Nurturing Patient Expectations to Enhance the Treatment of Tinnitus

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ABSTRACT

In addition to any direct treatment, the interactions we have with our patients create expectations that can impact the treatment. We cite research that has quantified these effects and shown factors that are important, such as the level of stress experienced by patients. We can improve treatment success by being aware of patient expectations and impacting them in a positive manner. This article reviews eight specific attributes that can contribute to positive patient expectations in the treatment of tinnitus: 1) Be perceived as a knowledgeable professional; 2) Be sympathetic towards the patient; 3) Demonstrate that you understand the problem; 4) Provide a clear therapy plan; 5) Show that you sincerely care; 6) Provide feelings of mastery; 7) Provide hope; and 8) Instill confidence. There are also some risks and ethical issues involved in attempting to influence patient expectations. It is inappropriate to mislead the patient, and patients should not feel like they are being manipulated.

KEYWORDS: Tinnitus, treatment, patient expectations, placebo

In addition to any direct treatment, the general interactions that we have with our patients create expectations that can have a positive or negative impact on the treatment outcome. In experimental clinical trials, such effects must be controlled. The indirect effect of the expectations, referred to as a placebo effect, must be isolated to determine the essential contribution of the direct treatment. In everyday clinical situations, the role of these patient expectations is not always appreciated. This is unfortunate, as a clear understanding and application of these influences could benefit the patient. This article

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reviews some of the issues that result in enhancing patient expectations, and describes how they can be applied to tinnitus patients. These effects are applicable to many therapeutic interventions in audiology and speech-language pathology.

DEFINING THE INFLUENCE OF PATIENT EXPECTATIONS

The influence of patient expectations is often found in the context of a masked drug trial, comparing a treatment drug to a control sugar pill. The patient's belief that the sugar pill will have an effect is often observed to have a beneficial effect on the treatment outcome. These drug trials demonstrate the relationship between patient expectations and treatment outcome. However, such effects are not limited to drug trials; patient expectations also have been shown to improve from a thorough evaluation, a chance to discuss their condition, a clear diagnosis, or a plausible treatment. In addition, an enthusiastic and committed clinician can have a positive effect on the patient's expectations for success. The benefits observed from optimistic patient expectations can be obtained from pills, injections, appliances, or operations; from touch, words and gestures, and even from environmental factors such as the ambience and social interaction within the clinical setting.

PATIENT EXPECTATIONS ARE PART OF EVERY TREATMENT

Every patient-clinician interaction involves expectations, and these have the potential to influence treatment. Both patients and clinicians can be more or less aware of these effects. These expectations can be ignored, or minimized, or they can be acknowledged, studied and used to the benefit of the patient. Clinicians have been nurturing patient expectations for years, and some specific treatment plans have evolved.

WHICH PATIENTS ARE MOST LIKELY TO BE HELPED?

The patients that seem to be most influenced by these indirect interactions often exhibit high levels of stress. As many as 30 to 40% of people with depression benefit from patient expectation nurturing. Patients with short-term depression are more likely to benefit than those with long-term depression. Large effects have been observed in patients with pain. Patients are more likely to be helped if they are anxious about their symptoms, dependent on others for care, and if the disease is not life threatening. The effect may also be larger when subjective sensations are being treated and when the sensations are under autonomic or hormonal control.

PATIENT EXPECTATIONS INFLUENCE PHYSIOLOGICAL EFFECTS/ASPECTS

Sometimes, patient expectations are defined as nonspecific effects, because the patient generally feels better overall as opposed to being cured of a particular disease process. However, there are real physiological consequences of the placebo effect. For example, the immune system is known to be less effective under stress. Investigators have realized that reducing anxiety could be beneficial to many diseases. The strength of this benefit depends on the strength of patient expectations.

ARE PATIENT EXPECTATION EFFECTS LONG LASTING?

