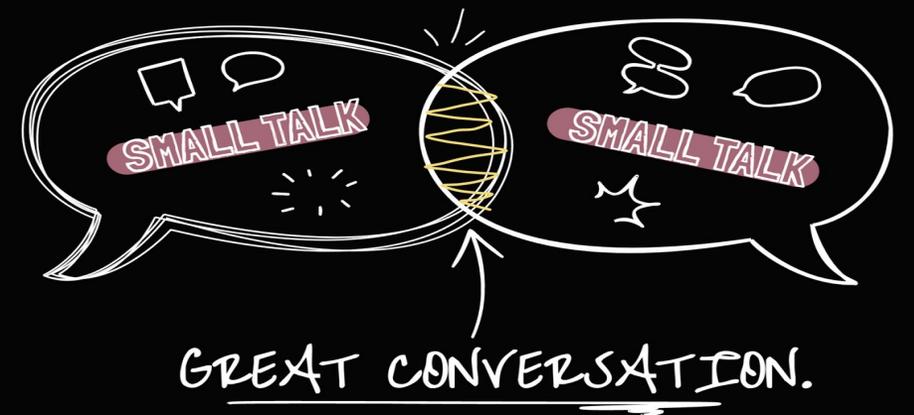


La comunicazione efficace

Claudia Sara Cimmino



Se senti dolore, sei vivo. Se senti il dolore degli altri, sei un essere umano.

Lev Tolstoj

GIOVANNI

4 mesi

«.... Trovare una via per comunicare, perché sa che la possibilità di capirsi a vicenda è essenziale..»

VERA GHENO
GRAMMAMANTI
Immaginare futuri con le parole



SUPER ET OPERA VIVA



Effective communication in palliative care from the perspectives of patients and relatives: A systematic review

Review Article

Cite this article: Engel M, Kars MC, Teunissen SCCM, van der Heide A (2023). Effective communication in palliative care from the perspectives of patients and relatives: A systematic review. *Palliative and Supportive Care* **21**, 890–913. <https://doi.org/10.1017/S1478951523001165>

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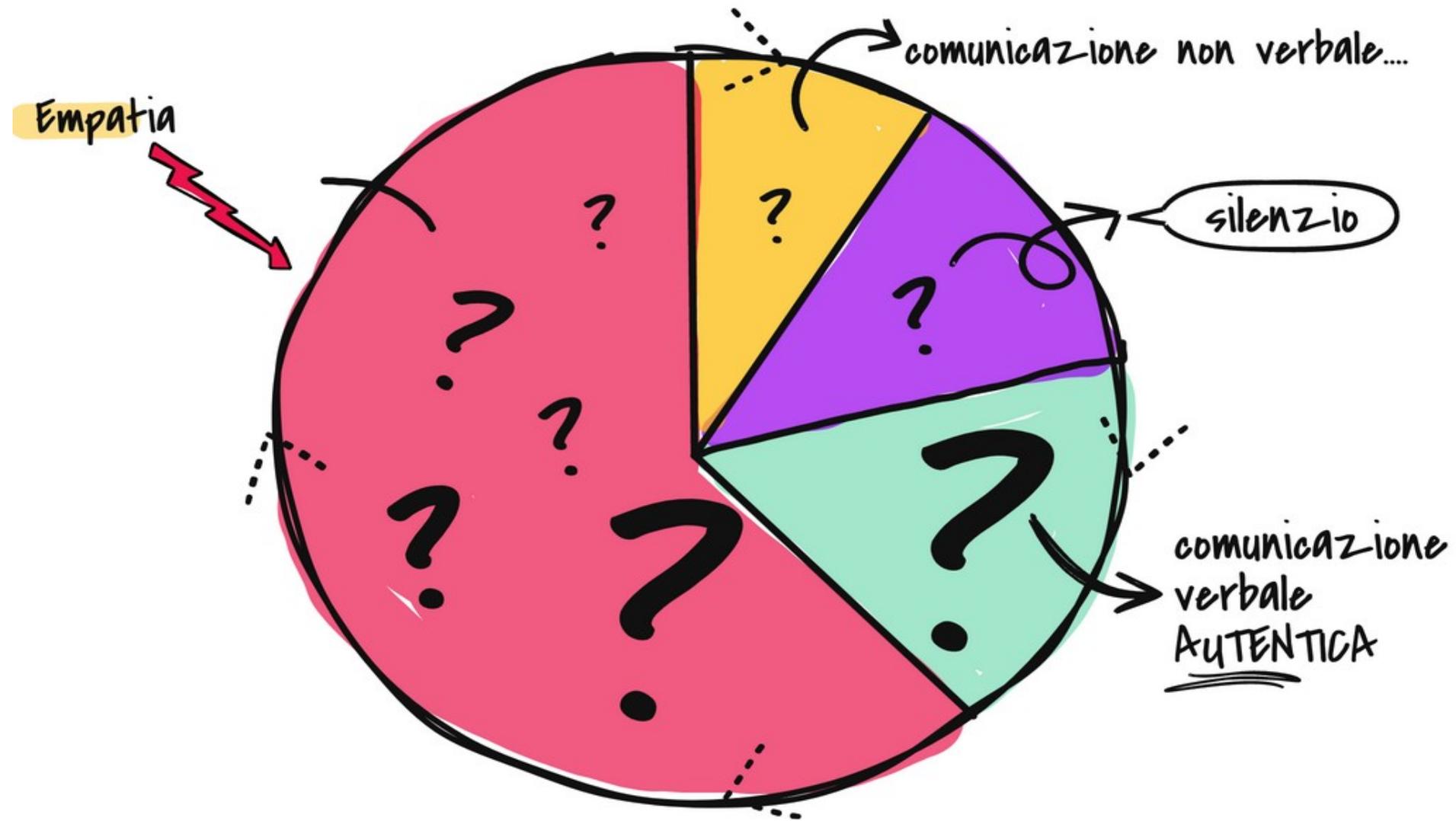
¹Department of Public Health, Erasmus MC, University Medical Center Rotterdam, Rotterdam, The Netherlands and ²Center of Expertise in Palliative Care, Julius Center for Health Sciences and Primary Care, University Medical Center Utrecht, Utrecht, The Netherlands

