **Empathy** : Trying to feel what the other feels
- **Perspective taking** : Seeing the world as the other sees it – interests - motivations

Condition	Settlement Rate (%)
Control	~38
Empathy	~55
Perspective Taking	~75

Galinsky A.D., *Psychological Science*, 2008

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Adopting the client's perspective


Category	Directive	Perspective client
Change Talk	21,3	43,6
Resistance	21,6	12,7

Miller, Benfield & Tonigan (1993) JCCP 61: 455-467



2 approaches...

- 1. Inform – Ask - Inform**
Do you know that...
- 2. Ask – Inform - Ask**
What do you know about...
What would you like to know...
Wat lijkt u prioritair te bespreken...
Que souhaiteriez-vous discuter en priorité à propos de...



1 mindset


- 1. Legitimize**
Avoid the denial trap: Indeed many patients like you tell me that smoking helps them to...
- 2. Curiosity**
Avoid the expert trap : I would really like to know why YOU



Google

1. DO : Discover with Open questions

- Open question: « Do you know this is a problem? »
- What does she know – what concerns her emotionally
- Readiness to change: « Are you interested to change now? »





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A consultation...

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What would you answer ?

1. Are you aware of what would happen if you stop the treatment now ?
2. I have seen other patients interrupt their treatment and I can tell you that
3. Why do you want to stop ?
4. Why did you take your medication up to now ?
5. How did you manage your medication up to now ?
6. Other

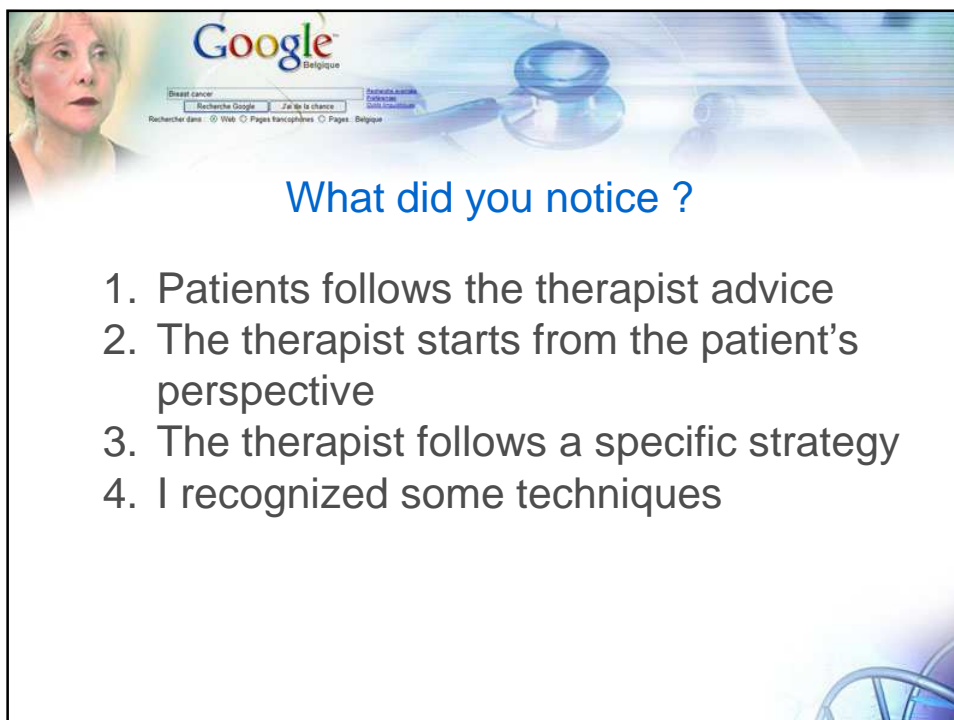
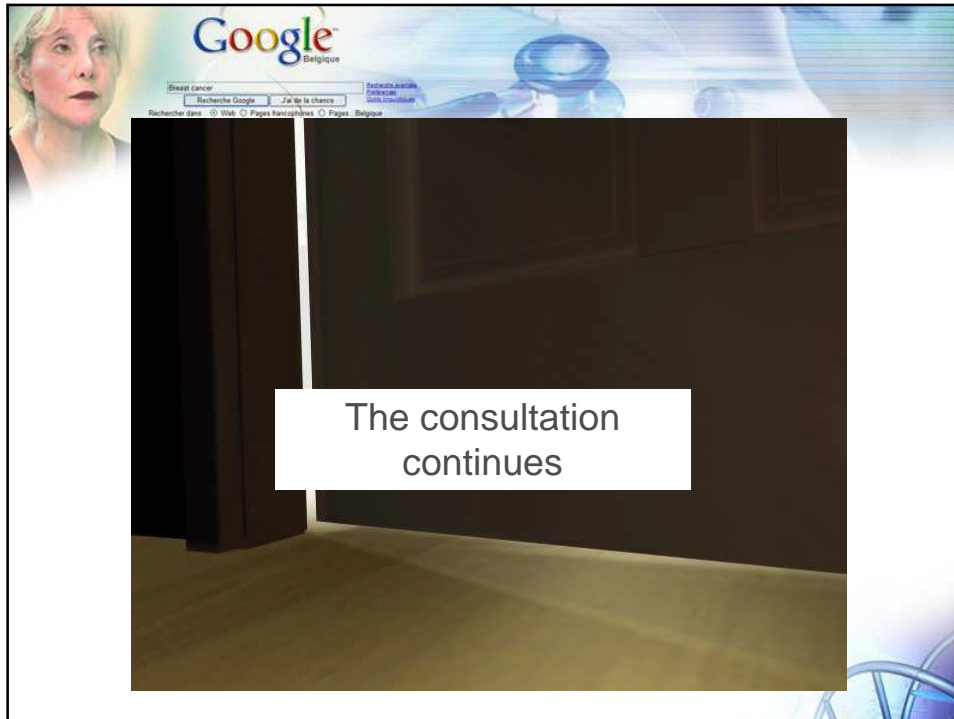
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1. DO : Discover with Open questions
2. MI : Motivate by Involving