An important question is whether these indirect effects produced by the patient-clinician interaction have a long-term, meaningful effect or are only transitory. This will certainly depend on the disorder and the patient's specific situation. Some research has focused on the long-term effects on certain disorders. For example, benefits to treatment for panic disorder have been observed for 2 months post-
treatment, for 6 months post-treatment for angina treatment, up to 12 months for peptic ulcers and for up to 30 months post-treatment for rheumatoid arthritis.\textsuperscript{4,17}

It has been argued that these effects may be long lasting since the relief of symptoms can improve the patient's self-confidence.\textsuperscript{18} Therefore, the patient is better able to deal with problems of life. If the patient is coping better, they are more satisfied with their life. They are less frustrated and distressed. Thus, a short-term improvement in self-confidence may result in better coping strategies with long lasting effects.

**IMPROVING TINNITUS TREATMENT BY ENHANCING PATIENT EXPECTATIONS**

Table 1 provides an outline of some of the critical factors involved in positively influencing patient expectations. The following section is a discussion of how they might be used to influence the treatment of tinnitus patients.\textsuperscript{19} The discussion is based heavily on the recommendations of Brown,\textsuperscript{4} and de Sainttonge and Herxheimer.\textsuperscript{5}

**Be Perceived as a Knowledgeable Professional**

The patient should perceive the clinician as well educated, responsible, and respected. This can be aided by environmental factors such as professional attire and office surroundings. The clinician should be able to share his or her knowledge of tinnitus with the patient. The patient should develop the impression that “I am in the right place.”

**Be Sympathetic Toward The Patient**

Many patients are very distressed by their tinnitus. They need time to share their problems, and for this they need a good listener. The clinician needs to be sympathetic and perhaps share similar stories from other patients. Patients need to know that you consider their tinnitus to be a serious problem, and understand

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| 1. Be perceived as a knowledgeable Professional | • Act professionally  
• Impart useful knowledge  
• Be organized and clear  
• Listen  
• Acknowledge problems  
Discuss:  
• problems  
• causes  
• treatments  
• reasonable  
• achievable  
• Be sincere  
• Provide follow up  
• Patient participates in therapy  
• Patient knows what is expected of him/her  
• Others benefit  
• Provide all of the above |
| 2. Be sympathetic toward the patient |
| 3. Demonstrate that you understand the problem |
| 4. Provide a clear therapy plan |
| 5. Show that you sincerely care |
| 6. Provide feelings of mastery |
| 7. Provide hope |
| 8. Instill confidence |
the hardships it can create. Many patients have gone from one professional to another and have received brief, tentative counseling. They often feel they are being “brushed off,” and that nobody really understands their problems or wants to spend time helping them.

Demonstrate That You Understand the Problem

It is important that the patient believes you are knowledgeable about tinnitus. You need to demonstrate your knowledge about tinnitus by discussing the causes, the prevalence, and the typical symptoms. Provide reassurance and review the treatment options. In some cases, the physiological mechanisms also can be described depending on the sophistication and interest of the patient. This information will not only demonstrate your knowledge of tinnitus, but also will provide the patient with useful knowledge that will take the mystery out of tinnitus.

Provide a Clear Therapy Plan

Patients need to know exactly what is expected of them. This engages them in a way that they feel like they can be part of the solution. In some situations, the particular therapy may not be as important as the very existence of a plan. What is critical is that there be a plan, that it is well defined, and the clinician and patient believe that it is reasonable and achievable. Having a detailed plan, which might include written procedures to follow or diaries, can help maintain the structure of the treatment.

Show That You Sincerely Care

Caring may be demonstrated in the amount of time you take with the patient, the manner in which you listen and ask questions, and by showing that you want the patient to succeed. Discussions of follow-up care, helpful referrals, and engaging significant others in the overall treatment can be beneficial.

Provide Feelings of Mastery

If patients believe there is a strategy available that will help them, they will no longer feel powerless. The patient needs to believe that there is a reasonable plan based upon a rational treatment that will lead to success. Patients do worse when they are told, “I am not sure what is the matter with you, and I am not sure the treatment will have an effect.” Compare this to a statement like, “We understand your condition, and this treatment has worked very well for others like you.” As stated above, a clear therapy plan is essential. If patients do not know what they are supposed to do, or are not convinced the treatment will help them, they become disillusioned and often drop out of therapy. Knowing the protocol to follow often restores a sense of control to the patient. Patients benefit from being actively involved in their treatment. Thus, an additional method of giving patients a feeling of control over their tinnitus is to provide several treatment options and to allow the patient to participate in deciding which option to try.

