With information —bad, good and worse— overload from all media forms at all hours of the day and night, it is no surprise that public confidence in the medical realm is precipitously plummeting. So says a new report identifying that only 37% of the public trust evidence from medical research as opposed to 65% who prefer the experiences of friends and family. (1)

This latest work out of The Academy of Medical Sciences which, according to their website, is an “independent body in the UK representing the diversity of medical science” whose “mission is to advance biomedical and health research and its translation into benefits for society” is centered around improving patient understanding and highlighting the challenges patients and they propose “some health professionals face in using evidence from research to judge the benefits and harms of medicines.”

To the notion patients are struggling to make sense of information given the conflicting bombardment they receive from the internet, TV, celebrities and so forth, this is a very sad, credible reality. Filtering such data has become quite challenging. The result of this pervasive onslaught is a rampant distrust.

To the Academy’s point about health professionals, I would argue if one is not armed with a capacity to assess the evidence from research for practical use there is a bigger issue with that individual. The ability to do so is requisite in the training of said professionals.

More likely is the evolving nature of medical research with some studies yielding no action results, let alone positive or negative ones along with the sheer volume of publications of varying quality and usefulness. We, as a society and intrinsic to our human nature, prefer definitive answers and delayed gratification is a struggle for most. Unfortunately, science evolves and that expectation is
unrealistic.

Clinical courses may follow a general road map, but more as a guideline with unique deviations and trajectories that significantly depend on the specific person, his individual constitution and personal history, and response to treatment. Ambiguity and uncertainty is integrally correlated with advancing medicine and innovation. We need to become more comfortable with this fact.

In the mean time, unifying messages would ideally be free flowing between patient and provider.

**What does the new report recommend?**

Please find their conclusions in italic below, with my responses in regular print. These should come as no surprise:

- *Patient information leaflets inside medicines are “impenetrable” and “unreadable” to the public and warrant profound change on the national and EU scale to be more clear and show more balance in a drug’s potential benefits as well as harms.*

Packets or inserts in medications are highly detailed due to regulatory and often legal reasons which is why in the United States making a dent in this arena would pose quite challenging given the litigious nature of our culture. These are traditionally intended for practitioners, pharmacists and health care professionals more so than patients.

Making additional resources more user-friendly and balanced is a welcomed effort. Many sites already do this and simply asking your doctor what he deems is a superior resource is the best way to decipher good versus bad information based on not only an expert opinion in the field, but also the expert opinion in your individual care.

Your doctor knows your detailed personal history, physical examination as well as past and present clinical status. Together, you and your doctor should be driving the narrative and adapting to changes in treatment and decision-making. When decisions are shared, outcomes are better.

- *Build up online presence for NHS to be the trusted ‘go to’ resource with accurate, up-to-date, evidence-based information.*

The Centers for Disease Control and Prevention (CDC) along with the National Institutes of Health (NIH) provide excellent resources on general information and data in the U.S. Additionally, your doctor can direct you to optimal sites that tailor your search to the resources that most benefit you for your condition and medications.

- *Make better use of medical appointments—e.g. longer for more complicated cases where a patient is on more medicines. Active involvement in decision making about own health.*
Debunking myths obtained from media, entertainment and the internet has almost become its own diagnosis given the time spent in the office visit dedicated to the task. The subject is co-opting these visits. With ever diminishing time allotted for doctor visits given rising patient volumes, increased data entry and electronic medical records to name a few, the ability for doctors to focus on genuine medical concerns and address actually occurring health problems in a comprehensive, thorough manner is being eroded.

As I always say, we have such technological discoveries moving at warp speed and new generations of devices, but the person or company or entity that can generate more time for the practicing physician will be the truly revolutionary and disruptive figure in healthcare. Time means higher quality of care. It means more informed discussions. It means solving a root universal problem, rather than simply band-aiding a bigger issue. It means we still value the cherished doctor-patient relationship that prioritizes assuaging fears and suffering and eliminating patient misunderstanding while emphasizing empowerment. When endless paperwork and data entry get readily dissolved, amazing things will happen. See Government ‘Torture’ of Physicians: Where’s the Outrage? [3] or Unhealthiest Reality of Obamacare: Lack of Doctor Choice [4].

- They offer a list of questions patients should ask:

Ask yourself:

- What health goals are most important to me?
- What are my expectations of treatment and which of the following questions will help me find out how this medicine can fulfill them?

Questions to ask during the consultation:

- Is this medicine right for me?
- What are the potential benefits and risks of this medicine?
- How will this medicine make me feel?
- How should I take this medicine?

These aren’t bad questions to keep in mind for anyone, but they are predicated on the notion health professionals are simply prescribing and leaving the room without discussion or consideration. This is the furthest from reality in the majority of situations. Yes, there are bad actors in any industry who phone it in or do the least required. I would argue by no means does that reflect the majority of clinicians. If it happens to you, then switch providers and insist on answers to your questions. These are among your rights as a patient.

Your care is a team effort. Your provider fundamentally wants your success. Never hesitate to ask something be repeated or explained to you if it isn’t making sense. The doctor visit is often a time of great stress and distress for the patient especially when actively sick. It is well-documented patients do not retain accurately much of the information addressed. Find a doctor you trust asking anything. Physicians are used to repeating themselves and expect it. There are no dumb questions. Bringing a third party to the visit, asking your doctor to write things down for you or if you find yourself too distracted requesting your doctor call you after hours when you can focus better might be the more effective route for you to absorb the information. Write down your
Most importantly...

Family and friends mean well and their experiences provide tremendous value. However, everyone’s story is not the same and the dynamics involved can lead to incomplete accounts that might not pertain to you and your situation. What is right for them, might not be for you.

When a random website or blog, media or Hollywood directs the narrative, be discerning. For example, actress-turned-lifestyle guru Gwyneth Paltrow recently appeared on Jimmy Kimmel and disclosed she doesn’t know what she is talking about when it comes to her company’s health tips and appeared quite ill-informed about what is presented on Goop’s website. Believe her. See video here [6].

Admittedly, today’s landscape can be overwhelming and knowing who to trust is part of the problem. Whether it is a family member or physician, it should be earned with a mutual respect the prerequisite.

At the core, finding a doctor you trust is the most consequential choice you can make. It may require trying out a few in the process. You will be hard pressed to find someone who didn’t go into the field to help people. Your doctor should be spontaneously initiating these types of discussions, be responsive to your worries or concerns, be current and be a real-time, continuous resource helping you navigate the healthcare system to meet your needs. A nurturing, supportive doctor-patient relationship is priceless. Your life and peace of mind depend on it.

Note(s):

1. “The new report summarizes data from surveys of 1,013 GPs and 2,041 British adults, information from deliberative public dialogue workshops in Glasgow, Leeds and London, written and oral evidence received from a large number of individuals and stakeholders, including leading researchers, charities and research funders, and a series of workshops with experts on topics such as the way in which scientific evidence is generated and communicated.” For further access to this report, see here [2].