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The Rational approach

The Classic Triad



```

    graph LR
      A[Problem] --> B[Analysis]
      B --> C[Solution]
  
```

Reason (may) change opinions
BUT does not lead to **action** !

Result from 315 studies in AIDS prevention
« It was only when appeals to reason were combined with more active approaches that Behavior Change was observed »

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Change is a DYNAMIC process !

« The New Triad »



```

    graph LR
      A[Get attention] --> B[Motivation Emotional]
      B --> C[Reinforce With reason]
  
```





Behoefte en Motivatie

- *Wat wil hij doen (wat- behoefte)*
- *Waarom (Motivatie - Emoties)*




The diagram shows an iceberg floating in the ocean. The tip of the iceberg, which is above the water line, is labeled "Behaviour" in red text. The much larger part of the iceberg, which is submerged below the water line, is labeled with "Emotions", "Motivation", "Values", and "Needs" in red text. A yellow arrow points upwards from the submerged part towards the tip of the iceberg, indicating that these internal factors drive the visible behavior.



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2 approaches...


1. Informeren – Vragen - Informeren
Wist u dat...
2. Vragen – Informeren - Vragen
Wat weet u over...
Wat wenst u te weten...
Wat lijkt u prioritair te bespreken...
Wat verontrust u...



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Learnings from practice

1. Messages will be perceived in depth and be persuasive if they **Connect** to **Personal Representation of Health Problem**
2. Individuals who believe that their conditions are **controllable** are more likely to adhere.
(**Self Efficacy**)



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Learnings from practice

Is it WORTH to do the change ?

1. Messages will be perceived in depth and be persuasive if they **Connect** to **Personal Representation of Health Problem**

Can I do the change ?

