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Unpleasant patients are their own worst enemy

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Doctors are prone to misdiagnosing difficult patients because of the mental effort needed to deal with them.

This is irrespective of the time spent or the complexity of the case, say researchers who have conducted a study involving 140 GP registrars.

The results show the doctors were 42% more likely to misdiagnose a difficult patient than a neutral one in a complex case, and 6% more likely to do so in a simple case.

The study shows further reflection by the doctors improved diagnostic accuracy, but it didn't make up for the impact of disruptive behaviours.

These findings have implications for clinical practice and for medical education, say the researchers from Erasmus University, Rotterdam.

"Acknowledging that negative feelings towards patients do occur is indeed not so difficult. Most doctors would, however, tend to deny that these feelings influence their judgements," they write in *BMJ Quality & Safety*.

"...the fact is, that difficult patients trigger reactions that may intrude with reasoning, adversely affect judgements, and cause errors."

Therefore, efforts should be made to boost medical students' and doctors' awareness of this, they suggest.

In a linked editorial, Drs Donald Redelmeier and Edward Etchells of the Centre for Quality Improvement and Patient Safety, University of Toronto, Canada, say the results echo previous analyses that suggest unpleasant people tend to have more unfavourable outcomes.

They suggest that doctors should engage in more reflection, teamwork, and consultation and consider checklists or computer assisted diagnostics to mitigate the effects of difficult behaviours on diagnostic accuracy.

Do patients' disruptive behaviours influence the accuracy of a doctor's diagnosis? A randomised experiment

Why patients' disruptive behaviours impair diagnostic reasoning: a randomised experiment

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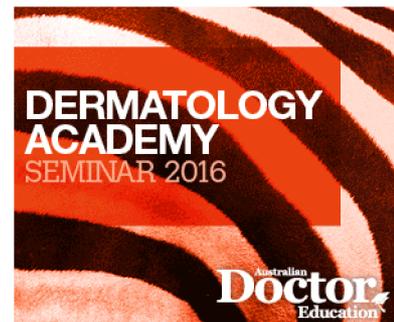
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