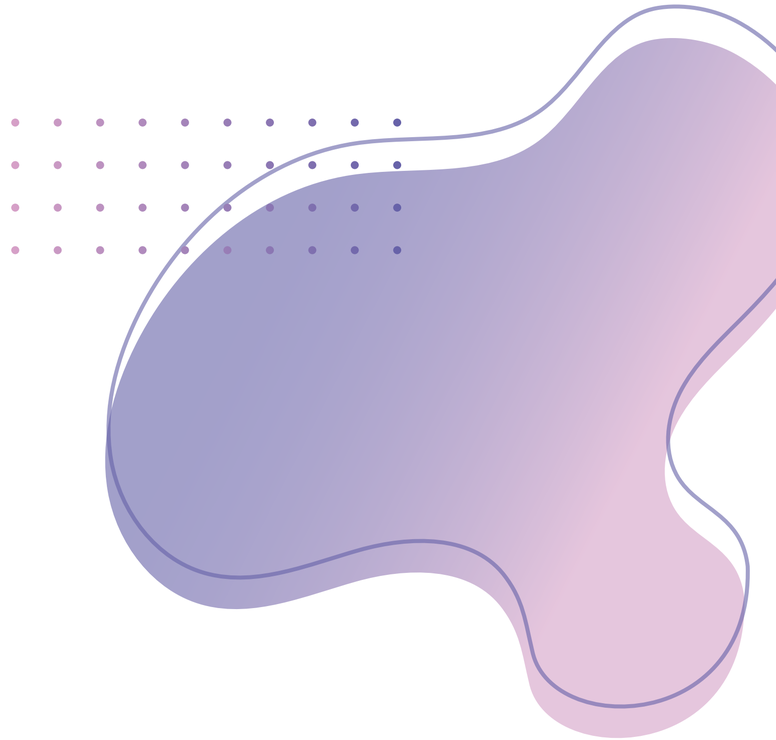
A CLL EMPOWERMENT GUIDE

Managing challenging emotions

CLL empowerment



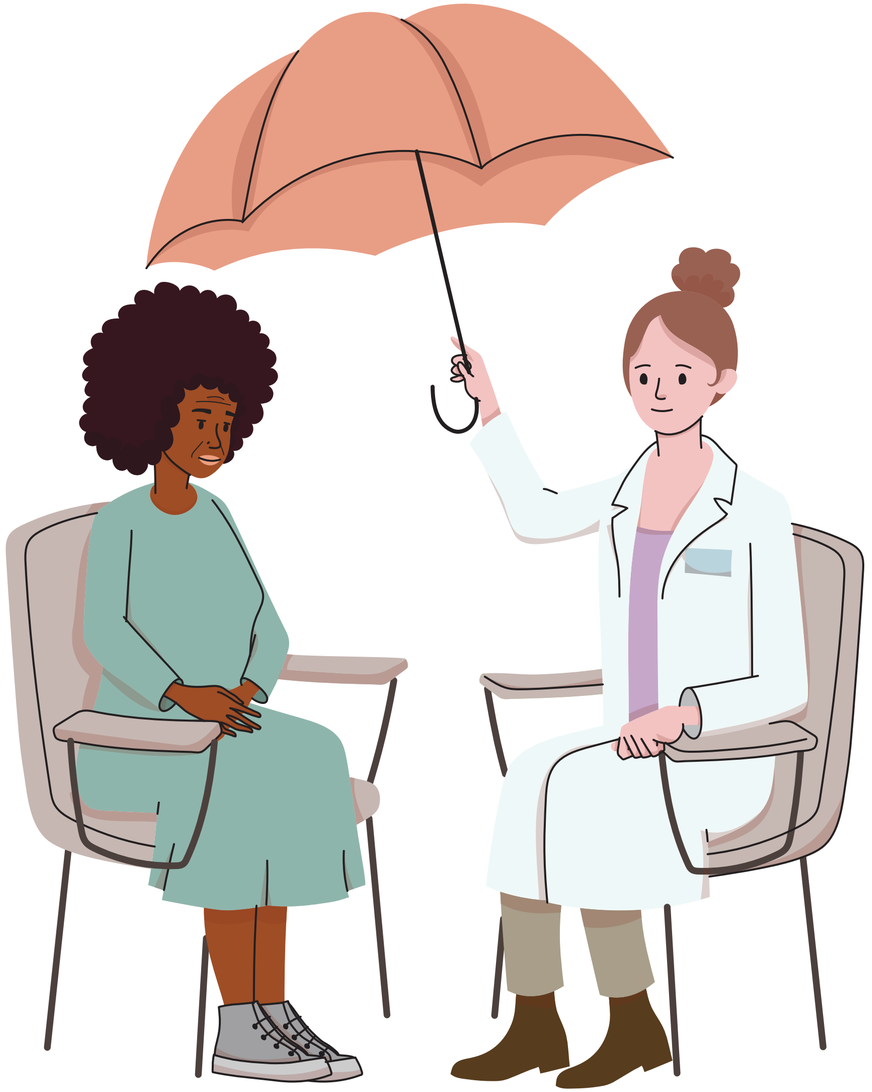
In clinical practice, hematologists often come across patients who experience challenging emotions, such as intense anxiety, sadness and grief. This often results in stress and feelings of helplessness for hematologists.
In addition, many hematologists have never had the opportunity to receive structured training and wonder how they should respond when interacting with clients struggling with difficult thoughts and emotions. Specific guidelines or exact recommendations are not usually applicable to specific communication challenges.

