

Power up your patient education with analogies and metaphors

These creative teaching tools can make education more effective

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Quality patient education is essential for comprehensive health care and will become reimbursable under health-care reform in 2014. However, it's difficult to provide effective education when time for patient interactions is limited. You can

enhance your instruction time—and make your teaching more memorable—by using the techniques of analogy and metaphor.

Powerful tools

Analogy and metaphor are figures of speech that have been used since the time of Aristotle and Plato. (See *Comparing analogy and metaphor*.) Why are they so powerful for patient education? Because analogy and metaphor can make abstract concepts real, helping patients understand why they are ill and how suggested changes will help correct underlying causes.

Analogy and metaphor create a form of cognitive “scaffolding” on which patients can hook new material to information they already understand. Educational theorist David Ausubel suggests that learners (such as patients) require frameworks into which new information can be assimilated. An analogy or metaphor can act as an anchoring concept or an organizer for providing such a framework.

Research supports that analogies and metaphors can improve communication with seriously ill patients, such as those with advanced cancer. Casarett and colleagues conducted a cross-sectional study of audio-recorded conversations between patients and physicians. The results demonstrated that analogies and metaphors improved patient understanding and communication.

Using analogy and metaphor effectively

How can analogy and metaphor be used in patient education? The uses are limited only by the clinician's creativity.

A primary care practitioner uses analogy to discuss good self-care practices. She tells patients that persons with quality self-care



drive their bodies like Cadillacs while self-neglecters drive their bodies like jalopies.

Even bad life circumstances can be used educationally. A psychiatric colleague uses the metaphor of a toaster: Acute illness is like a toaster. You put something in (the patient) and it comes out better than it was before (in terms of resilience). An oncology specialist colleague discusses the role of heredity (genetic predisposition) and environment in cancer development: Genes load the gun; environment pulls the trigger.

A metaphor for chronic wound healing is the light switch: The prolonged inflammatory process of delayed healing is similar to a light switch stuck in the “on” position. Interventions, such as debridement and other advanced modalities, aim at switching the light (inflammation) off. Another colleague specializing in GI disorders likens constipation to “not taking the garbage out enough.”

In a relatively recent systematic review of effective teaching strategies and methods of delivery for patient education, the analysis of published research studies found that the best patient education strategies were culturally appropriate, patient specific, and structured. Analogy and metaphor can address all three characteristics if well planned.

The literature also suggests that Humor (used appropriately) can augment the use of Analogy and Metaphor and allow teachers to HAM it up for better learning. Humorous analogies or metaphors that are relevant to patients’ interests offer maximum effectiveness. The vividness and active engagement that typify funny metaphors and analogies have the capability to instruct in ways beyond words alone. Laughter and humor may allow the patient

Comparing analogy and metaphor

Analogy is a figure of speech that draws attention to a likeness in order to argue that other attributes of the comparison are similar. It involves comparing two different things with some similarities. When a clinician tells a patient that this treatment may make him feel like he’s been kicked by a horse, the provider has used analogy.

Metaphor is a figure of speech that suggests a person or thing *is* something else based on some similarity between the two. The approach allows transfer of ideas from one concept to another.

Though metaphor and analogy are often used interchangeably, they differ. Analogy focuses on the expression of similarities while metaphor depicts association between two dissimilar phenomena. When someone says violence is a societal cancer, he or she is using metaphor. When using analogy, a clinician may say violence attacks a community like cancer cells attack the human body.

to experience a “refreshing pause” cognitively and help “ha-ha” become “aha!”

Metaphors and analogies can describe the education or learning process itself. The clinical educator helps the patient “plant seeds,” “peel away the layers,” or “switch on a light bulb.” The educator can capture boring, lifeless lecture material and “bring it to life.” This outcome is particularly helpful in more abstract areas, such as mental health issues and science concepts.

Optimal outcomes

Understanding quality patient education is important for optimal patient outcomes. Techniques such as analogy and metaphor can help patients learn more effectively and create a positive, relaxed learning environment. More importantly, metaphor and analogy appeal to multiple learning senses and can instruct in ways eclipsing the limits of words. ■

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