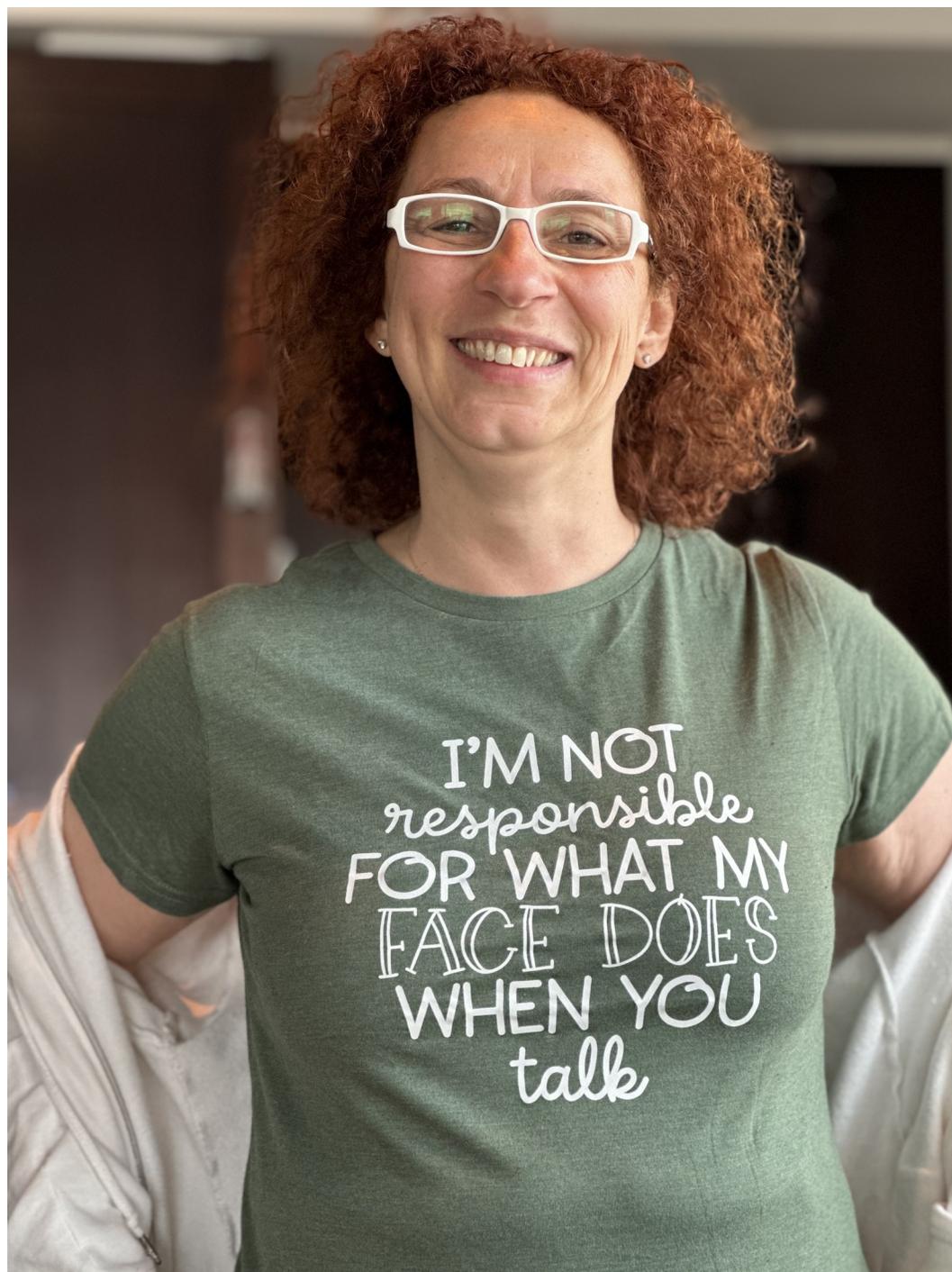
2011; Palliative Care Australia 2005), effective communication is defined as “a structured process between patient and healthcare professional in which bilateral information exchange and equality – with respect for the dependent position of the patient – are the basis.”



