

COMMUNICATING THROUGH CHAOS

Strategies for effective care conversations...

By Katelyn Carey, BSN, RN

Too many of us know how it feels to hear the words, “you have breast cancer”, followed by what one friend describes as “a *Charlie Brown* special, where all the words spoken by adults sound like meaningless mumbles”. There’s a reason our processing is instantly sidelined by those 4 little words. And understanding the reason helps us find the solution, both in the moment and during the many stages of recovery.

I have been a nurse in trauma/ acute care for about 20 years, and one of my roles is teaching new doctors and nurses how to communicate effectively in traumatic situations. One of the analogies I liked to use is this...

Imagine for a moment that you have just been in a car accident. You are crawling out of the wreckage when I pull up with the ambulance and rush to your side. I bandage your injuries and hand you a bunch of brochures, asking “which of these doctors do you want to do your surgery, and what hospital do you want us to take you to?”

This is a ridiculous scenario. If I did this I would be the world’s worst medic. But why? I helped you and gave you the information

you needed to make decisions, right? But information does no good if the person on the receiving end can’t process it. And whether we are dealing with a situation of physical trauma or emotional/ mental trauma, the same things happen in regards to processing ability and mental focus.

Our brains are beautifully designed to handle the types of threats that as human beings we have been dealing with for thousands of years. In the presence of danger signals that may represent a life-threatening situation, our brains take over to react quickly and evade the threat. In other words, our hindbrain (or amygdala) takes over to ensure that we quickly and efficiently move to flight, fight or freeze...and hence respond to the danger without needing to consciously think about it. This is a survival response, like pulling your hand away from a hot burner before you consciously realize it’s hot.

One problem. Our biggest threats to well-being are rarely physical threats anymore, and our brains haven’t caught up to a breast cancer diagnosis being different than a wild bear. So we hear those threatening words (for ourselves or a loved one), and our thinking



brain (the pre-frontal cortex) is literally yanked offline in what many refer to as an amygdala hijack. What does this mean for us, and how do we make it better?

Modern day cognitive science has spent a lot of time in studying trauma responses and mental processing. I’m not going to dive deep into all the science right now, but I am going to give you 4 tips that will help you to navigate through stressful communication instances effectively.

Align your Expectations- it is not your fault that information gets rapidly muddled and overwhelming in the midst of stressful times. In actuality, that is your brain functioning in a way designed to protect you. But if you know this, you can plan around it.

Bring a binder to your appointments. In this binder, put all the material you receive. It will help to have everything in one place. Take notes during conversations with caregivers. Better yet, have a support person you trust go with you and take notes so you can concentrate to your best ability.

Make use of your care team, especially a Nurse Navigator or Patient Navigator, to help you keep track of and process important information.



1. Expect that you will not process information as well when you're stressed
2. Get a binder to keep track of all materials and notes with doctor visits
3. Write down your questions, and if you don't understand the answer, ask again
4. Make sure important information is available to look back at - take notes, get handouts when available
5. Work with a Nurse Navigator, they are a key resource in helping you keep track of and process the important stuff

partner the information you are receiving with emotional reassurance and repetition this will help you past the barrier between amygdala and prefrontal cortex. This can be helped by a caregiver like a Nurse Navigator, or through a care partner (friend of family member) that you choose to help you through these times.

Work with a Nurse Navigator

if you can. Having these folks helping out is like going down a river with the captain who has sailed it hundreds of times before, instead of launching off on your own without maps or sailing experience. They are a compassionate source of information.

Write down your questions and have them with you when in conversation. If the answer doesn't make sense, have the person rephrase it or ask for additional clarification. Do not just let it drop. Especially when talking with medical caregivers, you are the foreigner trying to understand a language that is native to the other person. They won't know you didn't understand unless you tell them, and it is their job to communicate effectively.

Be okay needing repetition, the amygdala is a feeling brain and not a thinking brain. If you can

There are other things you can do to help avoid or exit an amygdala hijack state. These are things that call attention to your body, and help you feel calm and safe. This can be anything from taking a few deep breaths, to full mindfulness and meditation exercises. And we'll branch into more of them in upcoming articles. In the meantime, be kind to yourself... your brain is trying to take care of you.

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Writer Katelyn Carey is a nurse educator and author who specializes in trauma-based communication and education. Using cognitive science and 20 years experience in ER, Hospice, and acute care, Katelyn teaches communication strategies and recovery tools that are research based and trauma informed.

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