

Lost in Transition

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We are a population in transition. Every day in our practices we encounter patients who have recently experienced major change in their lives. Life itself is full of transitions. We are born, become adolescents, leave home, get married, have children, sometimes divorce, grow old, and lose loved ones.

In many cases, these changes are stressful. According to the National Health Interview Survey, 75% of our population suffers some stress every two weeks, and half of those report moderate to high levels of stress. That is a lot of people with a lot of stress! And as we know, *chronic* stress is related to numerous physical problems such as heart disease, stroke, and depression.

In order to provide the best care possible for our patients, it is important for us to understand the life circumstances they are experiencing which may contribute to changes in their behavior. Transitions can be both positive and negative, and the recognition of these circumstances and acknowledging them to our patients can go a long way to building long-lasting and strong relationships which are healthy for both sides of the equation, patients and practitioners.

Really? Yes, Really!

Happiness can present its own set of stressors, which can be just as telling on the physical and emotional health of an individual as negative experiences. Positive transitions can include such milestones as birth, graduation, or marriage. As health care professionals who see our patients on a regular basis, we are in a unique position to celebrate

these special occasions with them. We will typically see these patients shortly before or after such events occur, and taking the opportunity to acknowledge these milestones in their lives demonstrates to our patients that we care about them.

Focusing on these events can become a part of the morning huddle and can be enhanced by careful patient notes reviewed by the staff.

Special gifts such as baby bibs, flowers, or complimentary tooth whitening before a wedding can be offered by the office. A big smile and genuine congratulations by every staff member who greets the patients will leave its imprint.

Imagine the warm feelings generated in the patient and anyone within earshot (patients in the reception room, those being attended to at the front desk, and perhaps even in the treatment rooms) when it is clear that the entire office cares enough about their patients to share in their joy over an important event. Patients also love to receive newspaper clippings of their engagement or graduation announcements from their dental office.

Navigating the Other Side

Celebrating positive transitions with our patients can be fun and enjoyable. In many cases, however, the transitions occurring are negative, even catastrophic. Divorce, the loss of a job, or the loss of a loved one can leave our patients full of apprehension, anxiety, uncertainty, and fear. In some cases, the stress from a loss can contribute to depression, heart disease, or stroke. Every patient is different when it comes to his or her ability to

handle a loss. Their natural resilience, support systems (family, friends, social, political), spiritual beliefs, and emotional and physical health can contribute to their ability to progress through their transition in a healthy way.

Denial, depression, and anger after a loss are not unusual. The ultimate goal of acceptance of the loss and moving forward in life in a healthy way can be elusive.

Although suffering after a catastrophic transition can be easy to understand, some transitions frequently judged as less than catastrophic can generate serious emotional pain as well. Baby boomers frequently find themselves responsible for juggling the care of both young children and elderly parents. They also become empty nesters. Many elderly persons face physical and cognitive disability, the loss of their independence, and a move away from their traditional home base. Many feel that society no longer values them. Retirement itself is a major transition that is sometimes negative, sometimes positive, almost always a mixture, and always a challenge.

Finding the Right Place, The Right Time ...

Unlike the public celebration of a positive transition, acknowledging loss for a patient experiencing a negative transition is best done quietly. Frequently these losses are unexpected and unlikely to be revealed in previous patient notes. In many cases, the patient does not reveal his or her loss to the staff at all. If the loss is public knowledge, staff should

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Practice Management

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use their combined understanding of the situation to discuss the best way to acknowledge their concern for the patient. Perhaps some additional time scheduled for the appointment would be in order. Sometimes the loss is revealed to an individual staff member involved in treatment, and again, an understanding of the unique personality of the patient should be considered. Although our response to a patient involved in a negative transition requires an understanding of his or her comfort level in discussing it, in most cases a simple acknowledgment and expression of our sadness over the loss are appropriate. It is extremely important to remain non-judgmental and to avoid projecting our own expectations of appropriate behavior onto them. The office as a whole should feel supportive and protective of them.

The Right Thing to Do ...

Some of us are less comfortable talking about personal issues with our patients, and it might be helpful to designate a patient advocate who can take primary responsibility for making sure that each patient “feels the love” from the office. When all else fails, a card or letter signed by the staff with a simple statement such as “We are thinking of you during this difficult time” can be very comforting.

When it happens that the patient is a personal friend of the dentist or any of the staff, the best thing to do is to simply be there for him or her. Helping with daily needs such as providing meals or cleaning services is a great way to show concern. Following a catastrophic loss, many find it difficult to get out in public. The loss of a spouse and the

discomfort of appearing alone make this transition particularly difficult. One of the best things you can do to help is to invite your friend out to a sporting event, movie, or over for dinner, with the caveat that you make sure you *continue* to do so on a regular basis.

Focusing on these events can become a part of the morning huddle.

grief journey, or how they will react, I don’t recommend this. For example, as a Christian, I believe that God has a definite purpose for my life which includes suffering and pain. This belief has helped me tremendously through some difficult times. But even with my faith intact, in the early stages of grief it was not comforting for me to hear, for instance, that God will only give me what I can bear. In fact, my first thought to that comment was that I would be better off if I was weak! Later on in the grief process, those words were processed much more favorably by me. I don’t believe that I am alone in my view of platitudes.

Because It All Matters

One of the best and most rewarding characteristics of the practice of dentistry is our ability to play a regular recurring role in the lives of our patients. By increasing our understanding of “the patients attached to the teeth” and the changes that occur in their lives, we can provide a more holistic approach to their care, enhance their patient experience, and enrich our own lives as well. ■

And the Right Thing to Say

Many of us, after our initial expression of sympathy, feel the need to use more words than necessary, and frequently turn to platitudes. Because it is very difficult to understand just where a person is in his or her

The Loss List, Never to Be Separated from The Found List

From dependence to independence to dependence, with space left to add your own details.

We begin:

Birth (our own)
Childhood to adolescence
Graduation
Leaving home
Starting a career
Marriage
Starting a family/physical changes during and following pregnancy and childbirth
Raising children
Moms returning to the workforce/Becoming a working mother/first-time moms leaving children

We continue:

Time passing too fast/Time standing still
Developing a career
Middle age “doldrums” and responsibilities
Divorce perhaps
The loss of unadulterated joy
Military to civilian perhaps
The unthinkable: accident or crime victim; disability or death of a child

We age:

Departures on all fronts
Dealing with how our physical appearance, our “looks”, change
Empty nest; divesting
Retirement
Loss of loved ones
Any health transition, many of which are embarrassing: eyesight; arthritis; menopause
Moving to a fixed income; income controlled by someone else
Loss of identity and context; loss of autonomy
Disability
Nursing home
Death