



## How to Break Bad News to Families

Joelle Karlik, MD, Laura Gilbertson, MD, Emory University and Children’s Healthcare of Atlanta

- Breaking bad news to families is one of the most difficult yet rarely discussed topics in medicine.<sup>1</sup>
- “Bad news” can be broadly defined as information that may alter a patient’s or parent’s view of the future, information related to a chronic disease, a life-altering illness or an injury leading to a significant change in quality of life.<sup>2</sup>
- Impediments to successful conversations include differences in family preferences, cultural barriers, and physician discomfort.<sup>2</sup> There are many specific challenges for anesthesiologists, including limited preoperative interactions with family members, production pressure, and medicolegal concerns.<sup>3</sup>
- Anesthesiologists are also at risk for psychological and professional consequences after an adverse patient event. Departmental support and protected debriefing are essential to avoid feelings of guilt, anxiety, and burnout.<sup>3</sup>
- Crucial aspects that lead to positive interactions include 1. collaborative, family-centered communication; 2. avoiding the appearance of paternalism (providing selected information); 3. clear content and approach to the conversation.<sup>4</sup>
- There are several protocols and mnemonics to guide the delivery of bad news, such as ABCDE, BREAKS, and SPIKES.<sup>2</sup> SPIKES is the most adaptable protocol for the pediatric setting.<sup>4</sup>

### SPIKES PROTOCOL

STEP	RECOMMENDATION
<b>SETTING</b>	<ul style="list-style-type: none"> <li>• Determine who will be present</li> <li>• Establish whether the patient will participate in the meeting and arrange for child life presence</li> <li>• Arrange for a private room and limit interruptions</li> </ul>
<b>PERCEPTION</b>	<ul style="list-style-type: none"> <li>• Use open ended questions to explore what the family already knows</li> <li>• Correct misinformation</li> <li>• Identify unrealistic expectations</li> </ul>
<b>INVOLVEMENT</b>	<ul style="list-style-type: none"> <li>• Determine the level of detail that the parents and patient want</li> <li>• Encourage questions and comments</li> <li>• Be sensitive to the family’s culture, race, religious beliefs and background</li> </ul>
<b>KNOWLEDGE</b>	<ul style="list-style-type: none"> <li>• Briefly summarize events to this point</li> <li>• Stop often to confirm understanding</li> <li>• Use nonmedical terms and avoid jargon</li> </ul>
<b>EMOTION</b>	<ul style="list-style-type: none"> <li>• Use empathetic responses to the family’s observed emotional response</li> <li>• Use exploratory questions to clarify thoughts and feelings</li> <li>• Validate responses to help the family realize their feelings are important</li> </ul>
<b>SUMMARY</b>	<ul style="list-style-type: none"> <li>• Summarize the news</li> <li>• Verify that the family understands the treatment plan</li> <li>• Balance hope with realism</li> <li>• Set a plan for follow-up</li> </ul>

#### References:

1. Vandekieft GK. Breaking Bad News. *Am Fam Physician*. 2001;64(12):1975-1978.
2. Berkey FJ, Wiedemer JP, Vithalani ND. Delivering Bad or Life-Altering News. *Am Fam Physician*; 2018: 98(2):99-104.
3. Viswanath O, Simpao A, Guillermo G. The Expected Role of the Anesthesiologist in Delivering Bad News. *Anesth Analg*. 2018;126(5):1774-1776.
4. Wolfe AD, Frierdich SA, Wish J, Kilgore-Carlin J, Plotkin JA, Hoover-Regan M. Sharing Life-Altering Information: Development of Pediatric Hospital Guidelines and Team Training. *J Palliat Med*. 2014;17(9):1011-1018.