2. Individuals who believe that their conditions are **controlable** are more likely to adhere.
(**Self Efficacy**)




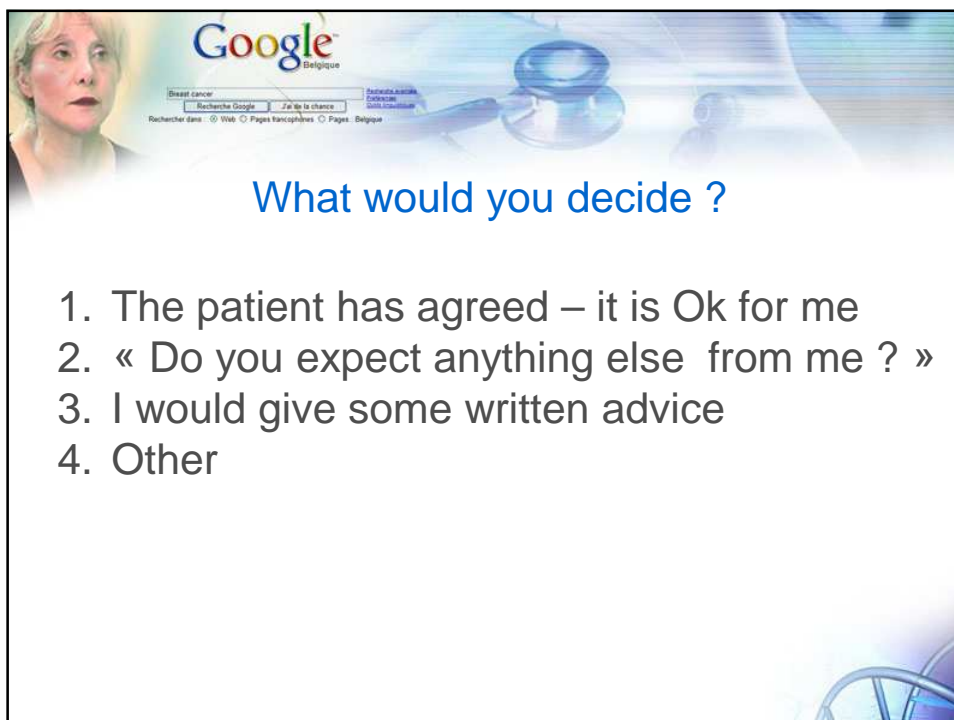
