

**EMPATHY IN ACTION: THE EVALUATION OF DOCTORS' EMPATHETIC
COMMUNICATION THROUGH PATIENTS' EXPERIENCES AT SIR SUNDERLAL
HOSPITAL IN VARANASI, UTTAR PRADESH**

Dr. Dhirendra Kumar Rai,

Assistant Professor,
Department of Journalism and Mass Communication
Banaras Hindu University.

Sanjeev Kumar Ranjan

Research Scholar,
Department of Journalism and Mass Communication
Banaras Hindu University

Diksha Vishwakarma

Research Scholar,
Department of Journalism and Mass Communication
Banaras Hindu University

Abstract

The architecture of patient-centered care is believed to be built upon the foundational pillars of empathy and compassion, firmly established by doctors toward their patients. Empathetic communication is vital for active doctor-patient interactions as it lays the groundwork for open and unrestricted communication in which patients feel that their health-related concerns are actively heard and valued. A descriptive, cross-sectional study was carried out with the use of non-random sampling procedures and purposeful samples to assess patient satisfaction levels with doctors' empathetic behaviour during consultations at Sir Sunderlal Hospital, Varanasi. Following the visits with doctors, a sample of 108 patients answered a two-page questionnaire. The primary section of the questionnaire included quick demographic information of the respondent and consultation-related inquiry, followed by a rating of overall satisfaction through the Consultation and Relational Empathy (CARE) questionnaire. The study's inclusion criteria, which included the period and frequency of counselling sessions, were met by 108 patients, ages 20 to 70, who volunteered for the study. The degree of agreement among the respondents regarding their experiences with doctors' empathetic behaviours and communication patterns during the consultation at Sir Sunderlal Hospital suggests that the data points are rather clustered around the mean, with a moderate degree of variability in the responses ranging from 0.725 to 1.385 standard deviation (SD). According to patient assessments of physician empathy, researchers found that patients reported generally high levels of satisfaction with the empathetic care for them during consultations with their doctors.

Keywords: empathy, medical consultation, patient-centered care, communication, patient satisfaction.

1. Introduction

In medical settings, the importance of communication and dialogue is equivalent to medical treatments. Empathy plays an important role in fostering the physician-patient relationship and connection within healthcare interactions. It is a complex concept that involves the capacity to decipher, comprehend, and share the emotions, thoughts, or perspectives of another individual. It plays a vital role in patient and physician relationships, as it enhances the level of understanding between doctor and patient. In this sequence, empathy aids and lays a path for doctors to understand the sufferings and complications of the patients extensively, thus creating a foundation for effective communication and compassionate healthcare outcomes. In this context, communication acts as a medium through which the patient not only informs the doctor about the difficulties and sufferings related to the disease but also provides all the information necessary for the doctor to make accurate treatment-related decisions. The therapeutic exchange of dialogues between doctor and patient is said to improve treatment outcomes and health results of patients positively.

There are several benefits for patients and doctors when a compassionate, patient-centered strategy is employed instead of one that is only clinician- or disease-focused. A patient-doctor interaction lacking empathy not only denies patients essential emotional support and their fundamental right to humane and competent treatment but also risks causing actual harm to patients because, in this situation, the doctors miss out on valuable information regarding patients' health and related factors. By adopting an empathetic stance, healthcare providers can enhance patient treatment outcomes, by improving the level of patients' adherence to the prescribed treatment and fostering a positive patient-physician relationship. It also impacts the overall well-being and satisfaction of patients with the healthcare experience.

Many previous studies have proved the link between doctor empathy and patient satisfaction. If we look at major ancient texts related to medicine like Charak Samhita, in that Charka clearly stated that in ancient times empathy was the main factor that led Brahmins to study and practice medicine (Lochan, 2003). Charaka Samhita gives importance to the health care providers as: "He who practices medicine with compassion for all beings rather than for profit or sense gratification is the best of all" (Bhasin, 2005; 2).

