BOOK REVIEW

Communication Teaching Modules for the End-of-Life Educator. BY DAVID WEISSMAN, MD, AND KATHY BIERNAT, MS. Milwaukee, Wis: Medical College of Wisconsin, 1998; 180-page manual, diskettes, and videotape. \$50.00.

Current education and training of physicians in the United States fails to provide them with the knowledge, skills, and attitudes needed to care for dying patients. Recent initiatives to improve end-of-life care launched by major medical organizations and private foundations address the need for increased education and training of physicians in the medical, psychosocial, and ethical challenges of palliative care. One specific barrier to effective end-of-life care is the inability of physicians to communicate well with dying patients. Many physicians in training and in practice feel uncomfortable and uncertain when talking with patients about end-of-life issues.

Practical, easy-to-use teaching materials are needed to improve patient-physician communication about end-of-life issues. The *Communication Teaching Modules for End-of-Life Educators* developed by David Weissman, MD, an expert in palliative care at the Medical College of Wisconsin, is an excellent example of just that kind of teaching material. Targeted for teaching physicians-in-training and primary care physicians, the six educational modules address key topics in communicating effectively with seriously ill patients: breaking bad news, setting treatment goals, discussing do-not-resuscitate orders, conducting a family conference, discussing spiritual issues, and hospice care and referrals. The modules on discussing spiritual issues and on hospice care are particularly welcome as they address two topics often overlooked in teaching about palliative care.

The modules contain everything needed to present a teaching session of 20 to 50 minutes on each of the topics. The list of learning objectives and detailed time plan for each session allow the educator to adapt a module to meet the specific needs of a particular audience. Each module uses multiple teaching formats: didactic material is covered in slides, outlines, and references, while communication skills are demonstrated via videotapes of simulated interviews and role-play exercises, encouraging more interactive learning. Each module includes a limited number of references. More extensive references from the growing palliative care literature would enable interested individuals to explore the subject areas in more depth.

The slides (PowerPoint 97 format on diskette) guide the educator through the didactic material and provide trigger points for

launching into the videotaped interviews and learner role plays. The concise, well-designed slides encourage discussion and allow the educator to bring his or her own unique skills, background, and style to the material for a more genuine and lively presentation.

The interactive teaching formats are particularly effective. The modules on breaking bad news, setting treatment goals, and discussing DNR orders include paired videotaped interviews of Dr. Weissman portraying a caring, well-intentioned physician talking with a simulated patient with pancreatic cancer. The first interview in each pair demonstrates the "wrong" way to communicate about each issue; the second version of the same interview demonstrates "good" communication skills. The paired interviews keenly demonstrate the positive effects of some simple measures: attention to the physical setting chosen for discussions; careful choice of language; and use of silence, active listening, and an empathetic presence. Though these modules and videotaped interviews provide a structure for approaching these difficult discussions, little attention is given to anticipating and managing the emotional responses of either the physician or the patient and the patient's family. Much of the challenge of these discussions lies in skillfully exploring the wide range of emotional responses encountered. When teaching these modules, educators should incorporate specific strategies for dealing with emotions.

Role play, though often intimidating for learners, is an essential tool in teaching communication skills. Weissman places the role-play exercises in these modules after the learners have viewed his videotaped role play, allowing them to model the newly presented skills. An educator experienced in teaching communication skills could use the included materials to teach these modules. Less-experienced educators may need more guidance. In a future edition, Weissman may want to include a chapter for educators on specific techniques for teaching communication skills, such as setting up a role-play exercise, giving and eliciting feedback, and supporting group participation (for example, see chapters in *The Medical Interview: Clinical Care, Education, and Research*, Lipkin M, Putnam SM, Lazarre A. eds. New York, NY: Springer Publishing Co.; 1995).

Dr. Weissman should be commended for including evaluation materials with each module. The evaluation materials allow each educator to determine a module's effectiveness based on satisfaction scales and written comments. Other forms guide the teacher through a structured assessment of each student's communication skills and encourage learners to rate their own competencies before and after participating in the module. Finally, the instructors are asked to evaluate the teaching materials and to send their comments directly to Dr. Weissman, so he can update the modules for future editions.

This reference is unique in combining didactic teaching about palliative care with teaching skills for communicating about end-of-life issues. Many resources for teaching palliative care target only cognitive skills, while the best resources for teaching communication skills often do not specifically focus on end-of-life issues. This multimedia educational resource succeeds in addressing the cognitive, attitudinal, and skills objectives needed to improve physician competency in end-of-life care.

Dr. Arnold's work is supported by the Open Society Institute's Project on Death in America Faculty Scholar Program.

JGIM solicits reviews of new books from its readers. If you wish to review a book, please submit a letter of interest that identifies the book in question (title, author, and publisher) to Eric Bass, MD, Editor, JGIM, JHU Division of General Internal Medicine, 1830 East Monument St., Room 8068, Baltimore, MD 21205; telephone (410) 955-9868; fax (410) 955-0825.

End-of-life educators wanting to implement recommended curricular changes to improve physician skills in communicating with dying patients, but reluctant to undertake the daunting task of developing high-quality educational materials themselves, will find the *Communication Modules for End-of-Life Educator* created

by Dr. Weissman a practical, adaptable, and relatively inexpensive addition to their teaching tools.—**BOB ARNOLD, MD**, *Division of General Internal Medicine, University of Pittsburgh, Pittsburgh, Pa*; and **LINDA KING, MD**, *Palliative Care Service, Massachusetts General Hospital, Boston, Mass.*

REFLECTIONS

So Little in This Life

Springtime in Indiana
I always felt wrong
from the stench
which rose from fields
spread thick with wet manure,
the odor coming at me
through my window into my sleep,
with the tasks of math class,
as I broke through air on a bike.

I knew it was animal dung
often kept shielded under roof
until warm air convinced the farmers
the earth would suck it in again.

My father laughed at me
and said
you have to give back
most of what you take.

He would grab his spade
and slice from beneath the shit
a black cone of soil
alive with earthworms
which I plucked
to later pin
on fish hooks.

Now I work in sterile fields
far and foreign to that boy.
I cannot find my fishing pole.

I have learned to cut
into live bodies
to sometimes remove
offensive matter.

Most times people wake
from this death called surgery.
They will be glad
I have thrown back to the earth
a rebel piece of them.
They will meet those cells again,
but later.

The ones who die
while I hold the knife
might have loved ones
in fear outside,
waiting for words.

I will drop my mask,
talk about effort,
about the grip of disease,
about strength and lost hope.

I will pull from my throat
anything to give
those mourning heads
a more comfortable crook.

So little in this life is waste.

RON WILLY, MD
San Diego, Calif

FINALIST, 1999 Creative Medical Writing Contest