INFERMIERE

COMUNICAZIONE EFFICACE







NEGAZIONE DELLA SOGLIA

RIGETTO DEL LIMITE

NEGAZIONE DELLA SOFFERENZA



SORRY
I'M NOT
LISTENING

SILENZI

O

«SONO MOLTI I MODI CON CUI LA PAROLA E IL SILENZIO SI INTRECCIANO
L'UNA ALL'ALTRO: C'E' IL SILENZIO
CHE RENDE PALPITANTE E VIVA LA PAROLA, DILATANDONE I SIGNIFICATI;
C'E' IL SILENZIO CHE SI SOSTITUISCE ALLA PAROLA NEL DIRE L'ANGOSCIA;
C'E' IL SILENZIO CHE SI NUTRE DI ATTESE E DI SPERANZE.»

Eugenio Borgna

In ascolto del silenzio



Il silenzio è un elemento che cura e ristora. Non è quindi solo un'assenza di emozioni ma è un momento di pausa e di profondità per poter liberamente scandagliare il proprio stato d'animo. Il silenzio è denso di significato ed è prezioso provare ad ascoltarlo.

«CI SONO PAROLE CHE CURANO, E PAROLE CHE ACCRESCONO IL DOLORE...
...SIAMO RESPONSABILI DELLE PAROLE CHE DICIAMO, MA ANCHE DELLE
PAROLE CHE AVREMMO DOVUTO DIRE E NON ABBIAMO DETTO.»

Eugenio Borgna
In ascolto del silenzio



Il silenzio è un elemento che cura e ristora. Non è quindi solo un'assenza di emozioni ma è un momento di pausa e di profondità per poter liberamente scandagliare il proprio stato d'animo. Il silenzio è denso di significato ed è prezioso provare ad ascoltarlo.

La comunicazione diseguale

di Susanna Gallo 30 Maggio 2019

1004 4



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Telegram

La comunicazione diseguale



“La diseguaglianza comunicativa la si ritrova non solo in ospedale, ma anche nelle scuole, nei tribunali o nelle caserme militari.

La diseguaglianza parte dal concetto che in questi ambienti, le persone coinvolte nelle comunicazioni, non sono ALLA PARI, non hanno lo stesso POTERE. [...]

nella comunicazione diseguale si riscontra in particolare uno sbilanciamento del possesso di spazio, tempo e di lingua.

Ci sono specifici spazi per comunicare, specifici tempi o orari.”

Blog

La comunicazione diseguale

di **Susanna Gallo** 30 Maggio 2019

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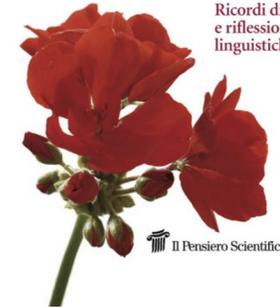


Telegram

“La diversità è creata dal posto in cui siamo nati e cresciuti, dalla nostra età, dalla famiglia in cui siamo cresciuti, dagli studi che abbiamo fatto, dal nostro lavoro, dal nostro sesso. Tutto questo fa sì che ognuno parli una SUA lingua italiana.”

Lucia Fontanella

La comunicazione diseguale



Ricordi di ospedale
e riflessioni
linguistiche

Il Pensiero Scientifico Editore

Blog

La comunicazione diseguale

di **Susanna Gallo** 30 Maggio 2019

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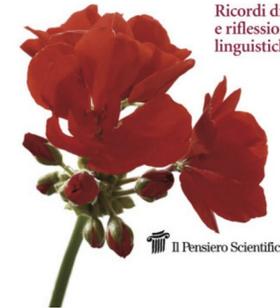
LinkedIn



Telegram

Lucia Fontanella

La comunicazione diseguale



Ricordi di ospedale
e riflessioni
linguistiche

Il Pensiero Scientifico Editore

“La predisposizione è il risultato delle esperienze ed aspettative di entrambi gli interlocutori”.

