

The patient–doctor relationship: a synthesis of the qualitative literature on patients' perspectives

Matthew Ridd, Alison Shaw, Glyn Lewis and Chris Salisbury

ABSTRACT

Background

The patient–doctor relationship is an important but poorly defined topic. In order to comprehensively assess its significance for patient care, a clearer understanding of the concept is required.

Aim

To derive a conceptual framework of the factors that define patient–doctor relationships from the perspective of patients.

Design of study

Systematic review and thematic synthesis of qualitative studies.

Method

Medline, EMBASE, PsycINFO and Web of Science databases were searched. Studies were screened for relevance and appraised for quality. The findings were synthesised using a thematic approach.

Results

From 1985 abstracts, 11 studies from four countries were included in the final synthesis. They examined the patient–doctor relationship generally ($n = 3$), or in terms of loyalty ($n = 3$), personal care ($n = 2$), trust ($n = 2$), and continuity ($n = 1$). Longitudinal care (seeing the same doctor) and consultation experiences (patients' encounters with the doctor) were found to be the main processes by which patient–doctor relationships are promoted. The resulting depth of patient–doctor relationship comprises four main elements: knowledge, trust, loyalty, and regard. These elements have doctor and patient aspects to them, which may be reciprocally related.

Conclusion

A framework is proposed that distinguishes between dynamic factors that develop or maintain the relationship, and characteristics that constitute an ongoing depth of relationship. Having identified the different elements involved, future research should examine for associations between longitudinal care, consultation experiences, and depth of patient–doctor relationship, and, in turn, their significance for patient care.

Keywords

communication; continuity of patient care; physician–patient relations; qualitative research.

INTRODUCTION

The patient–doctor relationship is an important concept in health care, especially primary care. However, it is also a complex topic that means different things to different people. As a consequence of this, research in the area has been somewhat fragmented.

Many studies have investigated it in terms of the communication and interpersonal skills of the doctor.^{1–4} Another major facet is continuity of patient care, where the relational aspect is referred to as interpersonal continuity.^{5–7} More recently there has been interest in examining the characteristics of the ongoing relationship itself, such as trust.⁸ The patient–doctor relationship can be seen as a specialised form of human relationship, and work in other disciplines has distinguished between the dynamic interactive aspects of relationships and the mental associations made by people 'in' relationships, which are 'historically derived representations of experience'.⁹ All of these elements are thought to be important, but in the absence of a conceptual framework that can be applied to patient–doctor relationships, we are unlikely to establish the significance of the different parts and how they affect patient care.

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Reasonable Care Legal Perspectives On The Doctor Patient Relationship

Emily Jackson



Reasonable Care Legal Perspectives On The Doctor Patient Relationship:

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