Though the availability of new technologies, and related techniques has brought about a revolution in the healthcare sector, the way a doctor empathetically addresses the concerns, fears, and doubts of the patients cannot be compared with any technology-based aiding system. Considering this, together with empathy's importance and necessity in the medical profession, the researchers decided to gauge the level of empathic behaviour-based communication between doctors and

patients within the context of Sir Sunderlal Hospital and collected primary data through a survey. Founded in 1924, Sir Sunderlal Hospital is a part of the Institute of Medical Sciences at Banaras Hindu University (IoE), an Institute of Eminence, under the central government, and “is primarily a teaching and training hospital for the undergraduates, postgraduates, super specialties, and research courses” (“Banaras Hindu University, [BHU], Varanasi-221005, U.P., India. - Banaras Hindu University, Varanasi, India,”).

Beyond the purview of this study, many other scenarios have examined the significance of empathy in communication and demonstrated its wider applicability in promoting meaningful relationships. The initiative taken by the Medical Council of India to introduce the Attitude, Ethics, and Communication (AETCOM) module is commendable and focused on communication and measuring variables that impact empathy (Tiwari, Agarwal, & Sanjay Kumar Pandey, 2023; 1).

In this sequence, it is noteworthy that while addressing the 8th Convocation of the Postgraduate Institute of Medical Education and Research 2008, Vice President of India, Shri M. Venkaiah Naidu, emphasized the role of communication and empathy in clinical settings and further emphasized the role of doctors and stated that “You are next to God for patients who come to you. Never betray their trust. Always treat them with patience, empathy, and compassion (“Doctors Should Treat Patients with Patience, Empathy, and Compassion: Vice President,” 2018).

2. Literature review

In the traditional chain of research, a literature review is considered an indispensable part. The details of the research and studies done earlier are necessary, which makes it possible to have an in-depth knowledge of the topic using the available literature. It is important to have a deep understanding of all the relevant aspects and sides related to the subject to verify the importance and validity of the study.

2.1 Importance and relevance of empathetic communication in medical consultation

In medical consultations, patients experience a double need: to know and understand and to feel known and understood (Bensing & Dronkers, 1992; Bensing, Schreurs, & Rijk, 1996; Engel, 1992). The patient-physician connection is critically dependent on empathy. Establishing a good rapport with patients, establishing trust, promoting treatment adherence, and creating an atmosphere that supports the best possible medical decision-making all depend on effective communication. (Ong, de Haes, Hoos, & Lammes, 1995). It allows the healthcare providers to detect and recognize the users’ experiences, worries, and perspectives (Hojat et al., 2001), strengthening the therapeutic relationship between the two parts (Spiro, 2009). It is widely acknowledged that the health professional’s empathetic ability leads to better therapeutic results (Hojat et al., 2002).

Effective patient-centered care procedures include the provision of emotional support and empathetic behaviour both during medical treatment and during consultation. In addition to stating how positively it benefits health and treatment outcomes, the NURSE technique helps in improving the therapeutic relationship between doctors and patients by emphasizing and prioritizing reacting to patients' emotions with empathy. To understand the interiors of patients' minds and mental statuses, naming an emotion is a vital aspect and the foremost step in demonstrating sensitivity to a patient's distress and suffering. It not only helps in getting a deeper understanding of patients' health-related fears and concerns but also helps doctors in deciding the accurate curative measures accordingly. It is the moral responsibility of a doctor to respond empathetically during consultations and treatments because treating patients with respect and dignity acts as the base for a reciprocal relationship (Kaplan, 2010).

