

How your body language affects patient care

Khushminder Chahal, MD

Patient surveys reveal communication to be one of the most important competencies a physician should possess.¹ However, communication is not only what is spoken. A physician's nonverbal communication or "body language" sets the trajectory for treatment from the moment the patient first sees the physician. Body language includes all forms of communication other than words,² such as vocal tone, posture, and facial and body movements. Being mindful of such behaviors can provide physicians with greater access to their patients. Effective nonverbal communication can have significant effects on patient engagement, compliance, and outcome.

First impressions

The physician's nonverbal behavior is crucial to the patient's impression of his (her) physician.³ Appropriate eye gaze, proper distance or forward lean, direct body orientation, uncrossed legs and arms, and arm symmetry also have been associated with patient reports of satisfaction.^{3,4} A physician who displays these affiliative nonverbal behaviors is more likely to engage with the patient and be rated higher for patient satisfaction.^{5,6} Once a patient has developed rapport and an alliance with the physician and is satisfied with care, you likely will see improvements in patient adherence.

Adherence to treatment

The physician's ability to verbally and non-verbally communicate a safe, encourag-

ing, and efficient relationship is crucial for patient adherence to treatment. Patients report greater alliance with their physicians when they perceive genuine engagement and concern.⁷ The physician showing interest impacts the patient's rating of the relationship⁶ and provides confidence that the physician is sensitive and understanding.⁸ As a result, the patient is more trusting and communicative, which allows for greater progress in the patient's care because it often leads to attending appointments as well as medication adherence.⁹

Medication nonadherence is a complex issue that is influenced by several factors,¹⁰ but it is widely accepted that lack of communication and patient education are important factors.¹¹ Nonverbal communication can help the clinician to distinguish patients who are unwilling to take medication from those who are willing but unable to do so.¹¹

Overall adherence with care also can be affected by nonverbal behaviors. Positive perception of the physician's tone of voice has been associated with greater attendance at appointments,¹² greater referral rates to alcohol abuse treatment clinics,¹³ and lower rates of malpractice among surgeons.¹⁴ Such trends demonstrate the influence that



Dr. Chahal is a PGY-3 Resident, Wayne State University, Department of Psychiatry and Behavioral Neurosciences, Detroit, Michigan.

Disclosure

The author reports no financial relationships with any company whose products are mentioned in this article or with manufacturers of competing products.



LET YOUR VOICE BE HEARD

CURRENT PSYCHIATRY invites psychiatry residents to share their views on professional or clinical topics for publication in Residents' Voices. E-mail residents@currentpsychiatry.com for author guidelines.

Clinical Point

A positive perception of the physician's tone has been associated with greater rates of attendance and referrals and lower malpractice rates

effective nonverbal communication could have on health care costs by reducing doctor shopping and malpractice rates and increasing effective care.

Outcomes

Physician's positive nonverbal communication has been linked to positive patient outcomes. Physical therapists who smile, nod, and maintain eye contact compared with those who do not smile or look away from the patient, have been shown to achieve greater short- and long-term improvements in functioning of their patients.¹⁵ Perceptions of physicians as distant or detached are associated with poorer patient outcomes.^{5,6,16} Pain patients with high nonverbal support from their physicians show increased pain tolerance and reduction in the amount of pain expressed, compared with those interacting with low nonverbal support physicians.¹⁷ Patients respond more to care if they feel their physician is engaged and sensitive to their needs.

There is much to gain if a physician is mindful of his body language. As Henry A. Nasrallah, MD, Editor-in-Chief of *CURRENT PSYCHIATRY* wrote in one of his editorials, physicians can exert a far more positive placebo effect through their behavior and relatedness to a patient than the classic placebo.¹⁸

References

1. McBride CA, Shugars DA, DiMatteo MR, et al. The physician's role. Views of the public and the profession on seven aspects of patient care. *Arch Fam Med*. 1994;3(11):948-953.
2. Knapp ML, Hall JA, Horgan TG. *Nonverbal communication in human interaction*. 8th ed. Boston, MA: Wadsworth, Cengage Learning; 2014.
3. Beck RS, Daughtridge R, Sloane PD. Physician-patient communication in the primary care office: a systematic review. *J Am Board Fam Pract*. 2002;15(1):25-38.
4. Bensing J. Doctor-patient communication and the quality of care. *Soc Sci Med*. 1991;32(11):1301-1310.
5. Mast MS. On the importance of nonverbal communication in the physician-patient interaction. *Patient Educ Couns*. 2007;67(3):315-318.
6. Larsen KM, Smith CK. Assessment of nonverbal communication in the patient-physician interview. *J Fam Pract*. 1981;12(3):481-488.
7. Pinto RZ, Ferreira ML, Oliveira VC, et al. Patient-centred communication is associated with positive therapeutic alliance: a systematic review. *J Physiother*. 2012;58(2):77-87.
8. DiMatteo MR, Taranta A, Friedman HS, et al. Predicting patient satisfaction from physicians' nonverbal communication skills. *Med Care*. 1980;18(4):376-387.
9. McCabe R, Bullenkamp J, Hansson L, et al. The therapeutic relationship and adherence to antipsychotic medication in schizophrenia. *PLoS One*. 2012;7(4):e36080.
10. Kardas P, Lewek P, Matyjaszczyk M. Determinants of patient adherence: a review of systematic reviews. *Front Pharmacol*. 2013;4:91.
11. Velligan DL, Weiden PJ, Sajatovic M, et al; Expert Consensus Panel on Adherence Problems in Serious and Persistent Mental Illness. The expert consensus guideline series: adherence problems in patients with serious and persistent mental illness. *J Clin Psychiatry*. 2009;70(suppl 4):1-46; quiz 47-48.
12. Cruz M, Roter DL, Weiland M, et al. Appointment length, psychiatrists' communication behaviors, and medication management appointment adherence. *Psychiatr Serv*. 2013;64(9):886-892.
13. Milmo S, Rosenthal R, Blane HT, et al. The doctor's voice: postdoctor of successful referral of alcoholic patients. *J Abnorm Psychol*. 1967;72(1):78-84.
14. Ambady N, Laplante D, Nguyen T, et al. Surgeons' tone of voice: a clue to malpractice history. *Surgery*. 2002;132(1):5-9.
15. Ambady N, Koo J, Rosenthal R, et al. Physical therapists' nonverbal communication predicts geriatric patients' health outcomes. *Psychol Aging*. 2002;17(3):443-452.
16. Stewart MA. Effective physician-patient communication and health outcomes: a review. *CMAJ*. 1995;152(9):1423-1433.
17. Ruben MA, Blanch-Hartigan D, Hall JA. Nonverbal communication as a pain reliever: the impact of physician supportive nonverbal behavior on experimentally induced pain. *Health Commun*. 2016;1-7. doi: 10.1080/10410236.2016.1196418.
18. Nasrallah HA. The most powerful placebo is not a pill. *Current Psychiatry*. 2011;10(8):18-19.



Discuss this article at
www.facebook.com/CurrentPsychiatry

