

There are certain words and structures that are commonly used when expressing empathy.

Tag questions

*That's a very long time, **isn't it**?*
*You can't put up with that, **can you**?*

In this case, you would use falling intonation. Falling intonation indicates your understanding of the situation, whereas rising intonation would seem more like a real question and may not convey empathy.

Ending a statement with a tag question softens the statement and involves the other speaker.

Modal verbs

*That **must** put a lot of pressure on you.*
*That **must have been** very difficult to deal with. Was it?*

By using **must**, the doctor is effectively saying, 'It is clear to me that ...'.

*Yes, I know that **can** be a worry.*
*Well, you **can't** put up with that any longer.*

The use of **can** is empathetic because it indicates that what the patient feels is possible, or not out of the ordinary.

By using **can't** the doctor is acknowledging that the problem is one that cannot be allowed to persist. It indicates that you understand how difficult this particular problem is for the patient.

*That's quite a hard situation to deal with, **I should think**.*

This expression indicates that you can imagine what the patient is experiencing.

Adjectives

*That must be pretty **frustrating** for you.*

Other adjectives you could use (depending on what the patient has actually said) are: *annoying, awful, distressing, exhausting, stressful, uncomfortable, upsetting, worrying.*

Using words like these shows that you have understood exactly how the patient is feeling.

Verbs

*I can **appreciate** how difficult it is for you to talk about this.*

Other words with a similar meaning are: *imagine, see, sense, tell, understand.*

These words indicate that you have some understanding of the patient's situation.

Picking up on the patient's language and body language

*You **sound** a bit upset about that.*

This indicates that you have picked up on how the patient is feeling at the moment. Other verbs you could use here are: *look, seem.*

Exactly how you deal with sensitive topics will depend on your own personality and a range of other factors. There are some linguistic features, however, that are common to any situation in which you need to be particularly careful about what you are asking.

Indirect questions

Can I ask how long you've been with your partner?
Could you tell me ...?

Useful phrases to introduce questions on sensitive topics

I've got to ask you this ...
this is a little bit delicate, perhaps ...
one other **potentially embarrassing** question ...
I just want to ask you one other question ...

Other useful phrases

Any technical problems with sex **at all**?
I've got to ask you about **the possibility of** infection.
It **probably would be a good idea** to do a check for that **just in case**.

Patients may use various words to describe feelings of pain or tension and anxiety. The term they use will give you information about exactly how they have been feeling, so it is important to understand the finer meanings of a range of common terms.

<i>jumpy (adj.)</i> <i>jittery (adj.)</i> <i>on edge (adj.)</i> <i>uptight (adj.)</i>	These words all describe a person who cannot relax and who gets startled or upset very easily .
<i>ill at ease (adj.)</i> <i>restless (adj.)</i>	The person may not be able to relax , but they do not startle or get upset particularly easily in this state.
<i>panicky (adj.)</i>	The person feels fear or anxiety but may not know the cause.
<i>smarting (adj.)</i> <i>stinging (adj.)</i>	This describes pain caused by, for example, being slapped or getting salt water in your eyes or in a cut.
<i>stabbing (adj.)</i> <i>sharp (adj.)</i> <i>a twinge (n)</i>	These words describe sudden pain which may be quite severe .
<i>nagging (adj.)</i> <i>a niggle (n)</i>	These words describe ongoing pain. A niggle is a fairly minor pain, whereas nagging pain could be severe.

Module 2, Section 4: Role play

Role play instructions for doctors

Begin the role play from the beginning of the consultation, by greeting the patient. Continue until you have taken the patient's history – there is no need to continue beyond this point.

The 'Patient' role cards contain information to help your partner talk about a particular set of symptoms. Remember that your partner may have to invent certain information if it is not on the role card.

Role play 1

Mrs G. Simons, 42-year-old woman. Seeing you for the first time.

Role play 2

Ibrahim Kala, 40-year-old man. Seeing you for the first time. Referred from his GP with symptoms of anxiety.

Module 2, Section 4: Role play

Role play instructions for 'patients'

During each role play, use the information below to answer the doctor's questions. If the doctor asks you any questions that you cannot answer from the information on this role card, invent the answer yourself.

The role play situation will start when you first meet the doctor. Your partner will tell you when the role play is over.

Role play 1

You are Geraldine Simons, a married woman of 42. You have been suffering spells of tiredness and dizziness.

When asked, give the following information:

- You have lost some weight recently, but you are quite pleased about that as you have been trying to get slimmer.
 - The tiredness is affecting your ability to do your job – you are a teacher – but you're not sure if the job itself is the cause, or something else.
 - You sometimes follow a vegetarian diet, but not strictly.
 - About three months ago you started going to the gym and you go regularly, four or five times a week, but you are not enjoying this so much because of the tired and dizzy spells.
 - You haven't been to the doctor for a long time – only when your children were little – and you haven't met this doctor before. You don't think your problem is that serious, but thought you'd better check it out.
 - You have a steady relationship with a man. You do not think you are pregnant.
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Role play 2

You are Ibrahim Kala, a 40-year-old man. You went to see your GP with symptoms of anxiety and you have been referred to a specialist.

When asked, give the following information:

- You feel anxious, not all the time but for periods of time; sometimes a few hours, sometimes a couple of days.
- It affects your concentration, your sleep, and makes you irritable.
- You feel restless and sometimes light-headed.
- Sometimes you can't breathe properly and this causes you to panic and feel even more anxious.
- The problem is made worse by your worries about your job. You are finance director of a double-glazing company and you often have to travel, but travelling seems to make your symptoms worse.

You have been married for seven years and you have a young daughter. The marriage is a good one, but you feel your illness is putting your relationship under stress.