Blog

La comunicazione diseguale

di **Susanna Gallo** 30 Maggio 2019

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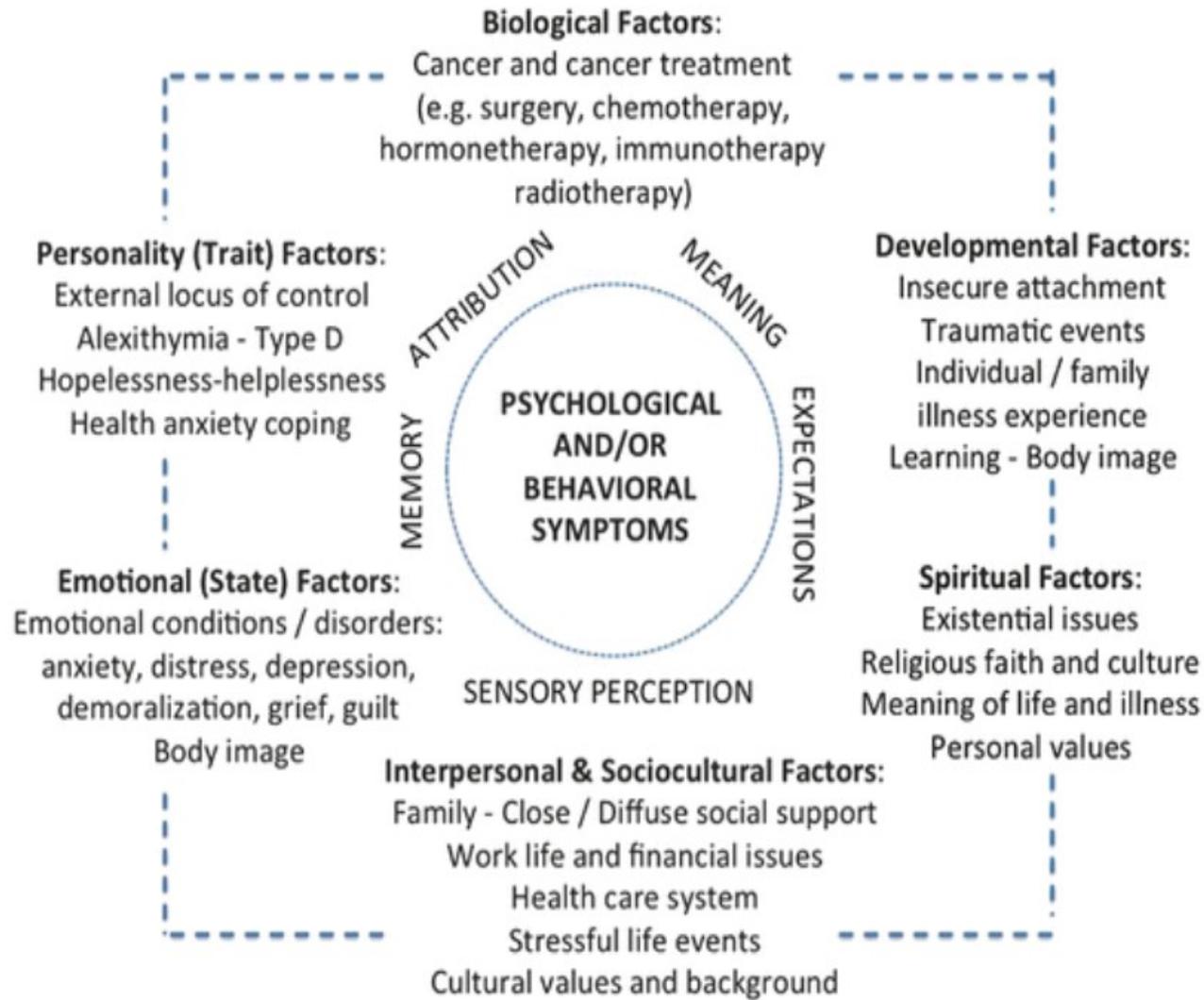
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Lucia Fontanella

La comunicazione diseguale



Accoglienza
Gentilezza
Parlare in modo semplice!





