

Finding Dr. Right

After three bad breakups with doctors, Lisa Richmon discovers what it takes to find a medical soul mate

The first time I met Dr. Anna, it was love at first sight. On our first hour-long “date,” she complimented me on my red sneakers, laughed at my jokes and listened intently to a story about my ailing father. Nine months later, I went to see her about a spate of late-night trips to the bathroom. After a friendly chat, I left with a urine diary and the same giddy feelings I had after I first kissed my husband. (The bathroom episodes ended without medication.) My next visit wasn’t so great. She was on top of issues such as bone-density screening, but the solicitous Dr. Anna of recent

memory was nowhere to be found. I decided she was just having an off day. The fourth visit, a few months later, was like a bad date you can’t wait to end. I went to see her because of heavy monthly bleeding. After reading my ultrasound, she told me I had a uterine polyp and fibroids, and instructed me to “go see Debbie” to schedule surgery. Whoa! Before signing up for surgery, I needed to understand what she was telling me: Is this urgent? Are we talking cancer? What are my options? She repeated in a clipped staccato: “Go down the hall and see Debbie.” As she talked, she was

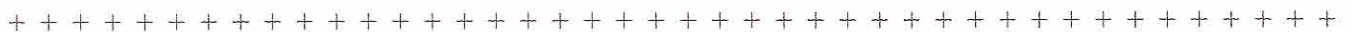
opening the exam room door for her next patient. Walking past Debbie's office, I exercised my other option: I left.

MEDICAL STRIKEOUTS

Walking out on Dr. Anna was not the same as being free of her. I needed to know what had happened to my compassion-oozing medical crush. Or was there something about *me* that triggered her inner ice princess?

It was not my first failed relationship with a doctor. That would be my dalliance with an infertility specialist who gushed sympathy and persuaded me and my husband that IVF would be a waste of money and that the egg-donor

route was best. Between my third and fourth egg-donor transfer, an ultrasound revealed fibroids that could potentially obstruct implantation. I scheduled surgery. Just before I went under, something I was given intravenously made me feel instant panic. I woke up with the same level of high anxiety and couldn't shake it long after the drug should have been out of my system. It turned out to be an adverse reaction to an anti-nausea medication, but the doctor made me feel as if it were my fault. "You were so calm before surgery," she said incredulously. A few days later, she left town for two weeks without telling me. When she returned, she called and gave me a full 60 minutes



"I knew I found Dr. Right when . . ."

Sometimes, all it takes are the right words for you to know you've met your match. Here, 11 women recall their moments of truth

"... she asked me on our first visit what I wanted out of the relationship."
+ KATHLEEN S. PARKS | 42 | Knoxville

"... she made me feel safe, with her sense of humor and open style. It made me unafraid to share my fears and my heart. And isn't that the little secret in plain sight about health: that there is always a fragile heart behind any sickness?"
+ MARY-LAWRENCE WOODHULL | 47 | Knoxville

"... I asked her about an anti-inflammation diet cookbook and she had a copy sent to my home."
+ BONNIE WINTERSTINE | 58 | Sterling, Virginia

"... she spent 30 minutes talking to me like a friend, knew more than I did about bioidentical HT and acted like my advocate first rather than going along the party line."
+ NANCY BACKAS | 52 | Chicago

"... she said, 'Yes, it is breast cancer but it's small, treatable, curable.' I admired her bluntness and felt secure in her hands."
+ NANCY BASSHAM | 59 | Manteo, North Carolina

"... the day she said, 'I don't know, let me do some research and get back to you.'"
+ JUDY FLEISHMAN | 53 | Medford, Massachusetts

"... he said, 'Whatever you choose to do, you're going to be OK.'"
+ GALIA NITZAN | 46 | Marina Del Ray, California

"... he gave me all of his numbers on a card and said, 'I know this is a big deal for you. If you have any questions at all, call me.'"
+ SONYA BERTINI | 49 | Ocean City, New Jersey

