

# Patients' attitudes to doctors

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**SUMMARY.** A survey was conducted on 1,012 people in the Oxford Region to determine their general attitude to doctors' age, sex and colour and to various aspects of doctor/patient communication. Results indicate that whereas there were no prejudices about appearance there was a significant degree of dissatisfaction with information given by doctors in general and hospital doctors in particular.

### Aim

**T**HIS study was undertaken among a highly motivated group of patients to determine their preferences and experiences in respect of doctors' manner of greeting and exchange of information, the kind of doctor they would ideally like to see, and their general satisfaction with doctors.

### Method

A precoded self-administered descriptive questionnaire was offered to the first 100 donors attending blood donor clinics throughout five counties. The voluntary and confidential aspect of the questionnaire was stressed, respondents having the options either of returning their copy during the clinic or by post at a later date. Data were analysed by means of a mechanical counter-sorter.

Although there is a bias in the sample population it does consist of people with an active caring interest in health, of varied backgrounds and interests who are merely distinguished by their accessibility and benign motivation. In essence, the sample is a representative cross-section of the general population and thus a valid source of information.

### Results

The questionnaire was offered to 1,744 donors and the response rate was 58 per cent (1,012) after elimination of 71 incomplete copies. Considering the length of questionnaire and limited clinic time this represents a realistic if not high response rate.

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Fifty-six per cent of respondents were female and according to the Registrar General's classification of occupations, seven per cent were social class 1, 28 per cent social class 2, 55 per cent social class 3, and eight per cent social classes 4 and 5. Thirty-nine per cent were between the ages of 16 and 29, 38 per cent between 30 and 44, 19 per cent between 45 and 60, and two per cent were over 60. Twenty-six per cent had never attended a hospital clinic so were eliminated from this section of analysis.

### *Greeting and exchange of information*

Sixty-five per cent of general practitioners greeted their patients by name, in contrast with only 38 per cent of hospital doctors. However, 79 per cent preferred being greeted by name in general practitioner surgeries and 66 per cent in hospital clinics.

In general practitioner surgeries 76 per cent felt able to talk freely with their doctor, 13 per cent were unable, and 11 per cent were sometimes able to do so. In hospital clinics only 51 per cent felt able to talk freely, 28 per cent were unable and 16 per cent were sometimes able to do so, and five per cent did not answer.

Seventy-one per cent preferred to be given a detailed account of their illness, 27 per cent a brief account, and two per cent did not mind. Sixty-one per cent were satisfied with the information given by their general practitioner, 29 per cent were not, and 10 per cent did not know. However, only 40 per cent were satisfied by the information given by their hospital doctor, 49 per cent were not, and 11 per cent did not know.

Seventy-eight per cent of respondents wanted to be told if they were found to have cancer, three per cent did not, nine per cent did not know, and 10 per cent said it would depend on the type of cancer.

General practitioners were found to be more friendly, helpful, and understanding than hospital doctors by twice as many respondents.

### *Preference for type of doctor*

Sixty-four per cent were not concerned about the age of the doctor although 11 per cent preferred young doctors, 24 per cent middle-aged, and less than one per cent elderly. There was no age bias.

A similar proportion (59 per cent) were not influenced by the sex of the attending doctor but 22 per cent preferred a male doctor, four per cent a female doctor, and 14 per cent felt it depended on the nature of their illness. Of the last, 65 per cent were female respondents.

Thirty-eight per cent showed a preference to being treated by Caucasian doctors if given the choice, 57 per cent did not mind, two per cent did not know their preference, and two per cent gave no answer. On removing Caucasian from the choice, 762 (75 per cent) did not mind who treated them. There was no age factor in the response. Of the 543 patients who had been treated by an overseas doctor, 219 (40 per cent) had difficulty in communication despite the doctor speaking English.

In terms of appearance, 60 per cent thought what their doctor wore was unimportant in their initial assessment of him or her, 37 per cent believing the opposite.

#### *Satisfaction and choice of general practitioner*

One hundred and eighty-seven (18 per cent) thought the quality of NHS care was very good, 335 (33 per cent) only good, 392 (39 per cent) adequate, 67 (seven per cent) bad, and 12 (one per cent) very bad.

Patients were asked if they had ever had cause to complain about treatment received from a doctor. Eighty per cent had not but 134 (14 per cent) respondents had. Of the latter, 43 (32 per cent) felt strongly enough to make a formal complaint, 18 to the doctor concerned, seven to another doctor, five to a lawyer, and six to the General Medical Council. Only 21 patients (49 per cent) were satisfied with the response to the complaint.

In order to maintain present standards, 509 (50 per cent) would not object to paying a statutory fee for each consultation with a doctor, whilst 382 (38 per cent) would object and 111 (11 per cent) were unsure of their opinion. Seventy-five per cent had a choice of general practitioner at registration, 22 per cent did not; 75 per cent preferred to see the same doctor at every consultation, 16 per cent did not mind, and 106 (10 per cent) wanted to see another doctor.

In a group practice, 78 per cent normally saw the doctor of their choice.

#### **Discussion**

Communication between people as a whole and that between doctors and patients in particular is a vastly complex but important subject. This study shows clearly that patients' expectations and the reality are still very different. The tendency, especially by hospital doctors, to depersonalize and under-inform patients is highlighted in this study and confirms in part the findings of other studies of differing sample groups (Cartwright, 1967; Harris Poll, 1972; Kinsey *et al.*, 1975; Ley *et al.*, 1976; Reynolds, 1978). Happily, most patients will accept a doctor as he presents himself and this sample

revealed no prejudice regarding age, sex, appearance or colour. However, it is noteworthy that communication with overseas doctors was deemed difficult by many patients, a problem which is recognized and surmountable.

Of special significance is the scale of dissatisfaction with the NHS and with doctors as indicated by first, the majority who are prepared to pay for doctors' services and secondly, by those who not only cross the psychological barrier to complain of a doctor's treatment, but also are prepared to put their case to arbiters. In order to stem a tendency by increasingly demanding patients to rupture their lines of communication with their doctors it should be made clear to patients that there are existing channels through which their grievances can be directed without resorting to the press or courts of law.

This study covers ground which has been little reported previously and it serves to sharpen the focus on an essential and often overlooked ingredient of the doctor/patient relationship, namely patient feedback. In any programme of continuing medical education some prominence should be given to communication in an effort to improve on the findings of this and other studies. A happy patient is more than half the battle.

#### **References**

- Cartwright, A. (1967). *Patients and their Doctors*. London: Routledge and Kegan Paul.
- Harris Poll (1972). Doctors and their patients. April.
- Kinsey, J., Bradshaw, P. & Ley, P. (1975). Patients' satisfaction and reported acceptance of advice in general practice. *Journal of the Royal College of General Practitioners*, 25, 558-566.
- Ley, P., Whitworth, M. A., Skilbeck, C. E., Woodward, R., Pinsent, R. J. F. H., Pike, L. A., Clarkson, M. E. & Clark, P. B. (1976). Improving doctor-patient communication in general practice. *Journal of the Royal College of General Practitioners*, 26, 720-724.
- Reynolds, M. (1978). No news is bad news: patients' views about communication in hospital. *British Medical Journal*, 1, 1673-1676.

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