According to Stubbe (2022), when medical professionals communicate with empathy, patients open up to them about their issues, pains, and struggles without any hesitation or fear of being judged. The doctor uses this shared information to learn about the patient's health-related characteristics, such as their tolerance level and anxieties, and accordingly avail them of all the information about treatment-related resources and alternate systems that are available and necessary for the treatment. Finset (2012) says that by employing different communication strategies, such as asking pointed and direct questions, the therapist gives the patient a chance to freely communicate their innermost thoughts and feelings, which improves the therapeutic alliance between them. Moreover, recognizing the intertwined existential and psychological distress of patients can guide clinicians in making informed therapeutic decisions (Dauchy, 2023). However, it is essential to note that not all patients may articulate their emotions explicitly; some may communicate their fears indirectly; in such cases, doctors are supposed to use their empathic behaviours or communication skills to gather relevant information from the patients (Gulich & Lindemann, 2010).

In 2001, the Bayer Institute for Health Care Communication (BIHCC) was formed, and in the same year, the Communication Skills Consultant Program (CSMP) included the 4 E's (connect with the patient, empathize, educate, and enlist), which was called 'The Bayer Mode' and emphasized the empathetic communication between doctor and patient (Tongue, Epps, & Forese, 2005). In this sequence, the SPIKES protocol as discussed by Kaplan also emphasizes the importance of empathy (E) at the time of breaking bad news to the patients or their relatives as follows: "The key to an empathetic response lies in acknowledging the emotions and actions. Questions aimed at verifying that the patient understands the proposed plan and can make the decision to participate can include "Does this make sense to you?" "Are you clear about the next steps?" and "Do you have enough information to decide?" (Kaplan, 2010; 2)

Patient satisfaction plays a significant role in adherence to treatment and contributes to a positive working patient-physician therapeutic relationship. (Walsh, O'Neill, Hannigan, & Harmon, 2019;

1). According to Beck and others (2001), empathy is linked to patient satisfaction, adherence to treatment, and the perception of a positive interpersonal patient-physician connection.

Schattner (2012) proposes that “clinical empathy should be viewed as a continuum of three obligatory sequential stages: ‘comprehension’ of the patient’s predicament (a cognitive process based on listening), followed by ‘compassion’ (an emotional or affective process), and then ‘commitment’ to do the best for this patient (a practical stage of obtaining and applying the best patient-suited evidence and providing ongoing support” (Schattner, 2012; 1). Additionally, he made the point that the virtue of clinical empathy is widely praised and these empathetic feelings needed to be exhibited in their behavior in addition to being felt.

According to Jahan and Siddiqui (2019), the importance of communication between doctor and patient can also be estimated based on its positive effects on the patient's health. Assessing the communication process or system is also important in knowing the patient's experience of disease status, stability, compliance, and satisfaction. The doctor listening to and understanding his patients patiently, feeling sympathy towards them, understanding the concerns of the patients, etc. are the symbols of a good and successful relationship between a doctor and a patient.

As stated by Landstand and Merit Kangarsnes (2023), a doctor with strong communication skills is the only one who can offer patients and their attendant's courage and sympathy in difficult situations when they are not feeling hopeful or confident and lit a ray of hope in them.

It was established in the research of Kim, Kalowitz, and Johnstone (2004) that having emotional empathy gives a doctor a higher status than a physician in the mind of the patient. When the doctor provides importance to emotional empathy and participation of the patient and their family in the decision in his treatment and counselling practice and also follows it in practice, then the level of satisfaction of the patient increases significantly from normal. The negative changes and ill effects of its absence have also been discussed in this study.

3. Objective

To assess patient satisfaction level with doctors' empathy during consultations at Sir Sunderlal Hospital's setting in Varanasi.

