DOI: https://doi.org/10.36489/nursing.2021v24i278p5902-5911

Ethical aspects related to the effective communication process during pandemic **COVID-19: integrative review**

ABSTRACT | Objective: Investigate the production of literature on the communication of the health team with patients and families during the COVID-19 pandemic. Method: This is an integrative review carried out in the VHL, PubMed and Scopus databases, using the health science descriptors (DeCS): Coronavirus, Bioethics and Communication. Results: 139 articles were obtained, with 6 articles selected for analysis of this review. The most common findings were: challenges in the communication process, especially among the most vulnerable populations, such as oncology, palliative care and intensive care unit patients; at the other end, strategies aimed at mitigating this problem, such as alternative methods of communication, which include a video component. Conclusion: Effective communication was compromised during the COVID-19 pandemic, requiring the creation of protocols based on ethical and bioethical parameters according to the values of each society.

RESUMEN | Objetivo: Investigar la producción de literatura sobre la comunicación del equipo de salud con pacientes y familiares durante la pandemia COVID-19. Método: Se trata de una revisión integradora realizada en las bases de datos BVS, PubMed y Scopus, utilizando los descriptores de ciencias de la salud (DeCS): Coronavirus, Bioética y Comunicación. Resultados: Se obtuvieron 139 artículos, con 6 artículos seleccionados para el análisis de esta revisión. Los hallazgos más comunes fueron: desafíos en el proceso de comunicación, especialmente entre las poblaciones más vulnerables, como pacientes de oncología, cuidados paliativos y unidad de cuidados intensivos; en el otro extremo, estrategias destinadas a mitigar este problema, como los métodos alternativos de comunicación, que incluyen un componente de video. Conclusión: La comunicación efectiva se vio comprometida durante la pandemia de COVID-19, requiriendo la creación de protocolos basados en parámetros éticos y bioéticos acordes a los valores de cada sociedad.

Palabras claves: Coronavirus: Comunicación: Bioética.

Keywords: Coronavirus; Communication; Bioethics.

RESUMO | Objetivo: Investigar a produção de literatura sobre a comunicação da equipe de saúde com pacientes e familiares durante a pandemia da COVID-19. Método: Trata-se de uma revisão integrativa realizada nas bases de dados BVS, PubMed e Scopus, utilizando os descritores em ciências da saúde (DeCS): Coronavirus, Bioética e Comunicação. Resultados: Obtiveram-se 139 artigos, sendo selecionados 6 artigos para análise dessa revisão. Os achados mais comuns foram: os desafios no processo de comunicação, principalmente entre populações mais vulneráveis, como a oncologia, cuidados paliativos e pacientes de unidades de terapia intensiva; na outra ponta estratégias que visam mitigar esse agravante, como métodos alternativos de comunicação, que inclue um componente de vídeo. Conclusão: A comunicação efetiva ficou comprometida durante a pandemia da COVID-19, sendo necessário a criação de protocolos com base em parâmetros éticos e bioéticos conforme os valores de cada sociedade. Palavras-chaves: Coronavírus; Comunicação; Bioética.

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Received on: 11/30/2020 Approved on: 02/02/2021

INTRODUCTION

he COVID-19 epidemic began in January 2020, when, in a short period of time, it reached several countries, being considered a pandemic on March 11st, 2020 by the World Health Organization (WHO). The high spread of the virus, the mortality rate ranging from 2 to 15%, the high number of cases and the rapid evolution of severe cases, led to a sharp increase in hospital admissions, the use of intensive care resources and deaths. 1

Effective communication has become a challenge in the pandemic due to the sanitary measures put in place to

control the spread of the virus. However, strategies are needed to ensure that international patient safety goals are developed. ² Another challenge has been to preserve the principles of bioethics, especially when it comes to social isolation where the principle of justice can limit that of autonomy, but it has to be agreed that utilitarianism must be applied, that is, to do good for the greatest number of people, and this involves sanitary restrictions and measures. 3

Communication involves the relationship between one person and another, whether face-to-face or virtual. In this sense, it is possible to keep patients in nursing or intensive care environments with their own telephones, and the use of the WhatsApp application is suggested to enable visits, it is still necessary to set up a communication team compatible with the demand for care and being a reference for the patient. 1

The communication of bad news, especially the communication of death, can become necessary and frequent in the COVID-19 scenario and requires an individualized flexibility of the circumstance, as the way in which the information is transmitted can influence the way of coping with the communicated content. 4,5

The Federal Council of Medicine, through Opinion No. 14/2017, recognizes WhatsApp as an important communication tool between doctors on a private basis for the transfer of confidential information inherent to the clinical status of patients to send data or ask questions, the platform can also be used for communication between doctor and patient. 6

Thus, the research is justified by the need to survey what has been studied and carried out regarding communication with patients and family members during the pandemic in view of the isolation of users, since effective communication leads to safe, quality and with reduced costs. In this sense, considering the distance that family members had to obey, leaving their loved ones in the care of the hospital team, this research aimed to answer the following question: what scientific productions point out about the effective communication of the health team, patients and families during the pandemic by the new coronavirus?