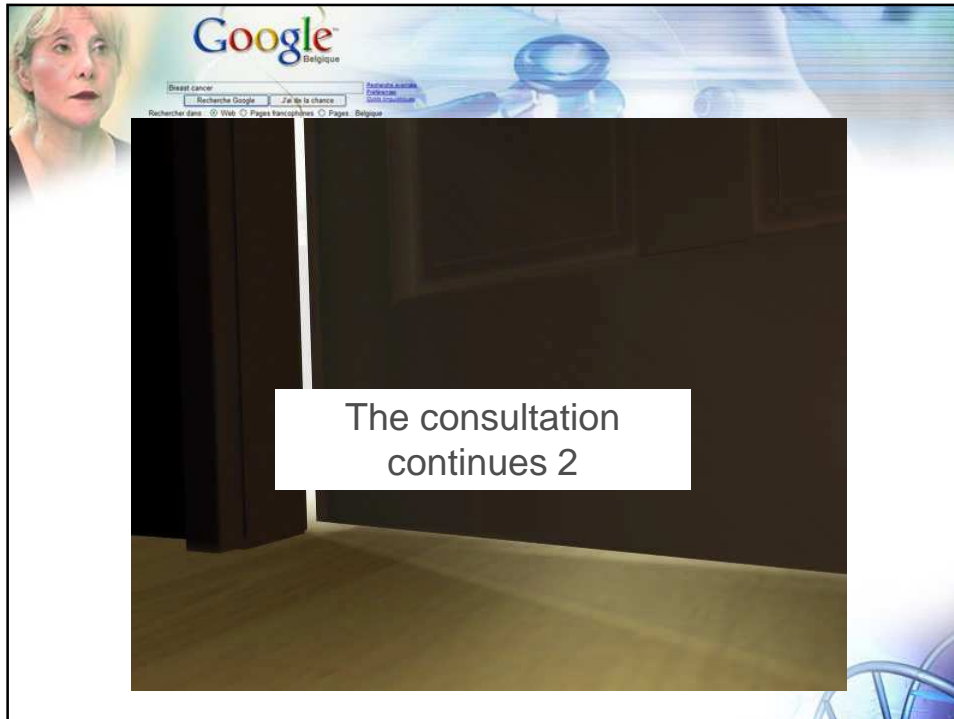
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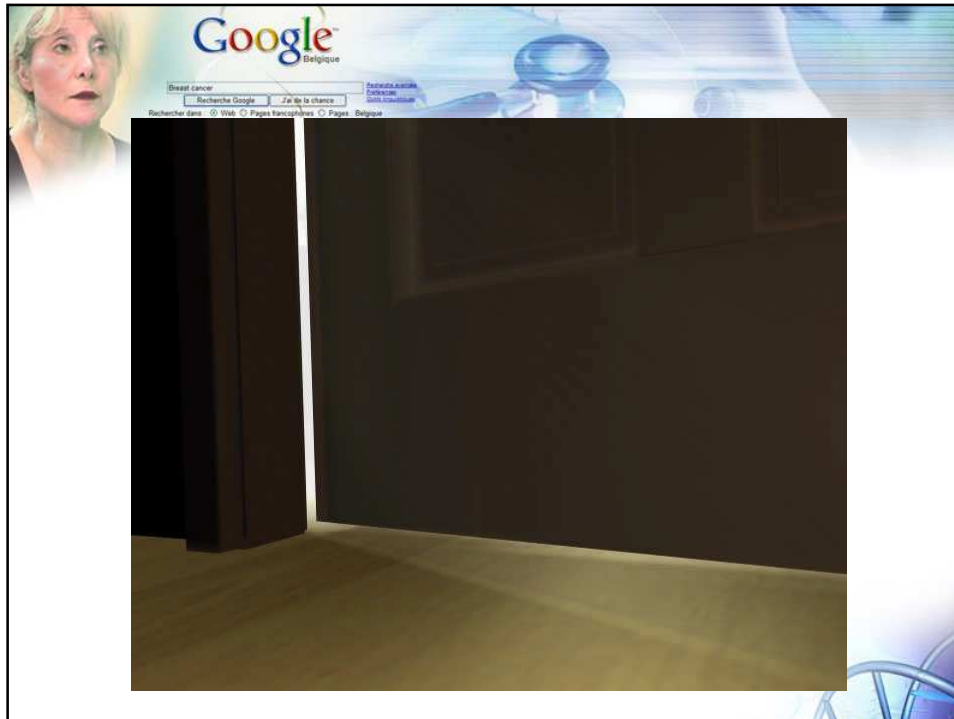
Heart cancer

