

## **PS2.010**

### **Communicating bad news in the context of primary health care**

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**Background and Aim:** Communicating bad news is an essential skill for any physician and not only for the specialists who deal with terminal diagnosis. In the Primary Health Care, the physicians must be able to manage the illness more than the disease, comprehending and respecting the social context to which the patients are connected as well as their fears about the newness. The aim of this study is to present situations in the context of Primary Care that require special abilities by the Family Physician to introduce a bad news.

**Method:** Literature review and observational and descriptive research, based on personal analyses and indirect notes about the communication of bad news presented into medical consultations, from November 2015 to January 2016, at Clínica da Família Victor Valla, at Manguinhos Community (Rio de Janeiro - Brazil).

**Results:** It was seen that many situations in the context of Primary Care - as the communication of an undesired pregnancy to a 15-year-old girl, or the introduction of early insulin therapy to a 32-year-old patient, or the information about a reactive screening test for HIV to a homeless 27-year-old woman - imply a particular sensitivity and altruism by the Family Physicians.

**Conclusions:** The patients that received such bad news they will need a longitudinal care management, once they may become so psychologically affected that it can perturb the adequate treatment. When it involves communities that are economically and socially vulnerable, the communication of bad news requires a special carefulness.