4. Method

A cross-sectional, descriptive study was conducted, using purposive samples of non-random sampling techniques. The key purpose of this study is to assess the level of physician empathy experienced by patients. The patients of various departments at Sir Sunderlal Hospital shared their experiences by completing the Consultation and Relational Empathy Measure questionnaire,

directly after they consulted with their respective doctors. This questionnaire consisted of demographic information, including specifics about how long they have been consulting the doctors and the frequency of their visits. This investigation ensured that the study's inclusion requirements were met by incorporating the patient's consultative duration and visit frequency up to this point. The 10-item Consultation and Relational Empathy Assessment (CARE) evaluates how the patient feels about the doctor's empathy and actions throughout the visit. A validated questionnaire that is freely available is called the Consultation and Relational Empathy Measure ("The CARE Measure Website," n. d.). Each of the ten items is graded on a 5-point Likert scale, with 1 representing poor performance and 5 representing good performance. For the study, the researchers targeted to collect 150 responses and distributed the questionnaire to 200 individuals, and 108 of them volunteered, showed active participation, and responded to the questionnaire schedule. Respondents who volunteered were given assurances regarding confidentiality, and their consent was obtained. The researchers then analysed the primary data collected through the questionnaires in detail.

5. Data Analysis

As described in table 5.1 below, among the respondents ($n = 108$) who voluntarily participated in the research, the number of male respondents is 62 and the number of women is 46, whose percentages are 57.40% and 42.59%, respectively. On analysing the frequency of respondents participating in the survey based on age group, it is seen that the highest number is 58 patients between 30 and 40 years of age, representing 53.70% portion of the total respondents. Similarly, the number of patients between 40 and 50 years is 24, and the percentage is 22.22%. In addition, six respondents who were above 50 took part in the survey, which accounts for 5.55% of the total respondents. The number of respondents in the age group of 20–30 is 20, and their participation percentage is 18.51%.

Table 5.1.Characteristics of Patients

When evaluating the reason for a patient's visit to the hospital as well as the kind of consultation,

Characteristics	Frequency	Percent
Age (in years)		
20-30	20	18.51
30-40	58	53.70
40-50	24	22.22
<50	06	5.55
Gender		
Female	46	42.59
Male	62	57.40
Type of consultation; sample (%)		
Routine check-up	12	11.11
Diagnosis	46	42.59
Follow-up meet	28	25.92
Treatment plan	22	20.37
Frequency of consultation visits		
2-4	42	38.89
>4	66	61.11
Duration of consultation with the doctor (in months)		
1-2 month	42	38.89
>2 months	66	61.11
Total	108	100

We find that 42.59 percent of patients visited the hospital primarily for a diagnosis. In a similar vein, the second respondent group consists of patients who come to the hospital for follow-up appointments; of these patients, 28 participated in the survey, or 25.92% of the total respondent. 22 individuals who came for a treatment plan completed the survey as well; their combined percentage is 20.37. Among the 108 respondents in the survey were 12 people who visited for a routine check-up.

When the frequency data of their medical consultation visits are examined, it is discovered that 66 patients, or 61.11% of patients, have made more than four medical visits to Sir Sunderlal Hospital. Between two and four hospital visits for treatment have been made by 42 patients or 38.89% of the total respondents. In the main questionnaire section, there was a question about how long patients had been seeing their doctors. After analysis, we discovered that 42 patients, or 38.89 percent of all

respondents, had been going to the doctor for at least one to two months. Out of 108 respondents, 66 said they have been seeing their doctor for longer than two months.