Recherche avancée

1. DO : Discover with Open questions
2. MI : Motivate by Involving



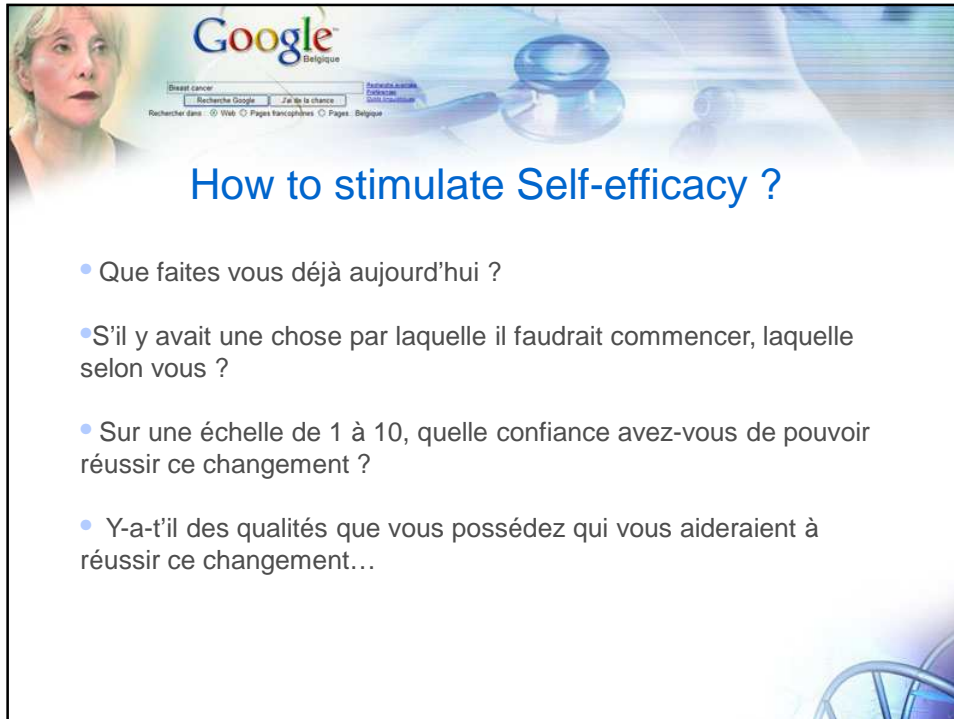




Which technique(s) did you notice ?

- The clinician Opens possibilities
- The patient Leads the talk
- She expresses clearly her choice and how/why he decided : **Self Efficacy + Action Plan**

People change only when they HEAR THEMSELVES talking about change !



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How to stimulate Self-efficacy ?

- Que faites vous déjà aujourd'hui ?
- S'il y avait une chose par laquelle il faudrait commencer, laquelle selon vous ?
- Sur une échelle de 1 à 10, quelle confiance avez-vous de pouvoir réussir ce changement ?
- Y-a-t'il des qualités que vous possédez qui vous aideraient à réussir ce changement...



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1. DO : Discover with Open questions
2. MI : Motivate by Involving
3. NO : Negotiate by Opening Possibilities



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How would you solve this ?

Scenario A

Scenario B

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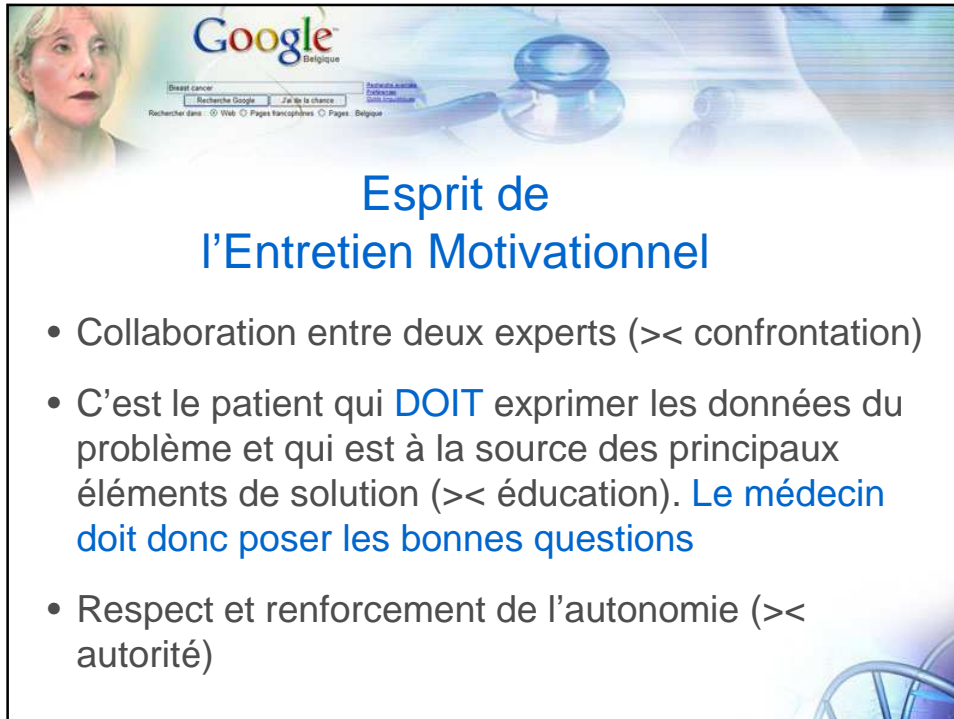
Breast cancer

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Which technique did you notice ?

