

## **FM REVIEW 2016 15 COMMENTS**

**COMMENTS TO EDITOR: Recommend minor revision**

**COMMENTS TO AUTHOR: This is a powerful and heartbreaking essay, and highlights a dilemma many well-meaning physicians encounter who want to do good for their patients yet are uninformed about historical/social contexts that give rise to suspicion of dominant systems of healthcare. We also appreciate that you are telling this story as a son who has lost his mother, and we deeply appreciate your willingness to share it with your colleagues through this journal. We think it has a great deal to teach our readers.**

**Reviewers requested that you revise the essay in two directions. Reviewer 1 asks for more material about the historical underpinnings of distrust of medical profession in African-American community (e.g., Tuskegee). This seems like a good idea to me as well, if you can approach it in a non-didactic way. The narrative essay, as you rightly conceived it, should tell a personal story. It is not an opinion piece or a history lesson. But if there was a way in which you could reference your mother's or your own views about how historical (and current) mistreatment of the black community by medical institutions has complicated patient-doctor interactions, this would add an important dimension to your narrative.**

**The other reviewer requests some examples of how you attempted to talk to your mother about pursuing a colonoscopy or other health issues. Looking back, is there anything you might have done differently? How did the mother-son dynamic complicate this process? Similarly, reviewer 1 wonders if you have some thoughts about how your mother's doctor could have been more effective or taken better care of her? Do you think tools such as active listening and motivational interviewing would have been relevant, or could they not have overcome your mom's ingrained distrust? The very reason that our readers will gravitate to your essay will make them want ideas about how they can be more successful, or at least more respectful, of their own patients.**

**While there is a word limit to the narrative essays, you have about 270 words to play around with. Please also note minor changes recommended by reviewer 1.**

**Thank you again for such an authentic and vulnerable piece of writing. This opens an essential dialogue about how doctors can best interact with their patients; and we expect it to trigger many valuable conversations in residencies and among faculty.**

**COMMENTS TO EDITOR II: The author has successfully addressed concerns of reviewers and assistant editor. In particular, he incorporated reference to the historical issues of African-Americans and health care in a way that provides context but retains the spirit of a narrative. He also clarifies that not everyone, including his mother, has a trusted pcp who can guide their care. One reviewer asks how family physicians can be more effective in overcoming patient mistrust. The author has made the decision to share his thoughts in his author response, but has not attempted to incorporate these into the narrative. I think this is a wise decision, as such exposition would transform the narrative into an opinion piece on improving relations between African-American patients and the healthcare system.**

This same reviewer also made very perceptive comments regarding how the relational dynamic between mother and son might have impede his ability to persuade her to take better care of her health. The author responds non-defensively and thoughtful to these comments, and adds text which, while it does not probe the psychology too deeply, at least alludes to this added layer of complexity. The final major criticism was a request that the author suggest some ways that physicians finding themselves in similar circumstances might reach out more effectively to such patients. The author does not really do this, but he does suggest how his mother's death has helped him to appreciate the complexity of these interactions (including the fact that other factors in addition to race may play a role) and have made him passionate about continuing to educate his patients. I think this is sufficient. I recommend minor revisions, with the idea that we will accept this essay on its next revision.

COMMENTS TO AUTHOR II: Thank you for this thoughtful revision, and for the care you've taken in considering reviewer suggestions. The inclusion of a reference to the historical issues of African-Americans and health care is brief but provides essential context while not compromising the narrative spirit of the story you are trying to tell.

You make an important point that not everyone, including sometimes mothers of physicians, has a trusted family physician to guide their care. In response to the reviewer who asked how to overcome patients' racially influenced mistrust of the healthcare system, I think you have made a wise decision not to attempt to incorporate your thoughtful structural analysis into the actual story. Such exposition, while a cogent analysis, would transform the narrative into an opinion piece and would not fit into the narrative essay format (we did very much appreciate including this response in your cover letter).

Thank you as well for adding text which, while it does not probe mother-son psychology too deeply, alludes to the ways in which this highly personal relationship actually complicated your ability to advise your mom. Many physicians of all races, ethnicities, and cultures struggle with the challenge of being both adult child and knowledgeable professional, and your honesty on this point should speak deeply to them.

The final major suggestion was a request that you offer some ways that physicians finding themselves in similar circumstances might reach out more effectively to skeptical patients such as your mom. The essay as written does not really address this concern, but it does show how your mother's death has helped you to appreciate the complexity of these interactions (including the fact that factors other than race may play a role) and has made you passionate about continuing to educate his patients.

I'm including a lightly edited text to clear up a few minor points of confusion, and suggest some stylistic adjustments. I also offer the addition of a phrase in the final sentence which might help readers consider that a place to begin in developing trust between patients and physicians may involve careful and respectful listening to their stories.

Thank you for being willing to put in a little more work on this very moving essay. Our goal is to ensure that it has as much impact as possible on our readers.