



CHIROPRACTIC (GENERAL)

When Patients Lie (Bribe or Flatter)

John Hanks, DC

Recently, a new patient told me about what I thought was a novel twist on the doctor-patient relationship. She felt she had to lie to her DC to discontinue her treatment. Her narrative went like this: She has a history of chronic, intermittent neck pain and headaches, and went to a chiropractor who was in her neighborhood. She had never been to a DC; Dr. Kelly was enthusiastic and professional. The treatment plan was aggressive: many visits over 3-4 months. But that was not the problem.

"I went faithfully for two months, about 20-some visits, and did not improve at all," she explained. "I would have continued, but it started getting expensive and I didn't feel any better."

So, why was she in my office? "I just wanted another opinion," she said. "I don't know if chiropractic can help me or not! Dr. Kelly was great ... so energetic and passionate, and seemed concerned about her patients. But she never referred me for any tests or for another doctor's opinion. I just couldn't bear to disappoint her by telling her I wasn't getting any better, and see her big smile fade. So, I told her I was cured. I lied. Dr. Kelly wanted me to come in as a 'wellness' patient, but I put her off and said I would get back to her. I didn't know how else to do it."

With some research, I found out this tactic by the patient is not all that rare. Bill Morgan, DC, wrote a fine description (*ACA News*, May 2012) of some of [the reasons](#) patients lie to their doctors. He noted, "Patients may be motivated to have their doctors think they are more disciplined than they really are." He added that patients may exaggerate symptoms to get an appointment sooner or to get diagnostic tests such as an MRI. They may want to acquire secondary gain, such as in worker's compensation or personal-injury cases, or make their medical history look more "rosy."



Dr. Morgan also referenced a WebMD survey of 1,500 respondents, 45 percent of whom admitted lying to their physicians for various reasons, paramount among them the desire to avoid judgment by the doctor. Few of us want to confront or disappoint our personal physician, especially if we have had a relationship for some time. Who wants to argue with any doctor?

The results of surveys I have read indicate patients will fib more often about the amount of exercise they do or don't do, and how much they weigh. One researcher found many patients will exaggerate when it comes to the exercise question because they are *hoping* to do more exercise in the future, and of course this "saves face." But concerning the weight question, primary care physicians know there is no question at all if the patient is simply asked to step on the scale.

A visit to the dentist may be postponed not just because of the fear of pain, but also by the shame of "discovery" of the poor dental hygiene habits of the patient. "Yes John, after examining your teeth, it's evident you are lazy and undisciplined!"

I'm not sure what we expect as doctors when we ask patients how much alcohol they drink or how many cigarettes they smoke, let alone if they take addictive or illegal drugs. If they take painkillers such as OxyContin, will they level with me about how many pills they take?

I live in a state that has medical and recreational marijuana available everywhere. What answer will I get from the elderly widow, Ms. Kopopkins, if I ask her how much she uses it for her chronic pain? "Yes doctor, I get high every night, and on the weekends when my boyfriend comes over, we get totally silly!" I'm not sure I want to know that.

Some things just seem to be going too far in the case history, and could encourage patients to lie. A pediatrician's medical assistant told me the HMO they work for forces them to ask every new child's parents if they have firearms in the house and whether they are locked up. I understand the concern that might prompt this question, but really - where do these types of questions stop?

"When your little girl plays in her sandbox in the back yard, do you have her wear a helmet? Do you let your son run while carrying a sharp stick?"

When it comes to reporting the medicines we take, truth is the best policy. Patients should be aware that when it comes to meds, some drugs do not play well with others. One story I read was told by an ER physician who treated a young man who had broken his wrist that day. Because of the pain, Vicodin was prescribed, but the patient failed to tell the doctor he was taking Xanax for anxiety. Apparently this was **not a good combination**, since the patient spent the next two days in a paralyzed stupor. A mental health provider told me patients have died from respiratory failure due to this drug interaction.

Untruths can be unfortunate, but what about bribery? Just like my mother used to leave some Christmas cookies for our postal letter carrier, patients sometimes bring me such gifts during the holidays. Are these simple gifts of appreciation ... or innocent bribes to encourage more attention from me concerning their chiropractic care? I don't care either way, as long as I get cookies - and no fruit cakes. (By the way, in China today, it is clear the doctor often actually expects a bribe. A cable show, "Inside China," revealed that if you need a particular antibiotic in the People's Republic, you will need to buy it with a "bribe" to your doctor. Look it up.)

So, telling "fibs" or "bribing" your doctor is not uncommon. Then there's flattery. I practice in a big city, so I have treated patients from everywhere in the world. But none flatter me more or bring me more gifts than immigrants from countries with a history of totalitarian governments. A woman from an eastern European country explained it to me clearly: "In my country, doctors are paid very little, have no modern equipment, and have little access to the best medications. Therefore, it is important to get the doctor to like you, especially if you have a life-threatening disease."

When I have been a patient, I've had the same fear of the doctor's "authority," even when the doctor is my friend. Will I lie, bribe or flatter to enhance my control over what treatment decisions might occur? What would you do? And how would you respond, as the treating doctor, if it happened to you?

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