

# Communication Features of a Qualified Doctor with Different Patients

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**Abstract.** This article is aimed at improving the speech culture of future doctors, it includes information about the characteristics of communication with different patients, historical models of communicative speech, types of patients depending on their mental state, and human temperament. In addition, the article highlights the practical aspects and necessity of communicating with patients suffering from various diseases and their relatives.

**Key Words.** historical models of communicative speech, temperament, mental state, verbal and non-verbal communication, communication skills, gender characteristics.

**Introduction.** Communicative competence ensures effective medical communication in the course of a doctor's professional activity. Effective medical communication means medical communication established by the doctor with the patient, regardless of the patient's gender, age, origin, financial situation, and professional communication with his/her parents and relatives, as well as fulfilling his tasks (psychological, instrumental, cognitive, social, etc.) during the treatment process. Therefore, if the doctor can establish an effective medical communication with the patient during his professional activity, this will significantly contribute to the increase of his treatment potential.

**Literature Analysis.** Analyzing the literature aimed at improving the future doctor's speech culture, we can see that professional communication, that is, medical communication with patients, is the main tool during the professional activity of a doctor. In fact, language and words have infinite value for a person. In the words of Alisher Navoi, in the process of communication, sometimes a single word can be as valuable as a gifted jewel for the listener, even more valuable than gold[1].

*Ganj berib bo'lmas tutsa ko'z,  
Ulcha qilur vaqtida bir yaxshi so'z.  
Bir so'z etib shuncha beliyatni daf,  
Kim sochibon ganj, etishmay bir naf.  
Gah so'z bilan elga jon bag'ishlab,  
Bir so'z bilan gah jahon bag'ishlab.*

In the E.Y. Kasimov's work "The doctor's speech culture and the art of communication with the patient" it is stated that the doctor should pay attention to his speech to such an extent that after the conversation the patient should feel relieved and achieve mental peace[2].

Yakutkhon Rahmonova and Rikhsi Solikhodjayeva expressed the following opinions about communication skills in the work "Pedagogical skill": Cultural behavior is a criterion of a person's upbringing. It is a complex of moral purity, spiritual wealth and other positive qualities in a person, and it is considered the most beautiful quality of a fully developed person[3].

According to Sh. Zakirkhojaev and M. Solihov in the "Doctor and Patient" study guide, patients can be in different mental states and moods. Therefore, it is necessary to pay special attention to each patient, if the doctors or nurses speak in a harsh tone and work without a good mood, it causes anxiety in patients[4].

**Discussions.** It is known that there are models of communication with the patient in medicine. The professional communication model of a doctor means the form, appearance, content, and style of communication between a doctor and a patient. We can cite the following as historical models of the doctor's communicative speech[5]:

1. The Hippocratic model of communication. In the Hippocratic Oath, we can see these sentences: "Do not do anything that harms the patient, any treatment that makes the patient worse should be canceled." In this oath, it is emphasized that any measures performed as treatment and diagnosis should not harm not only the physical but also the mental condition of the patient.

2. Bioethics communication model. Diagnostics and treatment procedures are carried out with respect for the dignity and rights of the patient, more specifically, not to inform strangers about the patient's illness without the his/her consent, and it is possible to conduct examinations and treatment only with the patient's consent.

3. Dentology communication model. In this model, the doctor's profession-related ethics, principles of behavior, respect for his profession, and sincere approach to his work are mentioned[6]. According to the rules of dentistry, doctors should treat patients equally regardless of their origin, affiliation, age and gender and should approach their work with selflessness.

4. Paracelsus communication model. In the model, the main goal is for the doctor to embody qualities such as taking care of the patient like a father/mother, being kind to him, and being a salve for his pain.

While teaching future doctors about the culture of speech, we need to give them a special understanding of the psychology and character of different patients. In medicine, studying the mental state of the patient is of great importance, and it is useful for the doctor in the form and type of communication, the use of verbal and non-verbal methods. Neuropathologist Professor Ibodullayev Z.R. distinguished 10 different types of patients in his work.

1. Emotional - a person who has different moods, that is, whose mood changes often. But they don't always show their situation to others.

