

**Title:** Improving medical students' skills to counsel hypertensive patients

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**Context and Setting:** The curriculum of the College of Medicine, University of Lagos, Nigeria is a 6-year discipline-based program. Communication skills training which are fundamental for a successful medical career for both teachers and students, are not included in the curriculum nor in any other curricula in the medical schools in Nigeria.

**Why the idea was necessary:** The high prevalence of hypertension in Nigeria (20-25%) is associated with high morbidity and mortality. Complications have been linked in most parts to non-adherence to treatment and lack of adequate follow-up. Health information received from doctors is often full of technical jargon, above patients' levels of comprehension, and delivered in a threatening manner. This may be due to lack of formal instructions in communication skills. The aim of this study was to improve the ability of medical students to effectively counsel hypertensive patients, and consequently provide evidence to the school's curriculum committee for the importance and possible inclusion of communication skills training in the curriculum.

**What was done:** A needs assessment survey revealed that over 90% of the students wanted formal training in communication and counseling skills. Two groups (intervention-25 and controls-34) of year-5 students (59 of 63) rotating through the department of medicine for their 13-week senior clerkship participated in this study. Five 90-minute training workshops were organized for interested faculty members (3), senior registrars (5), registrars and house officers (7) using materials developed for students' training (lectures, videos and role play) and scenarios developed for an OSCE. The intervention group had one hour lectures on communication, counseling skills, and theory of behavior change and video demonstration of these skills. This was followed by four 90-minutes sessions of role play where each student had the opportunity to be a counselor, counselee and feedback reporter. Trained faculty and senior registrars acted as preceptors during these sessions. The control group received no formal instructions. Pre and post-rotation evaluation for both groups was done using MCQ and four 5-minute OSCEs. The trained registrars and house officers acted as SPs during the OSCE. Feedback from the intervention group was collected at the end of the post rotation OSCE.

**Evaluation of result and impact:** There was significant improvement in the trained students' post-rotation MCQ scores, ( $p < 0.0001$ ); overall OSCE, ( $p < 0.0001$ ) and the four focus areas/ OSCE stations: general communication skills ( $p < 0.0001$ ); counseling on hypertension ( $p < 0.0001$ ); counseling on adherence to medications ( $p < 0.0001$ ), and negotiating a management plan ( $p = 0.01$ ). The post rotation MCQ and overall OSCE scores were significantly higher in the intervention group than the controls,  $p < 0.0001$  and  $< 0.0001$  respectively. The students' feedback clearly indicated strong support for incorporating these workshops in other disciplines as well as focus on additional disease entities, introducing them early in their training, and involving faculty and residents from other departments. Students also reported deficiencies in the communication styles of their consultants and residents. Faculty and residents who participated in these workshops

reported an improvement in their interaction with patients using acquired skills. These results provide convincing evidence for inclusion of formal instruction in communication skills in the school's curriculum and for faculty development in this area.

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