"... she reached over and gave me a hug after my first exam."
+ VICTORIA TASHMAN | 48 | Los Angeles

"... he said, 'I do the Penny test before I recommend any treatment or clinical trials.' He explained that Penny was his wife and he wouldn't recommend anything for me that he wouldn't recommend for her if she were in the same position."
+ BETH HOLLAND | 51 | Atlanta

"... she encouraged my need to participate and told me to meditate a week before my surgery, and even did an affirmation with me before my surgery."
+ TY HUNTER | 51 | San Quentin, California

Body+MIND

to vent while she apologized. The next day, she fired me from her practice by certified mail.

Before that, there was the doctor who wrote me a prescription for Prozac after I'd burst into tears during our first appointment. My mother had died only a few days earlier. Shocked, I didn't hesitate to speak up: "You don't even know me. I'm not a depressed person. I'm crying because..." Her impulse to prescribe medication without putting my tears into context was what turned me off.

But maybe it *was* me. I contacted experts in doctor-patient communication to analyze my medical mishap with Dr. Anna. I needed some new rules for finding—and sticking with—a doctor.

GOOD TIMING EQUALS GOOD CHEMISTRY

"If you want a doctor who listens fully, then you have to help create the opportunity for good chemistry," says Howard Beckman, MD, clinical professor of medicine and family medicine at the University of Rochester School of Medicine. "That starts when you schedule appointments." Looking back, I see that I should have told Dr. Anna's front office that I'd need some extra time to talk because I was worried about the bleeding, or at least asked how much time I'd have with her, so I could raise my most urgent questions early on. I also should have been aware of the difference between a 60-minute visit, scheduled as an extended appointment, and a "regular" 20-minute one. My last visit with Dr. Anna turned out to be a quickie, and I was beyond frustrated trying to cram 60 minutes of concerns into a 20-minute slot. →

What's Your Type?

Understanding your communication style is the key to a better doctor-patient relationship. You'll be able to ask your doctor questions in a way that will help you get the information you want, in the way you can best understand it.

✦ Extrovert or Introvert?

If you're inclined to extroversion, you want to talk things out with your doctor. If you're predisposed to introversion, you tend to think things through.

Question: After you have visited your doctor, are you more likely to feel that you talked too much (Extrovert) or talked too little (Introvert) during the appointment?

✦ Sensate or Intuitive?

If you're more sensate, you like to get factual, specific information from your doctor. If you're more intuitive, you like to get the big picture first.

Question: When discussing treatment, do you ask for step-by-step information (Sensate), such as "How long before I can exercise?" Or do you ask for general information (Intuitive), such as "What is the long-term outcome likely to be?"

✦ Thinker or Feeler?

If you're a thinker, you weigh objective data before making decisions. If you're a feeler, you first evaluate data based on personal values and their impact on people.

Question: You have been called back for further assessment following a routine mammogram. Would you respond better to a doctor who first clarified the reason for your callback (Thinker), or one who first checked in to see how you're feeling about the callback (Feeler)?

✦ Judger or Perceiver?

This addresses how you prefer to conclude an appointment. If you have a preference for judging, you are inclined to make decisions because you're uncomfortable with uncertainty. If you have a preference for perceiving, you like to gather information and don't like to come to a hasty decision.

Question: Would you prefer your doctor to reach a firm conclusion about your case as soon as possible and stick to it (Judger) or to explain all your options and leave you time and space to decide (Perceiver)?

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Dear Broccoli,
You gave me gas.
When we broke up,
you were steamed.

COME CLEAN AS A PATIENT

I next consulted Beth A. Lown, MD, assistant professor of medicine at Harvard Medical School, who specializes in communication as well as relationship-, or patient-, centered care. After hearing my story, she pounced on Dr. Anna's impatience with my hesitance to undergo surgery. "When I sit down with a patient," Lown said, "I have to assess what's going on with her as a person, not just a collection of symptoms. It's up to the doctor to listen for the fears and concerns underneath a patient's words. From what you've told me, Dr. Anna certainly wasn't doing that for you that last day."

