

# Doctors and patients make more decisions together

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In a shift away from the more patriarchal/matriarchal relationship between doctor and patient, patients report an increased partnership with their physicians in making medical decisions, reports a new study from

Northwestern Medicine and Harvard University.

Shared decision-making between [patients](#) and their clinicians increased 14 percent from 2002 to 2014, the study reports. According to the study, patients generally felt their physicians more commonly:

- Asked them to help make medical decisions
- Listened carefully to them
- Explained things in a way that was easy to understand
- Showed respect for what they had to say
- Spent enough time with them

The paper will be published Monday in the *Annals of Family Medicine*.

"There has been increased attention among clinicians and health systems to involve patients in decision-making," said co-lead author Dr. Jeffrey Linder, chief of general internal [medicine](#) and geriatrics at Northwestern University Feinberg School of Medicine and a Northwestern Medicine internist. "Patients who have engaged in shared decision-making understand their condition and options better. They feel less uncertain about a chosen course of action."

Shared decision-making generally results in better-informed patients, who then decide not to use treatments or interventions that have marginal or no benefit, Linder said.

"Finally clinicians are realizing that just because we say, 'You should do that,' a patient will not necessarily comply with our recommendation," said co-lead author Dr. David Levine, an instructor in medicine at Harvard Medical School and an associate physician at Brigham and Women's Hospital in Boston. "Moving the conversation to a space where it is a shared decision likely improves adherence."

Although there was a significant increase in shared decision-making, there is still much room for improvement, the authors said. More than 30 percent of Americans felt their clinician did not always listen to them, and more than 40 percent felt their clinician did not always spend enough time with them.

The study also highlighted a few areas where shared decision-making is lacking. Shared decision-making scores were lower for patients in [poor health](#) and for patients who were of a different race/ethnicity than their clinician. Focusing on patients with poor health or of a different race/ethnicity than the doctor or clinician could increase shared [decision-making](#) in these groups.

The study was an analysis of a nationally representative survey of Americans. It involved about 10,000 people per year from 2002 to 2014.

Provided by Northwestern University

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