Lucia Fontanella

La comunicazione diseguale

Ricordi di ospedale
e riflessioni
linguistiche

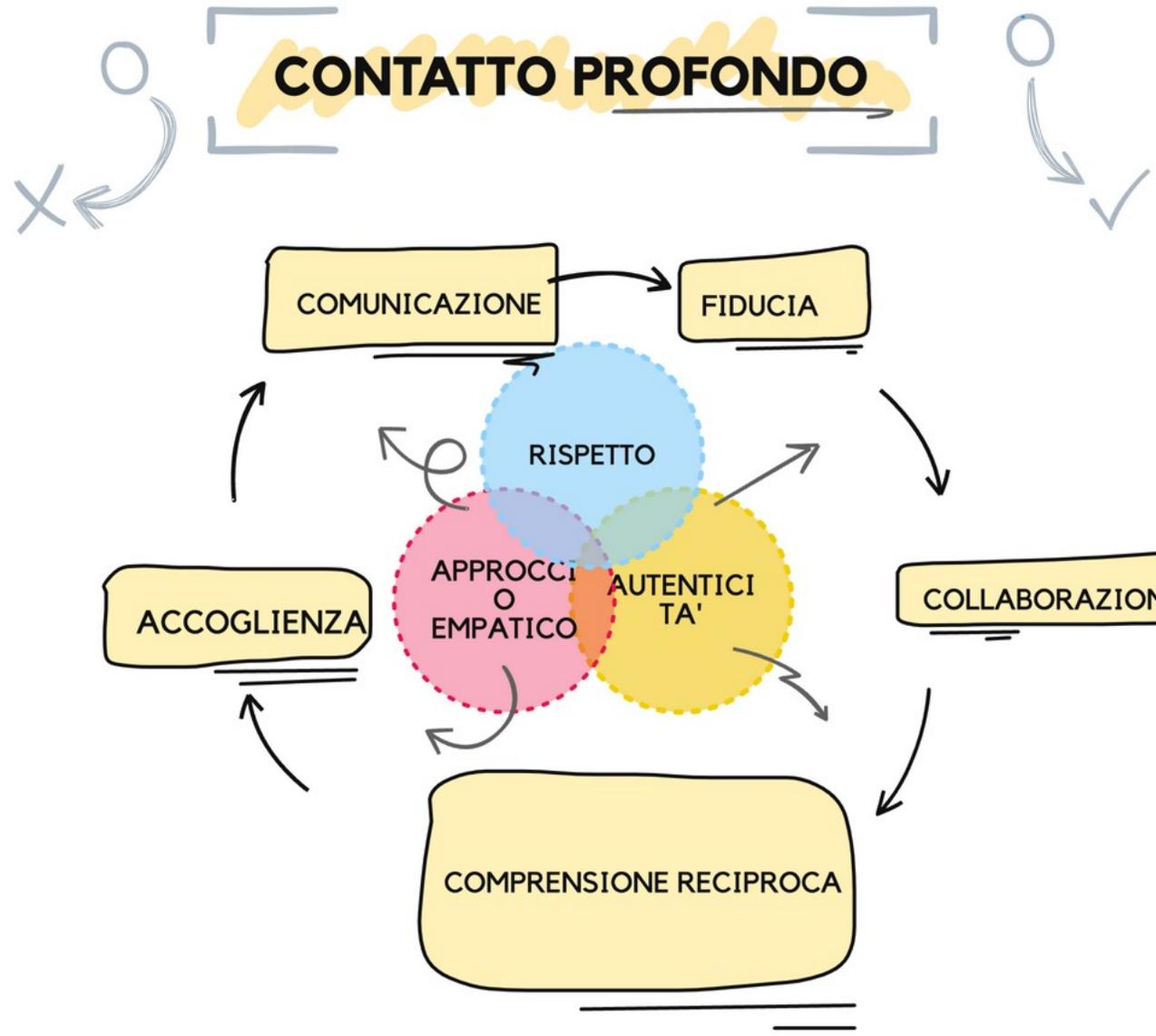


Il Pensiero Scientifico Editore

Curare i malati non è facile

In realtà, quello che vi chiediamo non è una cosa da poco. Vi chiediamo di curarci ma anche di interessarvi a noi. Ma noi siamo tanti, tutti diversi, brutti, belli, simpatici, odiosi, giovani, vecchi, vecchissimi, e in più tutti malati, postulanti. Ce la fanno in pochi, ad interessarsi di tutti, o di molti.

CONTATTO PROFONDO



Rogers

Review Article

Cite this article: Engel M, Kars MC, Teunissen SCCM, van der Heide A (2023). Effective communication in palliative care from the perspectives of patients and relatives: A systematic review. *Palliative and Supportive Care* 21, 890–913. <https://doi.org/10.1017/S1478951523001165>

Effective communication in palliative care from the perspectives of patients and relatives: A systematic review

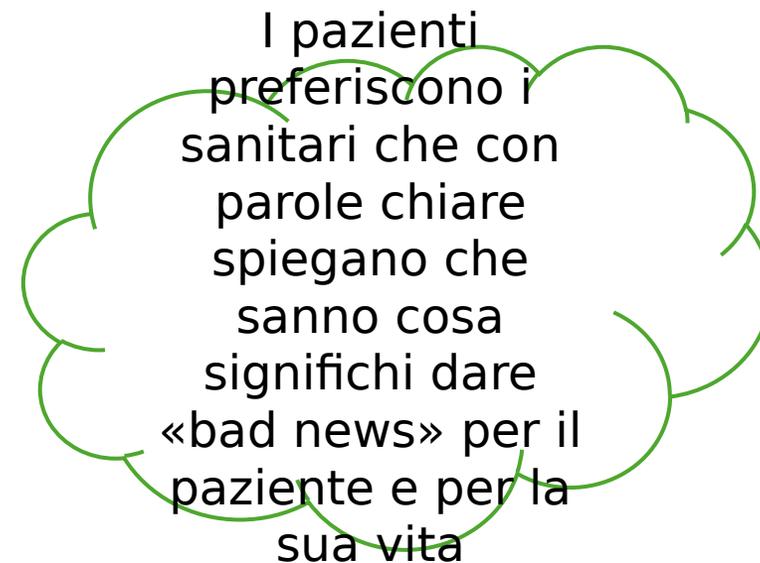
Marijanne Engel, PH.D.¹ , Marijke C. Kars, PH.D.², Saskia C.C.M. Teunissen, PH.D., R.N.² and Agnes van der Heide, PH.D.¹

¹Department of Public Health, Erasmus MC, University Medical Center Rotterdam, Rotterdam, The Netherlands and ²Center of Expertise in Palliative Care, Julius Center for Health Sciences and Primary Care, University Medical Center Utrecht, Utrecht, The Netherlands

Abstract



Pressione riguardo alle decisioni da prendere sul/i trattamenti



I pazienti preferiscono i sanitari che con parole chiare spiegano che sanno cosa significhi dare «bad news» per il paziente e per la sua vita

Table 2. Effective communication from the perspectives of patients and relatives, overview of themes found

Themes
1. Open and honest information
2. Aligning to the process of uptake and coping with information
3. Empathy
4. Clear and understandable language
5. Leaving room for positive coping strategies
6. Committed health-care professionals taking responsibility
7. Recognition of relatives in their role as caregiver



I. MEU
RUOLO.
TALENTO.
PASSIONE.
IDEE.



RISPETTO



TRAININ

G

Epub 2018 Aug 9.