Provide Hope

Providing hope has an important role in healing. Feelings of hopelessness can retard recovery, and part of our responsibility as clinicians is to mobilize hope in the patient. Hope can be increased by assuring the patient that there is at least some likelihood of success, that there is active research in the field, and that others have benefited from similar treatments. Both the clinician and the patient need to believe that the prescribed treatment will be effective. Confidence in the treatment plan is built from the first interactions with the patient. As noted before, a demonstration of knowledge and confidence on the part of the clinician may have a strong positive influence on the patient. Make it clear that you believe that the proposed treatment will be effective in reducing the effects of tinnitus, but do not attempt to minimize the importance of the problem to the patient. It may be possible to refer the patient to others who have benefited from the proposed treatment.
Instill Confidence in the Tinnitus Clinician

All of the above factors contribute to the overall confidence that the patient has in the clinician. A patient with more confidence in the clinician is more likely to have confidence in themselves and the treatment, and is more likely to comply with recommendations and the therapy plan.

ETHICAL ISSUES ABOUT INFLUENCING PATIENT EXPECTATIONS

We have argued that indirect patient interactions can influence treatment outcomes, particularly in the treatment of disorders that involve stress, such as tinnitus. However, when this is considered in the context of a “placebo” treatment, the manipulation of these effects can be questioned on ethical grounds (see Garstecki22 for a general discussion of ethics and audiology).

It is not ethical to lie or to mislead a patient. Generating high expectations for an unproven protocol is not appropriate. Within the area of tinnitus management, there are several recognized treatments with unproven success rates.20-24 Furthermore, the contribution of direct and indirect influences in those treatments that claim to be successful are unclear.

There are negative implications in attempting to modify patient expectations.5,25 If patients believe they are being manipulated, they will lose faith in the clinician. The clinician also may feel uncomfortable about misleading or manipulating the patient. Most importantly, it is also conceivable that nurturing patient expectations might help the patient feel better, and mask the symptoms of a serious disease that requires other treatments.

Clinicians must resolve in their own minds how best to foster positive patient expectations without misleading the patient. An initial analysis of the presenting problem is an important first step. What are the consequences of no treatment? What are other treatment options, their effectiveness and costs?

The clinician needs to be comfortable with the idea that nurturing patient expectations represents a valid adjunct to other treatments. Suggesting that the proposed plan has worked for many patients may be no more unethical than endorsing other treatment strategies with low success rates. So long as the potential for negative effects is negligible, and the outcome of the treatment plan is monitored and discontinued if unproductive, then it would appear that nurturing patient expectations is desirable.

CONCLUSIONS

Brown4 proposed that health care workers make better use of patient expectations, and actually incorporate the healing effects into their practice. We believe that this effect may have a significant but unrecognized impact on many current tinnitus treatment programs. We are suggesting that the patient expectation effect be recognized and systematically incorporated into existing programs for the benefit of all tinnitus patients. Attending to patients’ individual needs and expectations, when added to other scientifically valid treatments, will enhance the results of tinnitus treatments.26

Although we have not discussed patients with other communication disorders, enhancing patient expectations has the potential to positively impact the success of hearing aid use, stuttering therapy and many other areas within our profession.

ACKNOWLEDGMENTS

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ARTICLE TWO

SELF-ASSESSMENT QUESTIONS

1. Patient expectations can have
   A. a positive and negative effect on treatment outcome
   B. only a positive effect on treatment outcome
   C. only a negative effect on treatment outcome
   D. very little effect on treatment outcome

2. ______ of people with depression benefit from patient expectation nurturing.
   A. 90–100%
   B. >50%
   C. 30–40%
   D. 0–10%
3. Patients are more likely to be helped with expectation nurturing if they are
   A. anxious about their symptoms
   B. dependent on others for care
   C. not experiencing a life threatening disease
   D. all of the above

4. Which of the following factors are not involved in positively influencing patient expectations?
   A. be perceived as a knowledgeable professional
   B. provide hope
   C. let some time pass prior to providing a clear therapy plan
   D. demonstrate that you understand the problem

5. The authors believe that the patient expectation effect should be incorporated into existing tinnitus programs. True False