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METHOD

The study is an integrative review, the choice of theme allows the analysis of relevant research by conducting a search and critical assessment of the main evidence. This method seeks the exhaustion of studies related to the topic investigated through the justified selection of studies, using specific inclusion and exclusion criteria. The integrative review

provides the synthesis of knowledge and the applicability of the results of significant studies in practice. 7,8

The research followed the following steps: identification of the research topic and elaboration of the research question; establishment of inclusion and exclusion criteria for studies; evaluation and interpretation of results and presentation of data in the structuring of an integrative review. 9

In the first stage of the research, we sought to define the topic to be investigated, and for this, the following research question was elaborated: What scientific productions have shown about the ethical aspects related to effective communication of the health team, patients and families during the COVID-19 pandemic?

The inclusion criteria were the studies available electronically, in Portuguese, English or Spanish and that addressed the theme of the communication process during the COVID-19 pandemic. Year criteria were not established for publications because the study theme is referring to the CO-VID-19 pandemic, with all studies published in 2020.

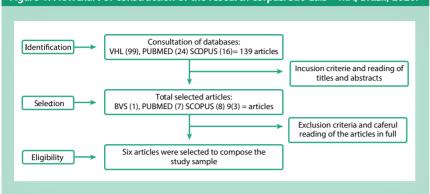
The search took place in December 2020, in three databases: PUB-MED where 24 articles were found, BVS where 99 articles were found and SCOPUS where 16 articles were found. The terms used to survey the articles were extracted from the Health Sciences Descriptors (Decs) and the Medical Subject headings (MeSH), using a combination of the following descriptors: "bioethics", "communication", "coronavírus" with the association of OR and AND Boolean descriptors.

The selection was carried out in 3 steps: the first was a broad search for articles based on the combination of descriptors and application of the inclusion and exclusion criteria, identifying a total of 139 articles.

In the second phase, all the material collected was submitted to the bibliographic manager Mendeley; the tool enabled the exclusion of 25 duplicate articles. Subsequently, a critical and reflective reading of the titles and abstracts of 114 articles was carried out. After this phase, 19 articles were selected for thorough and complete reading.

In the third stage, called eligibility, an instrument was built in the form of an electronic spreadsheet in Excel that guided what information would be extracted from the selected studies, in order to gather and synthesize the information collected in the articles, the instrument was filled out with the following information: title, author, year of publication, journal, research objectives and results. Then, 6 articles were selected that constituted the research corpus, as shown in Figure 1.

Figure 1. Flowchart of construction of the research corpus. São Luís – MA, Brazil, 2020.



Source: Research data.

Article title	Authors/ Year	Database	Results
Compassionate communication and end-of-life care for critically ill patients with SARS-CoV-2 infection	Ángel Estella, 2020	VHL	Close communication allows families to see their loved ones and extends communication between healthcare professionals, patients and their relatives. It is still possible to adapt public health standards to the epidemic situation
Perspectives on oncology-spe- cific language during the 2019 coronavirus disease pandemic: a qualitative study	Laila A. Gharzai, et al. 2020	PUBMED	In this study, it was possible to identify the health communication needs and develop an evidence-based communication practice guide for cancer care during the COVID-19 pandemic
Role of nurses in providing comprehensive communication, prognosis and palliative care during the COVID-19 pandemic	Koch A, et al, 2020	PUBMED	Nurses can become active and confident advocates for patients with terminal illness, and are well placed to assess patients and engage in care goals and end-of-life conversations. Early and comprehensive discussions are essential during the COVID-19 pandemic, because this population is at high risk for complications from coronavirus.
Early Care Planning: Promoting Effective and Aligned Commu- nication in Elderly (ACP-PEACE): The study protocol for a pragma- tic wedge trial in elderly cancer patients	Lakin J. R, et al, 2020	SCOPUS	The work combines clinical training to respond to emotions and handle difficult conversations with decision-making videos for patients. They have the potential to add to a growing literature reporting major systematic ways to improve PCA for older adults with cancer during the COVID-19 pandemic.
Disability, ethics and health care in the COVID-19 pandemic	Sabatello M. et al 2020	SCOPUS	Responses to the pandemic must be governed by legal standards, principles of distributive justice and social norms for the protection of vulnerable populations - essential public health commitments - to ensure that inequalities are not exacerbated and must provide a pathway for improvement to ensure equitable access and treatment in the future.
Disability, ethics and health care in the COVID-19 pandemic	Murray P. D; Swan- son J. R, 2020	SCOPUS	Mental health professionals should work with families, religious people, palliative care teams and the ethics committee. Denying the kangaroo method to parents and newborns its benefits seems unwise, especially if PPE is available.