Communicating with Patients and Families Around Difficult Topics in Cancer Care Using the COMFORT Communication Curriculum

[Elaine Wittenberg](#), [Anne Reb](#), [Elisa Kanter](#)

PMID: 30100368 PMID: [PMC6156926](#) DOI: [10.1016/j.soncn.2018.06.007](#)

Communicating with Patients and Families Around Difficult Topics in Cancer Care Using the COMFORT Communication Curriculum

Elaine Wittenberg, Anne Reb, Elisa Kanter

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Communication
Orientation
Mindful
communication
Family
Opening
Relating
TEAM

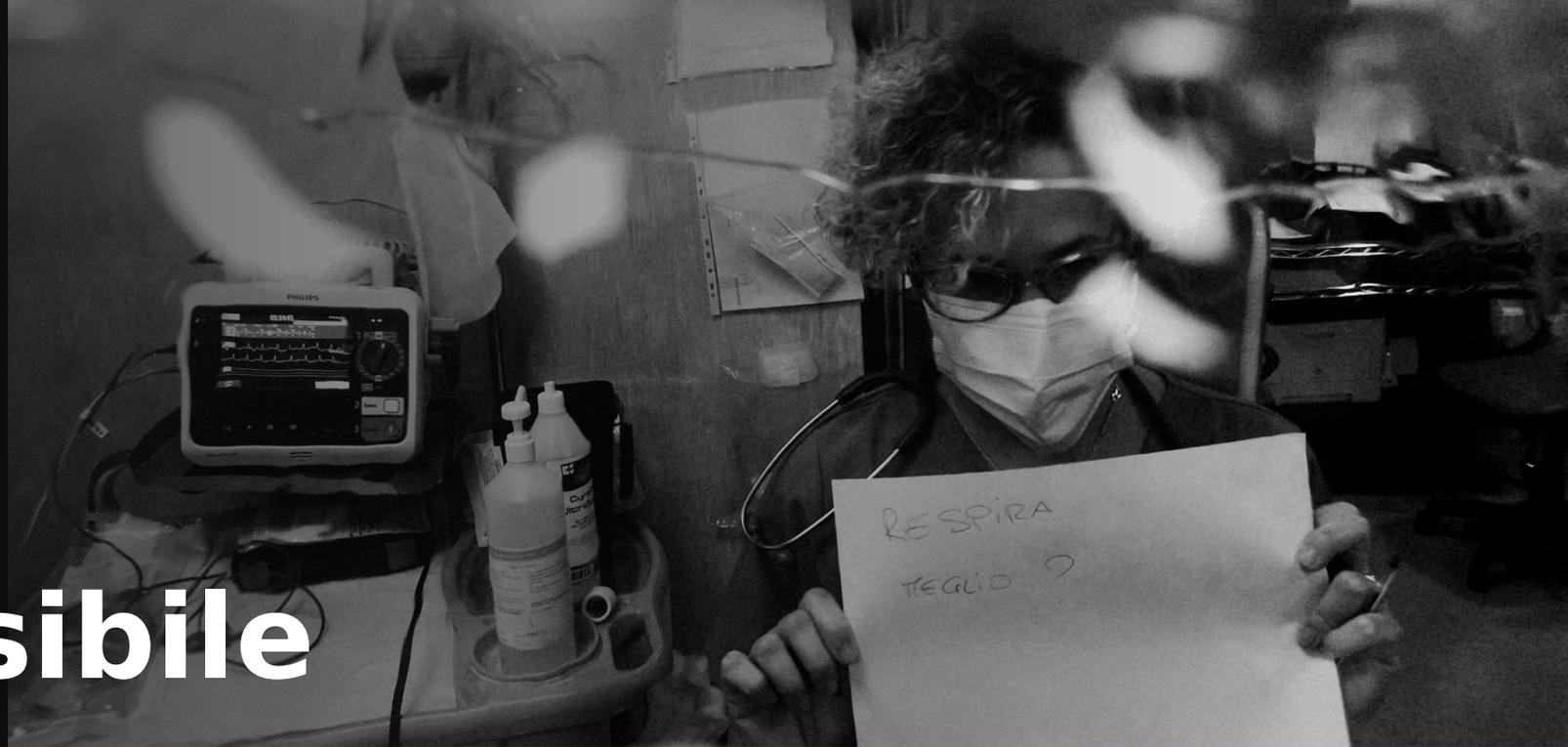


TABLE 1.
Overview of the COMFORT Communication Curriculum

Module	Communication processes
Communication	Understanding the patient’s story Recognizing task and relationship practices
Orientation and Options	Gauging health-literacy levels Understanding cultural humility
Mindful communication	Engaging in active listening Understanding nonverbal communication Being aware of self-care needs
Family	Observing family communication patterns Recognizing caregiver communication patterns Responding to the varying needs of family caregivers
Openings	Identifying pivotal points in patient/family care Finding common ground with patients/families
Relating	Realizing the multiple goals for patients/families Linking care to quality-of-life domains
Team	Developing team processes Cultivating team structures Distinguishing successful collaboration from group cohesion