1. The pharmacist influences her customer
2. The customer decides
3. The pharmacist influences but the customer defines an action plan.
4. Other



Esprit de l'Entretien Motivationnel

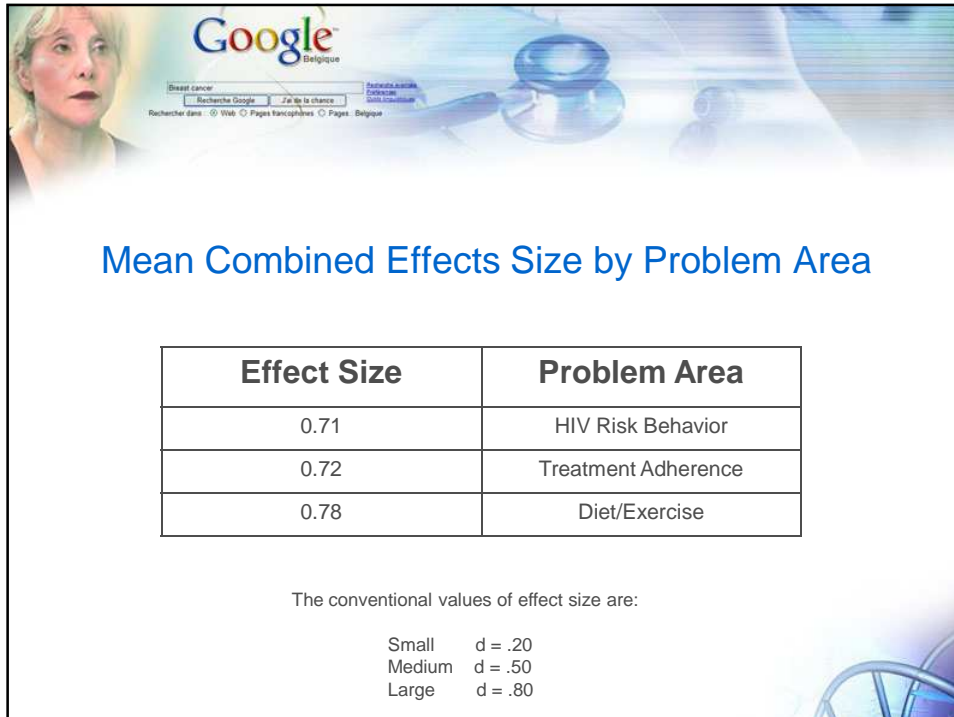
- Collaboration entre deux experts (>< confrontation)
- C'est le patient qui **DOIT** exprimer les données du problème et qui est à la source des principaux éléments de solution (>< éducation). **Le médecin doit donc poser les bonnes questions**
- Respect et renforcement de l'autonomie (>< autorité)



A Meta-Analysis of Research on Motivational Interviewing Treatment Effectiveness (MARMITE)

Annual Review of Clinical Psychology. 2005;1:91-111.

Numbers of Studies	Problem Area
31	Alcohol
14	Substance Abuse
6	Smoking
5	HIV Risk Behavior
5	Treatment Compliance
4	Water Purification
4	Diet and Exercise
1	Gambling
1	Eating Disorders
1	Relationships



Mean Combined Effects Size by Problem Area

Effect Size	Problem Area
0.71	HIV Risk Behavior
0.72	Treatment Adherence
0.78	Diet/Exercise

The conventional values of effect size are:

- Small $d = .20$
- Medium $d = .50$
- Large $d = .80$



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Teach me... And I Learn
Involve me... And I Remember

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