In order to overcome this, a broader framework or relational mindset will be proposed in this leaflet. It is called "emotional containment".

WHAT IS EMOTIONAL CONTAINMENT

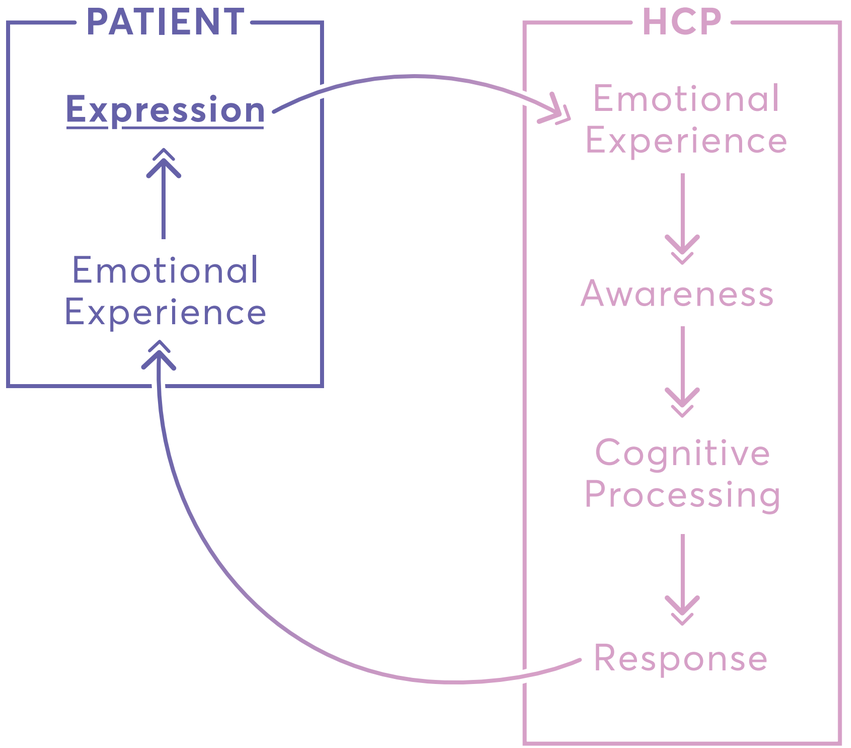
Containing patients' challenging emotions means to be able to remain emotionally present and responsive to them in their difficulties.