Source: The COMFORT Communication Project developed by Elaine Wittenberg, PhD and Joy Goldsmith, PhD (www.CommunicateComfort.com), revised 2016.¹⁵

**Linguaggio
chiaro
e comprensibile**



Palliative care for patients with communication and cognitive difficulties

Kyle Sue MD MHM CCFP(PC) Paolo Mazzotta MD MSc CCFP(PC) Elizabeth Grier MD CCFP



Box 2. The ARCH model for breaking bad news

The following model can be helpful for communicating bad news to patients with IDD:

- **Ask:** Keep questions straightforward. Find out what is already known and what the patient wants to know
- **Repeat and clarify:** Be prepared to go over information repeatedly, in different ways (using books, photos, etc). Simplify if necessary
- **Check the level of understanding:** Explore how much the patient knows and what it means to him or her. Go back to previous stages as needed
- **Help the person express feelings:** Encourage expression of feelings, listen carefully, and give support. Help describe feelings and explore what the patient feels he or she might need next, future support options and choices, and letting other people know, if necessary

IDD—intellectual and developmental disabilities.
Data from Read and Morris.³³

STUDY PROTOCOL

Open Access

Complementary music therapy for cancer patients in at-home palliative care and their caregivers: protocol for a multicentre randomised controlled trial



Inmaculada Valero-Cantero¹, Francisco Javier Martínez-Valero², Milagrosa Espinar-Toledo³, Cristina Casals^{4*}, Francisco Javier Barón-López⁵ and María Ángeles Vázquez-Sánchez⁶



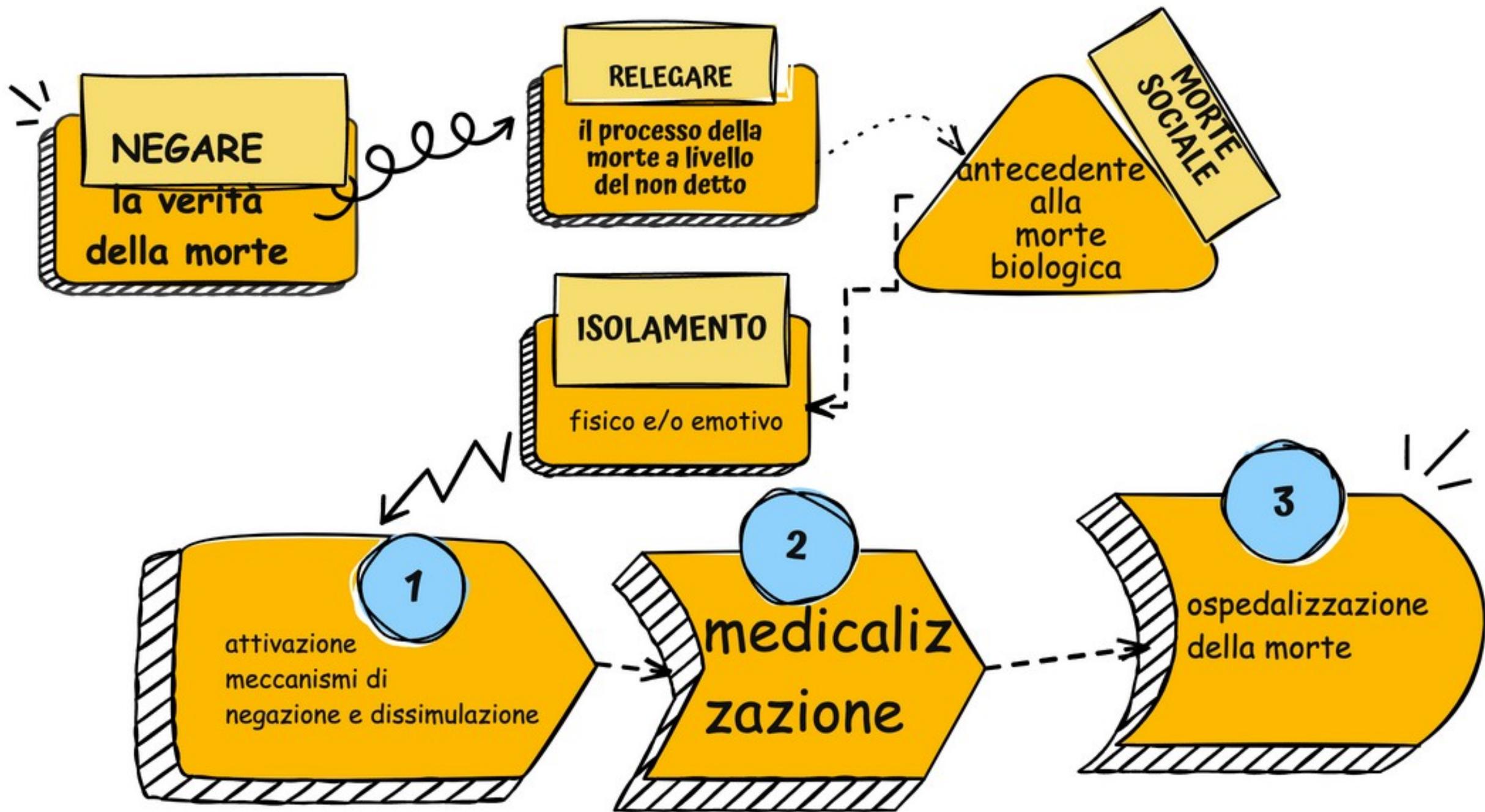
The World Health Organization defines palliative care as “an approach that improves the quality of life of patients and their families facing the problem associated with life-threatening illness, through the prevention and relief of suffering by means of early identification and impeccable assessment and treatment of pain and other problems, physical, psychosocial and spiritual” [5].