She also suggested I could have been more forthright about my issues. If I'd mentioned that I had an anxiety about anesthesia and drugs because of a bad experience during infertility treatments—and therefore couldn't say yes to surgery without further discussion—Dr. Anna and I still might be together today.

Beckman agrees: "You get a lot more from a doctor if you put yourself out there than if you don't. If you mention something you're concerned about and your doctor ignores you, changes the subject or says something demeaning, it's likely to define your future relationship." He recommends that you start a dialogue with a new doctor by saying "What I'm most looking forward to is . . ." or asking "Could you tell me more about how you . . . ?"

FINDING MY TYPE

By that point I'd gotten some good opening lines, but I was no closer to figuring out how to find my Dr. Right. I needed a tool. If the online dating service eHarmony matches potential life partners in 29 different compatibility dimensions, why couldn't I find a similar tool to hook me up with my medical soul mate?

I hit pay dirt when talking to yet another professional specializing in doctor-patient communication, Michele Heisler, MD, a professor in the department of internal medicine at the University of Michigan. "Are you interested in matching by personality and psychological type?" she asked. It turned out that her grandmother, a psychologist, developed the famous Myers-Briggs Type Indicator test, which others adapted into a method to help doctors communicate better with their patients. This so-called FLEX Care approach is now being used to train medical students, doctors and administrators at medical schools and teaching hospitals around the country, including Johns Hopkins University, St. Luke's Hospital in Kansas City, and the University of Florida.

"How doctors and patients gather information and make decisions during a session are at the core of FLEX Care," explains nurse-educator Judy Allen, who conducts workshops in the method. "It's based on the Myers-Briggs test, but it's less about identifying your or your doctor's type

and more about being sensitive to different styles.” (See “What’s Your Type?” page 213.)

Your type is not fixed, it’s merely a preference and it can change with your circumstance. “If you’re seeing your doctor because something serious is on your mind, one should expect you won’t be your bubbly, chatty self,” Allen notes. The fact is that we use different types at different times could begin to explain why Dr. Anna and I were complementary one day and all sparks the next.

LEARNING TO CONNECT

“Understanding your type hugely improves your relationship with other people,” says Robert A. Doughty, MD, dean of the Nemours Center for Medical Leadership, in Jacksonville, Florida, who has used FLEX Care to train doctors. He analyzed my interaction with Dr. Anna in terms of our types.

“Dr. Anna wasn’t doing what you needed, which was to have other options discussed fully before you came to a decision. Like most doctors, she’s a judge,” says Doughty. “She made a logical conclusion that you needed surgery. Once she’d decided, she didn’t want to linger—she wanted to move on.” I, on the other hand, very much needed to consider all my other options. What I might have said instead, suggests

Doughty, was, “I just want you to answer these three questions before I can go schedule surgery.”

MEETING MY MEDICAL MATCH

When I was ready to play the field again, I asked two close friends for recommendations. Although Michelle and Abbie are different from each other, they’ve both been happy with the same doctor. Maybe he could deal with me too.

The first thing he did was listen. I spared him the goriest details of my story, so I wouldn’t sound like a bitter divorcee, and I carefully relayed what I thought he needed to know about the surgery recommendation and my final visit to Dr. Anna to get a feel for how he would handle me.

Then he did an ultrasound and found that new fibroid tumors had appeared since my last surgery, five years earlier. Surgery was an option, he said. But I wondered whether acupuncture and Chinese herbs would help, and he left that possibility open for me. One day, close to a year later, having overcome my fear of anesthesia, I agreed to surgery. “You know, Lisa,” he said, “it’s my job to make sure you have a good experience this time.” This told me that from his perspective, it wasn’t my fault I had a bad experience. I melted at his words. And scheduled surgery with Dr. Right. **M**

Meet me for lunch.
I'll take Beano before,
and there'll be no gas