2. Cheerful - a person who is always happy, smiling and laughing on his face.

3. Cyclothymic - hyperthymic (high mood) and dysthymic (negative mood) states change very quickly in this type of person, and they clearly show their mood.

4. Anxious - such patients cannot quickly communicate with others. They are always worried about something and it can have a bad effect on their health.

5. Hyperthymic - a person who is always cheerful, active, joyful and happy. They are enterprising and optimistic people.

6. Dysthymic - in contrast to hyperthymic individuals, dysthymic patients are considered to be sad and always unhappy.

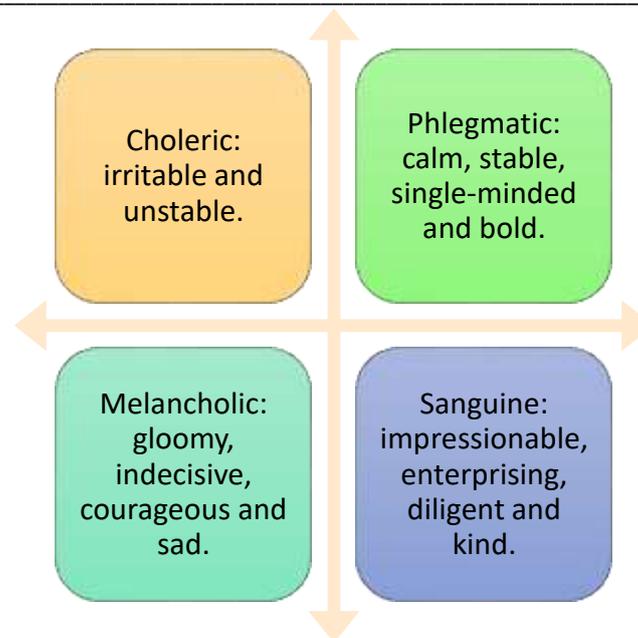
7. Impulsive - a person who is very angry, quarrelsome, rude and cannot control his emotions.

8. Official - a person who avoids scandalous situations, is a very formal communicator, meticulous in every situation.

9. Shy - a person who does not talk very much and cannot get along quickly.

10. Demonstrator - a person with an active, mobile, enterprising, expressive and non-demonstrative character.

It is necessary for doctors to determine their temperament in the process of observing patients and start communicating with them on this basis. It is known that there are 4 different types of people with temperament:



The most important point in choosing the type of communication is that the doctor must be able to correctly assess the emotional state of the patients. First of all, he should determine the type of emotional state in them and choose the communication style accordingly. The patient's emotional state is divided into 3 types: positive, negative and neutral.

Doctors should be careful with patients in a negative emotional state. Because they can be dangerous not only for themselves, but also for doctors. For example, depressed patients may take large amounts of medication or engage in life-threatening behaviors. Therefore, future doctors are advised to be warm, cheerful and friendly with this type of patients.

There are verbal and non-verbal ways of communicating with the patient, and depending on the situation, it is recommended to use the appropriate method. Verbal form of communication is the expression of our attitude, thoughts, feelings through words, phrases and sentences in the process of communication. In non-verbal communication, doctors use facial expressions, gestures, body position and gestures while talking to patients. It is also emphasized that non-verbal communication is a method used to supplement verbal communication[7].

Establishing a professional communication with a patient is one of the most important aspects for a doctor, and in this process, doctors should develop the necessary communication skills. The following skills are considered necessary for a doctor to be able to communicate properly with a patient: listening, understanding, participation, humaneness, honesty, being able to accept different worldviews of patients, sharing grief, empathy express, respect, be sincere and open.

In the course of his/her professional activity, the doctor should listen to the patient, show a warm attitude to him, talk with an open face depending on the situation, address him in a friendly manner, be able to have a positive effect on the patient, and keep the body upright and straight. Actively listening to patients can also have a positive effect on their mental state. In this case, patients feel that doctors are sympathetic and care enough about them.

One of the most important aspects that future doctors should learn through the science of speech culture is that there are specific characteristics of communication with patients suffering from various diseases. More precisely, doctors are required to acquire appropriate communication skills depending on the type of illness of patients and their age and gender. Also, it should not be forgotten that the style of communication, the words and sentences used in it may also differ depending on the gender[8].

