

# **The Patients and Practitioner Relationship in a Traditional Medicine Hospital in Mandalay, Myanmar**

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The social and cultural distance between patients and health care providers has been mentioned as a crucial factor affecting patient satisfaction levels with respect to the provision of health services, and also in terms of patients' level of compliance with medical treatments and advice. Previous social studies have shown how different ideas can form between medical doctors and patients, and also how traditional medicine is embedded in the cultural beliefs of different societies. Rather than assuming a congruence of ideas between the doctor and patient in a traditional medicine care context, this study examines the relationships that have between patients and traditional practitioners in the out patients department of a traditional medicine hospital in Mandalay, Myanmar. Specifically, it aims to examine the types of communication and the interactions that have developed in terms of building trust and confidence between the two parties.

Based on a qualitative research design, we interviewed four patients who are undergoing medical consultation and receiving treatment from the out-patients department of a traditional medicine hospital. These four patients, who differ in terms of their ages, educational levels and socio-economic statuses, were interviewed regarding their thoughts on the treatment and care they are

receiving. We also interviewed one traditional medicine practitioner for her thoughts and on the patients and their treatment plans. In order to understand the interactions taking place between the patients and the traditional medicine practitioner, observations were also used as part of this study's data collection activities.

The study found that three communication factors arise during the consultation process, these being emotional, cultural and intellectual factors. The emotional and cultural aspects are quite obvious, as expressed by their satisfaction of otherwise regarding the levels of sympathy received during treatment. All four patients here, through varying by age and educational background, expressed satisfaction at the practitioner's behaviour and the sympathetic nature of the treatment received; however, the patients did mention that they are worried about their disease, the practitioner's level of knowledge and the efficacy of the treatment provided. Such views mainly stem from the patients not receiving enough information about the causes of their disease and the treatment plan put in place by the practitioner.

As a result, we suggest improving the intellectual and technical aspects of the communication used within the traditional medicine consultation process, plus believe it is critical to maintain a high level of sympathy within treatment and to strengthen trust during consultation, in order to promote the development of a good, strong relationship between the patients and the traditional practitioners.