

Cancer Diagnosis Disclosure: What is the Right Thing to Do?

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Dear Editor,

In Iran, disclosing the diagnosis of cancer to patients and their families is very different compared to other countries. As a surgeon, I was always being forced to do against the teaching that I had learned and it was bothering me. In Iran, the last person to be notified of cancer treatments and prognosis is the patient. Sometimes the patient may undergo surgery, chemotherapy and radiation but does not know that s/he has cancer. In other words, the patients and their families prefer not to be made aware of this incurable disease; they prefer to only tolerate the treatment difficulties and dislike involvement with psychological matters. I have always wondered about these cultural differences which may lie in our attitude towards death. In Iran, death is an event whereas in the West death is a part of the life cycle process. Another reason may be the type of family and community relationships that exist. In Iran, the patient's family and friends follow his treatment and related costs, thus they are involved in the decision making. In the early years of treating patients,

I attempted to do as I was taught and to explain a patient's condition to him, but as my first experience was enough, I decided to do as my colleagues and mentors do and not inform the patients directly of the diagnosis. Instead I decided to consult with their families and make decisions. The patients, when informed of the cancer diagnosis, suffer from mental stress and because they are aware that cancer is incurable, this can interfere with the healing process.

One day in my clinic, I had seen all of my patients and was ready to leave. At this time, four people, two young educated men and a middle-aged woman who were escorting an old man, came into my room. The old man began to explain his medical history and pleaded with me to tell him the diagnosis. Meanwhile, the elderly man's two educated children pretended that their father was unaware of his esophageal cancer. After seeing the insistence of the patient and his family, I told the sick man that "treatment should be done. Why is it necessary to exactly know the problem? I and your children will

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try to do the best possible for your health.”

However, his answer was shocking: “It is my life. It is my right to know how lucky I am and how much time I have. In fact, at this time I feel that everybody is hiding the fact of my illness from me”. I did not want to go against the wishes of the sick man. His children were quietly talking and playing dumb to show me not to tell him about the fact about his disease, but the patient was asking me to inform him of his disease condition.

I made my decision, looked in his eyes and did not care if his family reacted. “As you may have noticed, there is a mass in your esophagus and sampling showed it is not good. Fortunately, we are able to treat it. To prevent the progress of the disease, you will need to have chemotherapy and surgery”.

The patient asked if he had cancer, for which I answered, “yes”. The elderly patient asked, “If I undergo these treatments, how lucky am I to be in a good condition (how much time do I have)?”

It was a good question. The answer to this question consisted of a review of his clinical data by me. I said: “In this phase, out of ten people who undergo full treatment, at least three will live more than five years. Of course, your cardiologist should also give us the permission for surgery”. His eyes sparkled and asked: “If he does not allow it, what will happen?”

I said: “It is a slightly difficult condition; you can have chemotherapy and radiation therapy instead of surgery”.

The patient asked, “How long does it take till I die?....”

I replied, “Well, naturally we have less chance, I can not exactly say that...six months or one year. I cannot really say.”

His face changed from sadness to joy and it was as if someone received an award: “Dear doctor, you know death is the truth of life. I’ve never seen anyone who can evert death but it is important how one dies. Last year I had a stroke and always felt that I would never be discharged from the CCU. I was asking God to give me another chance to live. I thought that it was good if people knew when and how to die. But I knew that it was not possible because God even did not give this power

to Prophet Solomon. However, now you say that... It means God has answered me...God already heard my voice...and now I know how much time I have...”

I did not know what to say. I was no longer hurt from the blaming eyes of his family. I just looked at the elderly man and attempted to make him feel that I would be with him and help him, regardless of what decision he made.

He said: “If I do not want to treat my disease, what will happen to me?”

I explained slowly in his own language, the scenario of his disease leading to the end and the options that he had. He was listening and smiling. He said: “Dear doctor, I can see that God has given me the chance to live more than ten years the average life of an Iranian man and I did not notice that until now. I am thankful to you and if I need to see you again, I will return. Goodbye.” He shook my hand and left. Unlike his arrival in my clinic with sadness and fear, he left happy and determined. His family and, perhaps I, were quite confused.

I had no news from him until a few months later when one of his children, dressed in black, came to my office with flowers. He said that before he died, his father asked him to come and say thank you to me and express his appreciation. According to his son, the elderly man asked him to tell me his last words before his death. “Tell the doctor that he has shown me the meaningful days of my life...”

Conflict of Interest

No conflict of interest is declared.