Patients tell themselves Dr. Internet knows best

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By Bradley M. Tipler, MD [2]

My wife recently underwent some minor cryosurgery. She was sore that night, so she Googled the procedure. I found her frantically surfing the Internet. It says on all three sites I've read that the cryoprobe should be held in place for three minutes, off for two minutes, and then on for three more minutes. John froze mine for five minutes straight. I'm afraid he did it wrong.

D: "It says on all three sites I've read that the cryoprobe should be held in place for three minutes, off for two minutes, and then on for three more minutes. John froze mine for five minutes straight. I'm afraid he did it wrong."
Me: "You're right. He's only been practicing 20 years. If he didn't do it according to Google, he probably doesn't know anything."
D: "Oh wait. Here's a site that says you can do it either way. Okay, I feel better."

Medical knowledge via the Internet has become a double-edged sword in my life. I cannot count the number of times a week I search a topic at my workstation. It is amazingly useful. I also like it when patients come for a procedure with a basic understanding.

What bugs me is the patient who is adversarial and assumes we are on equal footing because he or she researched a topic for an hour on the Internet.
"Hi, I'm David Jones, an attorney from Richmond, and this is my father, David Jones Sr. He is here for a vertebroplasty."

I give my standard intro: "Let me explain the procedure and then try to answer any questions you folks have." "We've researched this pretty well on the Internet, so you can skip the explanation. But I do have some questions. Exactly how many vertebroplasties have you done?"
"I don't know."
"Really?" he replies.
"Yes. You asked 'exactly,' and I quit counting around 500."

Perhaps, at this point, two minutes into the interview, I am judging too hastily. But anyone who introduces himself as an attorney and then starts interrogating me based on his Internet research has pushed a lot of wrong buttons.
"What kind of cement do you use?"
"Bone cement, the same stuff they have been using on artificial joints for 30 years. Why do you ask?" I reply. "My understanding is different cements have different working times. And I wanted to confirm you use one with an adequate working time."
"What do you consider adequate?" I ask.
I am truly amazed. How does someone with absolutely no training, no experience, and no real knowledge decide if my technique is "adequate"?
From my perspective, questions like this serve only one purpose-intimidation. Jones Jr. is indirectly telling me that he has done his homework, and if something goes wrong, he will know why. My wife would say he is just trying to be sure I know what I am doing.
At this point, I wanted to tell young Jones where he should put a vertebroplasty needle and the cement injector.
But I try not to start procedures when I feel there is an adversarial or unpleasant relationship. We have to start with trust. I am human, and things can and will go wrong occasionally. So I spent about 20 minutes more than necessary reassuring the son that I was as capable as the "authorities" on the Internet. Fortunately, the vertebroplasty was successful.
I really like the Internet, but like so many things, I wish I could control it. When my six-year-old son..."
developed cervical adenopathy, my wife went to the Internet. For two weeks, she was convinced he had Burkett's lymphoma. I agreed that I would be worried, too, if we lived in Africa. That surfing trip turned a viral upper respiratory infection into several hundred dollars worth of serology studies. Dr. Tipler is a private-practice radiologist in Staunton, VA. He can be reached by fax at 540/332-4491 or by e-mail at btipler@medicaltees.com.

Disclosures:

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