Table 5.2. Descriptive statistics of each survey Likert scale question

<i>Item No.</i>	<i>Questionnaire (CARE)</i>	<i>Frequency and Percentage of Response</i>					<i>Mean (n=108)</i>	<i>Standard Deviation (σ)</i>
		<i>Strongly Agree</i>	<i>Agree</i>	<i>Neutral</i>	<i>Disagree</i>	<i>Strongly Disagree</i>		
1-	Did the doctor make you feel at ease?	65	23	7	8	5	4.25	1.118
		60.18%	21.29%	6.48%	7.40%	4.62%		
2-	Did the doctor let you tell your story?	57	35	14	2	0	4.36	0.775
		52.77%	32.40%	12.96%	1.85%	0.0%		
3-	Did the doctor really listen to you?	61	26	17	4	0	4.33	0.871
		56.48%	24.07%	15.74%	3.70%	0.0%		
4-	Was the doctor interested in you as a whole person?	51	27	16	9	5	4.01	1.162
		47.22%	25.00%	14.81%	8.33%	4.62%		
5-	Did the doctor fully understand your concerns?	66	27	15	0	0	4.47	0.725
		61.11%	25.00%	13.88%	0.0%	0.0%		
6-	Did the doctor show care and Compassion?	54	18	30	2	4	4.07	0.911
		50.00%	16.66%	27.77%	1.85%	3.70%		
7-	Was the doctor positive and encouraging?	59	22	13	9	5	4.12	1.184
		54.62%	20.37%	12.03%	8.33%	4.62%		
8-	Did the doctor explain things clearly?	71	12	18	7	0	4.36	0.976
		65.74%	11.11%	16.66%	6.48%	0.0%		
9-	Did the doctor help you to find a way to cope with your disease?	28	36	24	6	14	3.53	1.286
		25.92%	33.33%	22.22%	5.55%	12.96%		
10-	Did the doctor make a plan of action with you?	23	19	39	17	10	3.25	1.385
		21.29%	17.59%	36.11%	15.74%	9.25%		

Based on the above CARE questionnaire, the responses received from the patients ($n = 108$) have been described above (Table 5.2), in descriptive statistics customs along with the frequency, percentage, and standard deviation among the responses. The detailed analysis of the CARE questionnaire items' responses is as follows:

When the patients of Sir Sunderland were asked about being made to feel comfortable by their doctor during the consultation time, it was strongly agreed upon by the majority of 65 respondents (60.18%) and agreed upon by an additional 21.29%. Whereas 7 respondents were neutral about their experiences in this matter. 13 respondents, on the other hand, gave negative feedback, complaining that their doctor had neglected to ensure their comfort. About eleven percent of the respondents comprised of these individuals. Regarding doctors' reassuring attitude in this regard, 81.47% of respondents have positive opinions.

On examining the experience based on the responses regarding the doctors giving their patients enough time to express their problems during the consultation, it is seen that 57 patients, which represents 52.77% percent of the total respondents, exhibited full agreement that their doctors always give them time to express their concerns and problems. Similarly, 32.40% percent of the respondents also shared satisfactory experiences in this regard. It is clear from the responses that only two patients shared negative experiences in this regard, although 14 patients chose the neutral option.

When patients of Sir Sunderlal Hospital were asked about their doctors listening to them attentively during their consultation, the responses showed that patients were positively satisfied with their doctors in this regard. 61 out of 108 patients strongly agreed in this regard, and 26 patients agreed to it. Together, they account for almost 80.55% of those who completed the survey. Notably, out of 108 respondents, only 4 of the individuals displayed disagreement.

The tendency of the doctors of Sir Sunderlal Hospital to take an interest in their patients as a whole person, the analysis of the responses shows that 51 patients strongly agreed in this regard and 27 patients agreed to it. Together, they account for 72.22% of those who took part in the survey. Notably, 14.81% of respondents in the survey chose a neutral stance in this regard. Whereas a total of 14 respondents expressed negative responses, which accounts for around 12.95 percent of the respondent population.

