USING LITERATURE TO HELP UNDERSTAND
AND WORK WITH DIFFICULT PATIENTS

I. **Difficult patients a good example of how literature can be helpful**
  A. **Many didactic models for dealing with difficult patients**
      1. **Schedule short, frequent visit; set limits; reinforce positive change**
      2. **Often these not enough to help us addresses the emotional responses these patients evoke**
  B. **Literature can help**
      1. **Diffuse the intensity of these patients**
      2. **Encourage us to think more imaginatively about them**

II. **What Do We Mean By Difficult? "Heartsink"**
  A. **Psychological disorders, especially personality disorders**
  B. **Somatization**
  C. **Addictions, drug-seeking**
  D. **Demanding, entitled, hostile**
  E. **Noncompliant, do not take responsibility for own illness**
  F. **Medical condition that resists diagnosis/treatment**

III. **Any Patient Can Be Difficult**
  A. **Prejudiced or racist patient**
  B. **Worried well**
  C. **Dying patient**
  D. **Geriatric patient**
  E. **Culturally/linguistically different patient**

IV. **Effects on Physicians of Difficult Patients**
  A. **Frustration, exasperation**
  B. **Anger, hostility**
  C. **Defeat, withdrawal, avoidance**
  D. **Helplessness, despair**
  E. **Cynicism, loss of idealism about human nature**
  F. **Patient blame**

V. **Goal of Using Literature**
  A. **Develop greater insight**
  B. **Increase empathy for difficult patients**
  C. **Better understand our own emotions in response to difficult patients**
  D. **Generate problem-solving strategies**

VI. **Organizing a Literature-Based Discussion**
  A. **Basic orientation questions**
      1. **Who is the speaker?**
      2. **What is the point of view?**

        3. What is happening?
        4. What is the tone of the work?
    B. Thematic questions
        1. What is the selection saying?
        2. What is the basic idea of the selection?
        3. How would you interpret the message or point of this selection?
        4. Differences of opinion; additional ideas
    C. Emotional response/empathy questions
        1. What is the narrator (and other characters) feeling about his/her/their situation?
        2. How did you feel about the narrator, other characters, and/or opinions expressed in the selection?
        3. If you did not like the narrator, other characters, etc., what could happen to make you feel more sympathetic to him/her/them?
        4. What would this story be like from the point of view of one of the other characters?
        5. Did you like or dislike this selection? Why?
    D. Credibility questions
        1. Is this selection true to human experience?
        2. Is it credible? Does it make sense?
    E. Clinical implications
        1. What message can you take back to clinical practice from this selection?
        2. What did it teach you that might be relevant to dealing with difficult patients?
        3. How would you feel about being this person's physician?
        4. If you were this person's physician, how would you want to act? What might you say or do?
        5. What have you learned about yourself as a physician from reading this selection?

VII. Personal Writing as a Tool for Professional Development
A. An intriguing body of research shows that
    1. In a variety of patient populations (rheumatoid arthritis, asthma, mental disorders) writing is associated with reduced symptoms and improved psychological health
    2. In normal populations, writing about past and present traumas predicts better immune function, decreased physician visits, and improved wellbeing
B. A theoretical model suggests that writing is beneficial because it
    1. Counteracts passivity and helplessness by promoting active reflection
    2. Creates understanding and coherence from previously chaotic events
    3. Helps us discover alternative/complementary meanings and points of view
    4. Can result in resolution and moving on
C. Writing is also a way of celebrating or marking pivotal events

VIII. Point of view writing
    A. Definition

1. **Writing from patient (family member's) point of view**
2. **Describes key life event or doctor-patient encounter**

B. **Technique**
1. **Select patient on basis of perceived difficulty or heightened affect**
2. **Commit 10 minutes of writing time**
3. **Use first person singular form ("I") rather than 3rd person**
4. **Can imagine you're talking to your doctor, a family member of friend, or simply describing a situation**
5. **Draw on your personal knowledge of the patient and imagine what you don't know based on inferential knowledge**

C. **Purpose**
1. **Increase understanding, empathy**
2. **Encourage playful, imaginative, creative thinking about patient**
3. **Stimulate curiosity about and greater appreciation for patient**
4. **Reduce feelings of frustration, helplessness**
5. **Develop innovative strategies for patient interaction/management**