This is quite a special mindset and comes in contrast to a mindset that aims at fixing problems, which is often embraced in medicine. This "fixing" notion is not often helpful for emotional matters and can even make matters worse. So, rather than "fixing", the role of the healthcare professional can be viewed as trying to identify, accept and remain present with their patients in their difficulties. This in turn, can lead to better emotional regulation, i.e., managing and controlling one's emotions, for both patients and physicians.

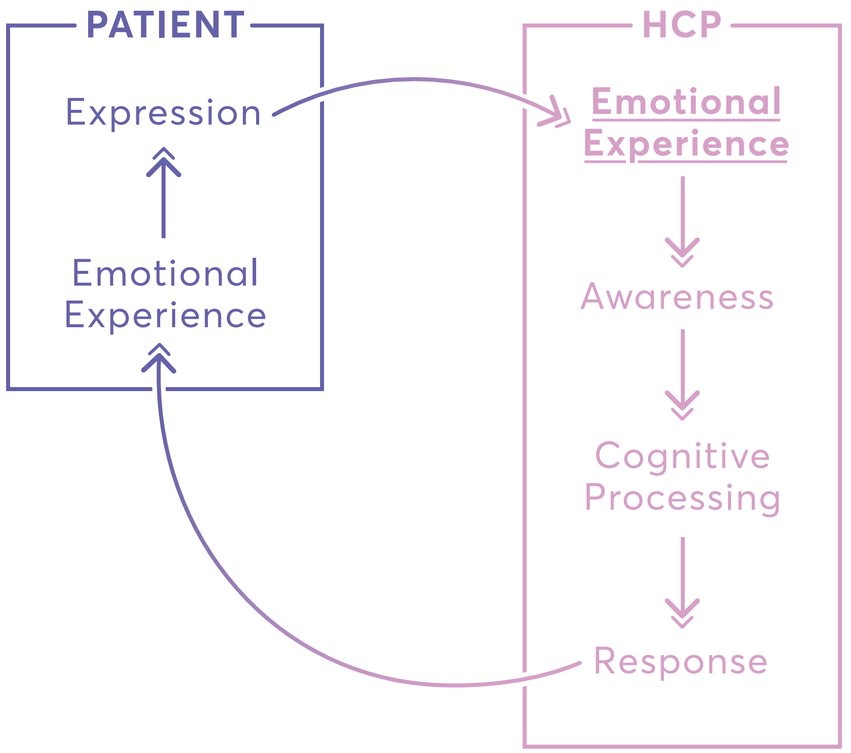


The Patient's Emotional Experience can be any feeling triggered in the patient during an office visit. For instance, announcing bad news, might trigger patients' sadness, anger or despair.

The emotional experience of the patient is often expressed **[Expression]** in prominent (e.g., crying when feeling sadness) or more subtle ways (e.g., clenching fists when angry). Being attuned to both the patient's verbal and non-verbal communication is key in trying to identify what they might be feeling.