It is important to realise that palliative care should not be limited to the last days of life, but provided progressively during the course of the disease, in accordance with the needs of the patient and family members. Among other aspects, it should include relief from pain and other symptoms, together with attention to spiritual and psychological questions, helping patients live as actively as possible until death and providing support to help the family adapt, both during the illness and in bereavement [5, 6].

Chiamiamola con il suo
nome



39:51



CAMBIARE PUNTO DI

V A







“Song of Life”: Results of a multicenter randomized trial on the effects of biographical music therapy in palliative care

Marco Warth^{1,2*} , Friederike Koehler^{1,2*}, Martin Brehmen³,
Martin Weber³, Hubert J Bardenheuer⁴, Beate Ditzen^{1,2} and Jens Kessler⁴

Palliative Medicine
2021, Vol. 35(6) 1126–1136
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Creative arts therapies offer an alternative way for terminally ill patients to regulate emotions and integrate life experiences on a psycho-spiritual level.²² Music therapy has been a substantial part of palliative care since its beginnings²³ and aims at the improvement of quality of life by alleviating physical and emotional burden as well as through enabling communication and spiritual experiences.²⁴ Common definitions of music therapy emphasize the importance of the therapeutic relationship combined with musical and verbal techniques, and thereby contrast music listening interventions which do not require the presence of a trained therapist.²⁵ Music therapy techniques encompass receptive (e.g. music and imagery), creative (e.g. songwriting), recreative (e.g. instrument playing), and combined (e.g. musical life review) methods,²⁶ which usually are customized to the individual's needs.²⁷ Previous trials on the efficacy of music therapy in palliative care reported beneficial effects regarding the improvement of quality of life, general well-being,^{28,29} and spiritual well-being,^{30,31} as well as the reduction of pain³² and anxiety.³³ No study has systematically evaluated biographical music therapy in a clinical trial in palliative care yet.



Committed health-care professionals taking responsibility

...responsible for them and deprived patients of a full sense of security and trust, i.e. knowing that they were only in good hands with regard to medical-technical care but also that their health-care professional cared about them as a person (O'Connor et al. 2020; Voruganti et al. 2018). Continuity of health-care professionals prevented patients from having to tell the same story over and over again, but also facilitated a human connection, that could appeal to health-care professionals' sense of responsibility and commitment (Brom et al. 2017; Middleton-Green et al. 2019; Voruganti et al. 2018). If several health-care professionals were involved, patients indicated that consistent reporting about their illness and test results was important (McGinley and Waldrop 2020; Steinhauser et al. 2015). Patients and relatives further preferred a proactive attitude from health-care professionals (Ahmed et al. 2015; Tavares et al. 2020; Voruganti et al. 2018), unless the patient indicated otherwise (Ibañez-Masero et al. 2019; McGinley and Waldrop 2020; Steinhauser et al. 2015; Washington et al. 2019).

Recognition of relatives in their role as caregiver

In several studies, relatives emphasized that patients often largely relied on their caregiving and that they considered themselves the backbone of the patient's support system. Many felt heavily burdened and believed that their role as caregiver deserved explicit attention and recognition from health-care professionals (Masefield et al. 2019; Washington et al. 2019). Patients and relatives indicated that health-care professionals should take time to "listen to their concerns and needs and where possible pro-

tec. of rela. Our s atives in co. own process, a process. Guida. time is important, professionals is of tion training prog simulated patient (and relatives the i empathic side of co systematic review review on the effe comes in palliative of explicit inform: cation strategies b studying longer-te limited (Van der found that patient nication by the o considered the exp oncologist as help patient-centered c liative care. Such a well as nurses in in unplanned



Recognition of relatives in their role as caregiver

« A volte, quando trascorro un'intera giornata senza che qualcuno mi abbia guardato negli occhi me lo chiedo se sono ancora al mondo.

Se un albero cade nella foresta e nessuno lo sente fa rumore? Io penso di no: il mondo non può esistere, se non c'è nessuno a percepirlo.

E così anche noi esistiamo soltanto quando qualcuno ci guarda, quando qualcuno ci ascolta, se qualcuno riconosce che siamo lì.»



**Più invecchio e più le persone che ho conosciuto non ci sono più.
E io non riesco a fare pace con nessuna di queste assenze.
Allora che faccio? Scrivo.
Prendo un episodio del passato e mi metto a scrivere.
Dentro al passato quelli che tu ami, stanno tutti là, non ci manca nessuno.
E allora scrivendo costringo queste persone, che si sono andate a cacciare in quell'aldilà senza il mio permesso a essere di nuovo con me.
Fino a che scrivo loro stanno con me.
Erri De Luca.**

