



## ANGRY PATIENT:

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**KEYWORDS :****INTRODUCTION:**

In our medical practice, we often encounter some patients who can be challenging to handle. Unfortunately, some of these patients, along with their friends and family members, may resort to violent or harmful behaviors toward doctors and paramedical staff during treatment. According to the World Health Organization, between 8% to 38% of healthcare workers have experienced physical violence at some point in their careers. (1)

Now, this stems from anger, and in turn, anger stems from disturbed emotions, and anger may be the initial manifestation of these emotions, which they cannot cope with.

**DISCUSSION:**

Patients may face various challenges during their healthcare journey, including treatment dissatisfaction, unexpected serious illnesses, high service costs, subpar service quality, and lengthy appointment wait times. Moreover, psychological conditions may play a significant role, and unprofessional or apathetic attitudes from physicians may further exacerbate feelings of frustration or anger. These adverse emotions can manifest in aggressive or confrontational behaviors, such as violence, legal action, public criticism, or other disruptive actions.

Anger is an emotional response to provocation- a communication of fear and insecurity. (2)

However, reaching this point can be avoided by building an initial strong rapport, explaining the disease, planning the treatment and the costs, and maintaining periodic communication with the patient and bystanders. However, an occasional patient may not respond to rapport building. Language barriers and cultural differences in a diverse community require appropriate attention. Further, the lack of resources to support patients adds to the frustration of both sides, the patient and the caretaker.

In situations where confrontation may arise, it is important to maintain composure and establish eye contact. Take a moment to reflect and analyze the situation before approaching the individual in question. When sitting with the patient, avoid aggressive posturing and exude confidence while remaining polite and firm. Show genuine interest and concern while allowing them to vent their thoughts and emotions. Offer reassurance cautiously and arrange for follow-up as necessary. Remember to remain non-judgmental, avoid becoming too familiar, and never evade the situation. (2)

Empathizing the patient and understanding the individual while maintaining an observant stance can have a therapeutic impact through language to express support and sympathy. (3)

As healthcare professionals, it is essential to recognize that anger is a common reaction when one feels unfairly attacked. However, rising above such interpersonal conflicts and establishing a caring and responsible relationship with others is crucial. By approaching these situations with tolerance and patience, we can significantly contribute to de-escalation instead of risking an unfavorable outcome.

Professional training can make a significant difference in the way physicians express empathy during patient interactions. The training has the potential to improve patient outcomes and overall satisfaction significantly. This extra training can substantially impact the quality of care that patients receive. (4)

**CONCLUSION:**

Thus, in many cases, anger build-up can be prevented and resolved by

giving the patient ample time, respect, clear information, and consistency from the healthcare team. However, in instances where this approach has not succeeded despite being conscientiously applied by experienced staff without success, it is essential to maintain communication with the angry patient and their family while simultaneously providing support for the care team. (5)

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