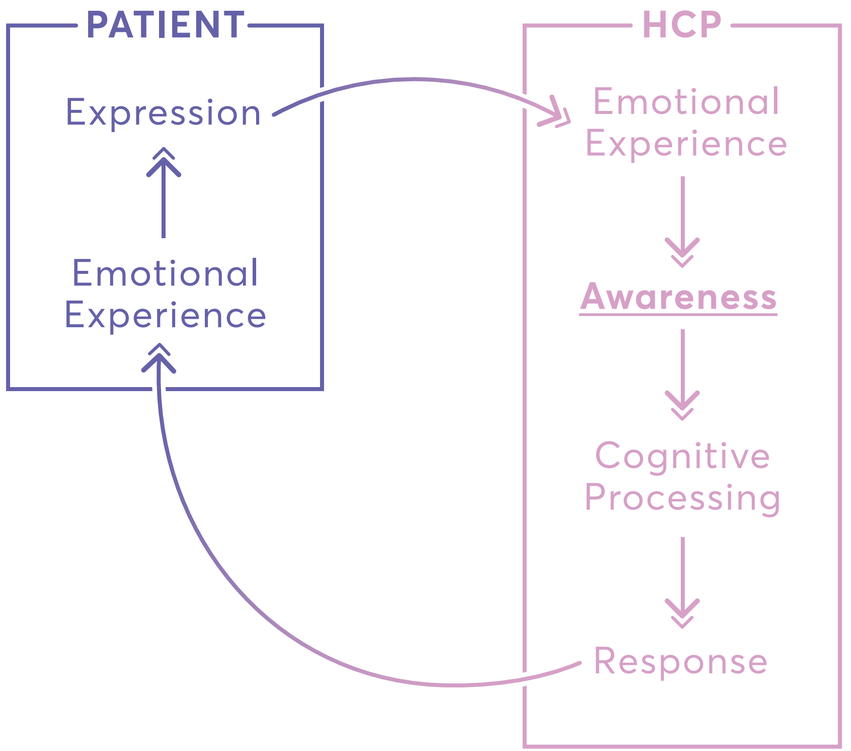


As shown in the figure, emotional regulation can be conceptualized as a feedback loop between patients' and hematologists.



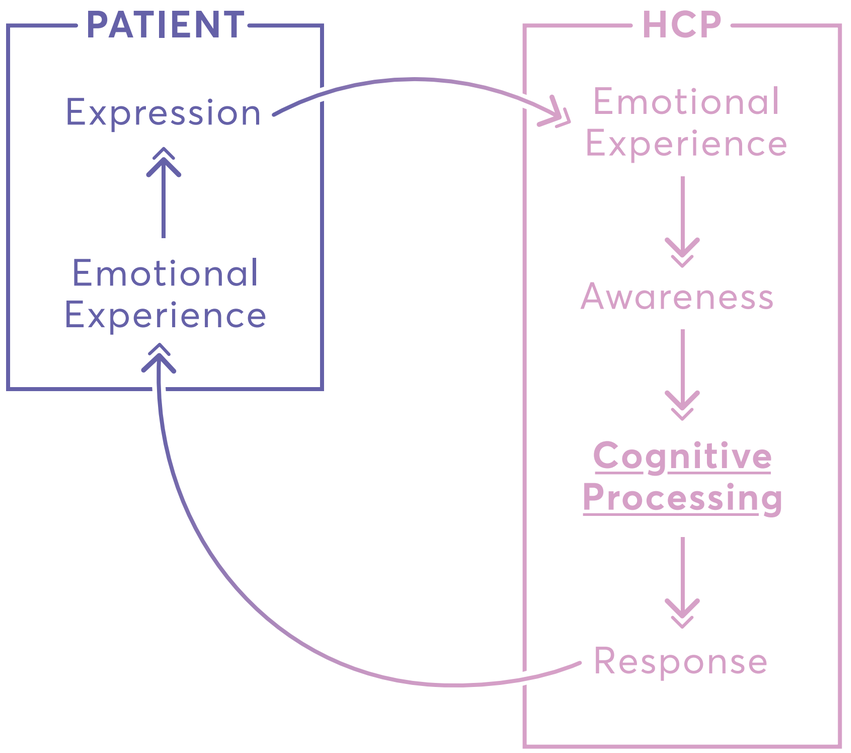
The patient's emotional experience is likely to have an impact on the physician **[HCPs Emotional Experience],** and in some cases this impact can be quite intense and keep resonating for hours or even days after a difficult clinical situation. One might experience a wide range of emotions aroused by patient's emotions. This can be similar to what the patient is feeling (e.g., feel sad at their sadness) or quite distinct. For instance, one might feel fearful and stressed when treating a very angry patient, or resentful towards an anxious patient asking lots of questions.

The physician's emotional experience may at times be intense and difficult to manage. The key message at such occasions is to take a step back, and not act upon them.



Allowing a moment of **awareness** of the present experience, such as "I realize I feel so uncomfortable right now that I wished this part of the consultation ended", is really helpful.