Care should be taken with patients in psychiatric hospitals or with patients complaining of mental illness. The most important thing is to gain their trust, to have a warm and friendly relationship with them. It is impossible to lie to them, treat them rudely, and make mistakes. Most of these patients are sensitive, so they can quickly distinguish sincerity from a fake attitude. They

expect love and more attention from the doctor. If the doctor does not pay enough attention to the patient, their trust in the doctor will fade and they will become disillusioned.

Most patients with an infectious disease begin to feel depressed soon after learning about their illness. Because often such patients are forced to eat diet food, try to walk away from people, some diseases require long-term treatment. Therefore, the doctor is recommended to establish a separate dialogue with this type of patients, taking into account the type of illness, severity, duration, etc.

We will be able to divide patients in the surgical department into two types: planned and emergency patients. It is relatively easier to communicate with patients admitted to the department based on the plan, to determine their mental state and to find a way to their satisfaction. Because they have already prepared for surgery and are much calmer. Doctors should give spiritual encouragement to patients in this situation and give them hope for life. The second type, i.e. patients brought to the surgical department in an emergency, should be treated with extreme caution. The reason is that they are suddenly faced with this situation, which can cause them severe mental stress. Doctors should influence such patients mentally and try to calm them down as soon as possible. Of course, this requires deep knowledge, skills and experience of speech culture.

Patients who are addicted to drugs, alcoholism and harmful drugs are very depressed. In the process of communicating with them, openly telling them their shortcomings is one of the biggest mistakes. In the process of treating such patients, it is useful to emphasize that they are getting better day by day, and to tell them that they will recover from the disease soon. It is recommended to gain the trust of these patients, have healthy communication with them and give them spiritual encouragement. Deceit, hypocrisy and fakeness cause their trust to fade.

Communication with patients suffering from various incurable diseases, including cancer and cirrhosis of the liver, can have a completely different tone. That is, in these cases, the doctor himself may experience mental stress, and often begins to be puzzled about ways to disclose the disease to the patient. Most doctors can tell cancer patients that the disease will go away and that they can recover. Despite the fact that this is false information, it is an effort to prevent the patient from suffering and to fight for his life. However, in some cases it is recommended to tell the truth to the patient in a lighter way. The reason is that it is taken into account that patients can fulfill their future wishes or carry out various legal formalities (inheritance, distribution, will). In addition, it is recommended that patients work together with their next of kin.

Communication culture with younger patients is also of particular importance. Unlike adults, young children cannot explain their illness, and in many cases they have a fear of hospitals and doctors, and tend to cry. In such situations, doctors should calmly talk to the mother and then examine the child. Children's doctors (pediatricians) are recommended to follow the following principles during communication: speak calmly and politely, calm the child with good words, do not use incomprehensible words, explain the treatment depending on the child's age. So, when communicating with children, doctors should be wise and respect children.

The communication process with elderly patients over 60 should not be neglected. The reason is that the psyche of the elderly changes with age, and they may have different internal experiences due to life difficulties. After the age of 60, physical and mental deviations are observed in people, they become impressionable, restrained, and quickly take any words to heart. In such patients, in addition to internal organ disorders, memory loss is also actively observed. After analyzing the patient's condition, doctors should calmly, but calmly and without anxiety, give information about the disease.

In the course of their profession, doctors may face various situations. It is necessary to communicate with patients of different characters, taking into account their age, mental state, severity or ease of the disease. But in some cases, the situation requires communication about the disease not with the patient, but with his closest relatives, for example, communication with the relatives of patients whose death is inevitable or with a serious mental condition. Such interviews are conducted in necessary cases (writing a letter of consent for surgery) and the patient should not be suspicious of these interviews.

Also, it is important to understand that not only the patients suffering from serious diseases suffer, but also their close relatives. They will also need spiritual encouragement and more counseling. Often, after hearing that the patient is seriously ill, or after the death of the patient, their relatives also suffer from mental illnesses. As they say that it is better to prevent a disease than to cure it, an experienced doctor is recommended to encourage the relatives of the patient.

**Conclusion.** It is clear from the above that before treating the patients, it is useful to study their psychology, to be able to establish proper communication, and to provide first psychological and then medical care. Therefore, in addition to professional knowledge and experience, a qualified doctor should also have the culture of professional speech.

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