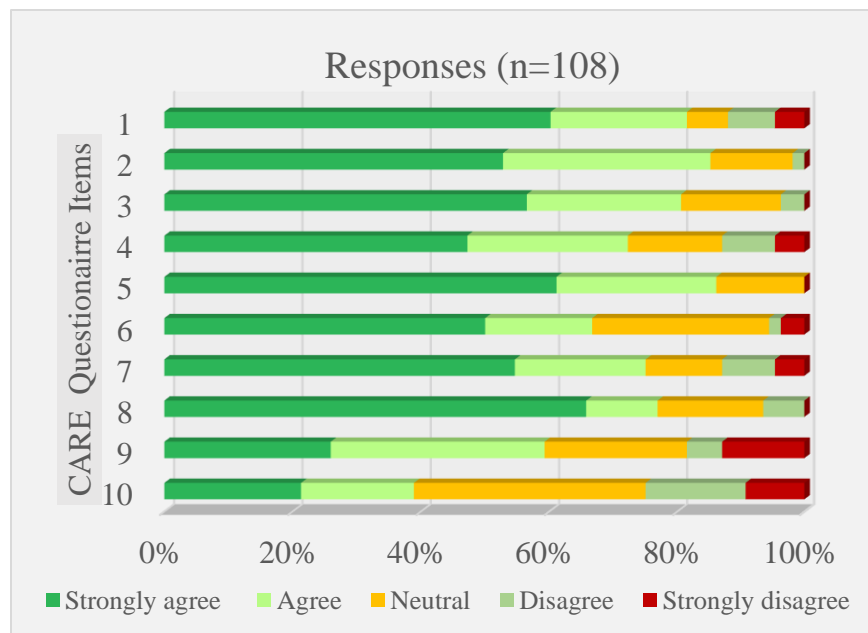
When asked if their doctors fully understood their concerns, patients at Sir Sunderlal Hospital shared positive experiences. A total of 93 respondents (86.11%) responded affirmatively. It is noteworthy that none of the patients displayed disagreement, although 15 patients displayed a neutral stance on this matter.

Compassion and care are essential qualities for doctors, significantly enhancing the doctor-patient relationship and overall patient satisfaction. When asked about the inclination of doctors at Sir Sunderlal Hospital in this regard, 72 individuals (66.66%) gave an affirmative response. In contrast, 27.77% of patients stated a neutral impression about their experience receiving medical care and compassion. Out of 108 patients, only 6 patients around 5.55 percent of the respondents expressed their negative experiences in this matter.

According to the responses, 81 respondents, or 74.99% of the total respondents in this survey, strongly agreed to be encouraged by the doctors during the medical consultation. Only about 12.95 percent of the respondents had given negative feedback regarding this question.

When patients were asked whether they believed that the doctors at Sir Sunderlal Hospital explained things clearly, the majority of respondents expressed satisfaction with the doctor's ability to communicate instructions and information clearly and concisely. Notably, only 7 out of 108 patients of the survey respondents reported disagreement.

Table 5.3. Frequency of Responses



We questioned the patients if their physician assisted them in developing a disease-coping strategy. According to the responses, 36 individuals were satisfied with the doctor's approach in this regard, and 28 strongly agreed with it. However, it should be mentioned that 18.51% of the respondents disagreed with this assertion based on their own experiences.

While probing about how the doctors at the Sir Sunderlal Hospital collaborate with patients to develop treatment plans, we got a diversity of answers in this regard. It was found that the number of patients who shared negative experiences collectively accounts for 24.99 percent of the total respondent population. In this sequence, 39 respondents reported neutral experiences.

Conclusion and Recommendation

In medical settings, the therapeutic relationship between the doctor and the patient is solely based on the foundation of trust and cooperation to ensure patient-centered care and better health outcomes. The data from the present study conducted at Sir Sunderlal Hospital reflects a generally positive satisfaction level with some diversity in experiences. It assures us about the empathetic behaviours of the doctors during their consultations with their patients. The agreement among the responses collected from the respondents varied, from 0.725 to 1.385 (Standard Deviation), indicating a high degree of satisfaction with their doctors' sympathetic interactions during consultations. This indicates a strong perception of effective communication and support within the healthcare setting of Sir Sunderlal Hospital. Based on the evaluation of the level of empathetic behaviour of the doctors at Sir Sunderlal Hospital towards the patients, it can be said that in most cases, the doctors of Sir Sunderlal Hospital try to humanize the therapeutic relationship by focusing on the patient's emotional needs and comfort preferences. It further increases the patient's satisfaction with the medical consultation and thus also improves their adherence to the treatment plan directly and indirectly. The current study's generalizability may be limited by the fact that it was limited to patients in a single institution. It is advised that larger sample sizes and a variety of hospital experiences be included in future study projects.

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