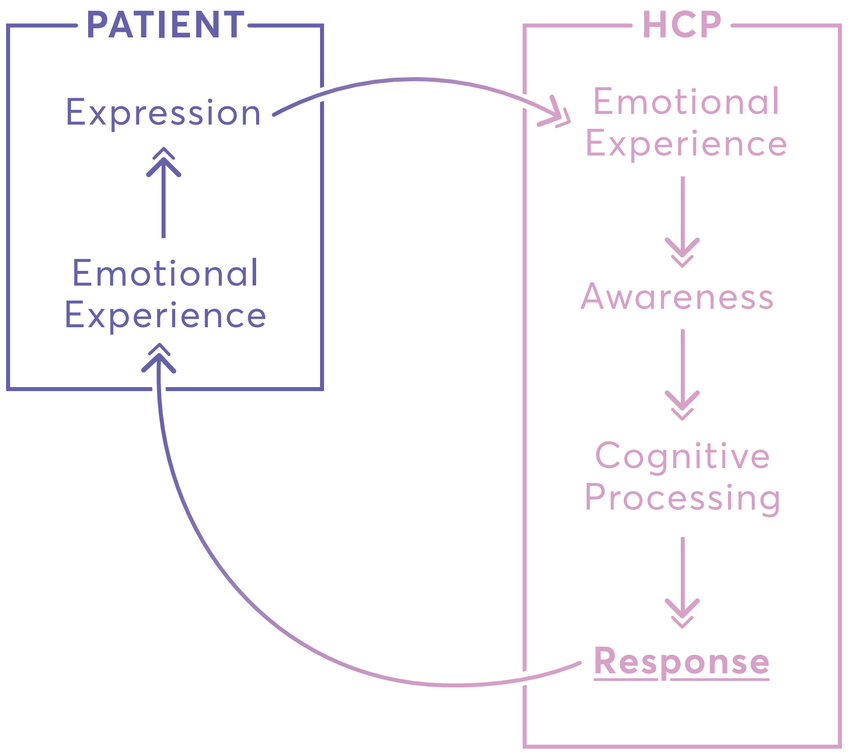
In addition, accepting this inner emotional experience is equally important. It is okay to feel burdened, vulnerable, uncertain, angry and a lot more in face of patients' difficult emotions. Note that many of these can also be some of the patient's presenting emotions. Being able to accept them in yourself, you can become more compassionate towards them. In addition, being compassionate to yourself can be liberating and provide the mental space you need to reflect on the situation.



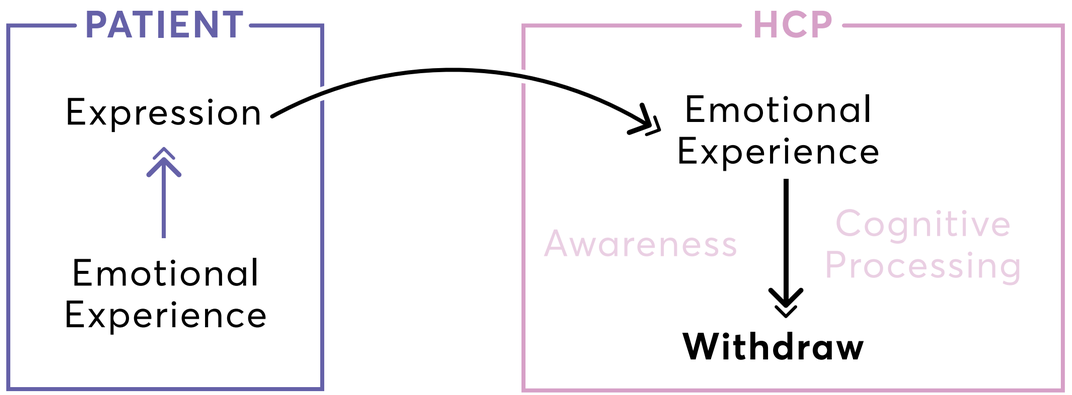
After becoming aware of one's own emotions that got triggered, it is helpful to think about how the patient might be feeling, based on their specific situation and experience **[Cognitive Processing].**

This requires a mental distinction between the hematologists' emotions and those of their patient. Only after making this distinction one becomes able to fine-tune their responses to their patients' specific situations, experiences and goals.

But how can a patient know that their hematologist is willing to understand and stay present with their difficulties?



The hematologists responses will be the means of communicating this. If they provide responses which are responsive to their patients' difficult emotions **[Response],** the patients' emotional experience is likely to soften. This can be noticed on their next expression of emotions. Going through this cycle multiple times during a consultation would result in improved emotional regulation.

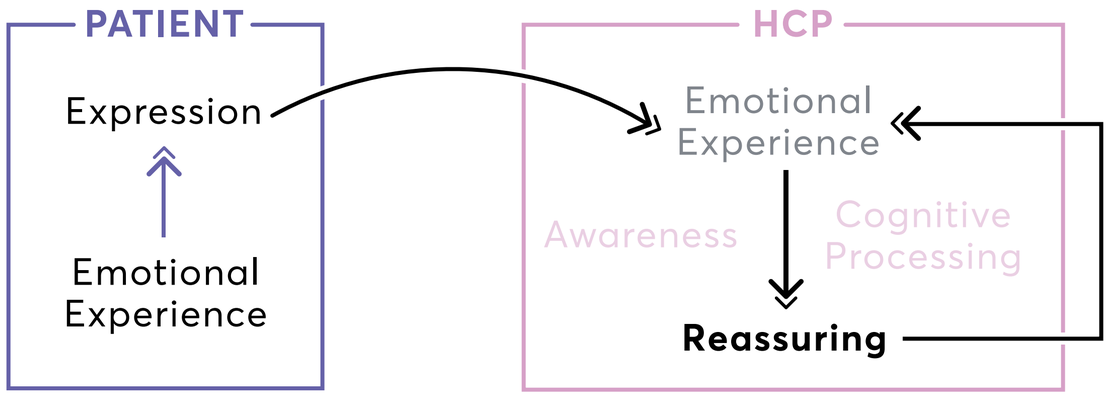


WHAT OFTEN GOES WRONG

If the feelings triggered to the hematologist are too intense, they might feel the urge to quickly respond without taking the time to reflect on their experience first. In a clinical encounter with a patient experiencing intense negative emotions, it's likely to either over-identify with them, or take distance as a means of protection.

For instance, in a consultation with a really sad patient, who might start crying, one might feel intense negative emotions that are difficult to manage. In such a case, one might instinctively withdraw from the conversation, stop looking at them and revert to the pc screen, or end the session as soon as possible **[Withdraw].**

As a result, one would lose rapport with the patient and miss the chance to support them.



On the other hand, over-identifying with patient's distress and fully immersing in their experience without taking a step back to reflect about it can also become problematic.

For instance, due to your own intense worry triggered by your patient's worry, you might jump to giving premature reassurance, by saying something like "don't worry, all will be fine" **[Reassuring].** This will be targeted at alleviating your own emotional experience, rather than your patient's one and it is unlikely to really reassure them at that moment.

HOW CAN HEMATOLOGISTS CONTAIN PATIENT' CHALLENGING EMOTIONS

Being mindful that the best you can do is stay present with your patients' affect, **rather than dismissing, prematurely reassuring them or trying to "correct things"** is likely to help you provide such a response.

It is only when one can balance these two that one can provide a helpful response. A response through which we convey to the patient that we can stay present with their feelings is needed the most during such moments.

designed by —— BOS

This leaflet was created within the context of the "Patient Empowerment" Program, which is designed and implemented by the Institute of Applied Biosciences at the Center for Research and Technology Hellas (INAB|CERTH) and approved by the Hellenic Society of Haematology (HSH) and the European Research Initiative on CLL (ERIC)

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