RESULTS

The description of the articles that made up the integrative review is shown in Table 1, containing the title, author, year of publication, scientific database responsible for indexing and the main results that brought contributions to answer the study question and two categories emerged topics: The process of effective communication during the COVID-19 pandemic and Strategies to improve communication during the COVID-19 pandemic.

The communication process during the COVID-19 pandemic

The disease caused by the new coronavirus (Covid-19) is currently a worldwide public health problem. Many oncologists are having challenging conversations with their patients about how the COVID-19 pandemic is affecting cancer care and may want evidence-based communication guidance. 10

One study identified specific oncology scenarios related to COVID-19 where communication was challenging, in most scenarios the patient's reactions involved anger, fear and anxiety. Patients and their families must, therefore, receive accurate information from the onset of the disease and be made available for emotional, spiritual and social support throughout the course of the disease and after the patient's death, from the monitoring of grief. 11

Another study confirmed that it is important for palliative care nurses to promote and maintain early and comprehensive discussions during the COVID-19 pandemic, especially for populations that have a higher risk of complications from the coronavirus. The isolation of patients in hospitals and the restrictions on visits impose profound changes on families in the way of caring and conceiving of care for their loved ones, making it difficult to understand the finiteness of life and the changes to be faced by the death of someone close. 11,12



Many oncologists are having challenging conversations with their patients about how the COVID-19 pandemic is affecting cancer care and may want evidence-based communication guidance.



Strategies to improve communication during the COVID-19 pandemic.

One of the studies carried out proved that from an ethical point of view, restricting family visits to hospital environments is hardly understandable, regardless of the method of inclusion, the role of the family at the bedside, even if virtual, is of paramount importance. The authors further identified alternative methods of communication that include web-based video conferencing such as FaceTime and Skype and commercially available camera systems. 13

In another study, the authors sought methods and justification for a trial that aims to improve advance care planning for elderly patients with advanced cancer and the modified protocol in response to the changes brought about by the COVID-19 pandemic. The work combines clinical training to respond to emotions and handle difficult conversations with decision-aid videos for patients. 14

There is limited application of existing emergency planning frameworks with and for people with disabilities in the COVID-19 pandemic, it is necessary to explore concerns affecting the health care of people with disabilities and indicate possible solutions. Clinical measures and public health policies are essential to ensure that people with disabilities are included in planning future pandemic-related efforts. For the authors, the devastation caused by the COVID-19 pandemic raises challenging dilemmas in bioethics. 15

In addition, issues of social justice have plagued historically marginalized communities in the United States.13 Responses to the pandemic must be governed by legal standards, principles of distributive justice and social norms for the protection of vulnerable populations - essential public health commitments - to ensure that inequalities are not exacerbated and must provide a path for improvement to ensure access equitable treatment and treatment in the future. 15

DISCUSSION

In fact, the primary role of the communication process is to ensure the transfer of accurate and complete verbal information regarding the health care provided to the patient, and for it to occur efficiently, empathy between the members involved in the process, as well as the certification that the communication actually occurred, so the family feels secure in the professional conduct and in the care provided. ²

In a survey carried out, it was decided that the communication of patients' deaths would be carried out via telephone call, and the failure in professional training drew attention, it was observed that physicians are responsible for communicating 46,2% of the death news and only 7,7% reported that they participated in practical and efficient training on this topic. 16

To establish bioethical behaviors in the pandemic, it is essential to know the point of view of the family and the patient. With this in mind, a study developed a protocol of severity criteria for COVID-19 and included a consultation with the patient and family to clarify wishes and doubts regarding the end of life, raising the priority levels for this moment so suffered. 17

The pandemic has made health services reinvent alternative ways of passing on information, urgently implementing technological solutions for communication between patients and families, encouraging video calls between patients and their families



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and the use of immersive virtual reality to bring the experience of contact closer and promote quality health care. 16,18

CONCLUSION

It is clear that the interpersonal relationship with patients and families is an essential tool for the promotion of care, as it is the moment that allows the clarification of doubts with a simple and accessible language and provides opportunities to express their anxieties with the care team.

Bioethics provides means making difficult decisions, but this does not mean that bioethics imposes the decision. It is noticed that communication about the health status of patients was compromised, both with regard to this dialogue with the family and the patient. More guidelines need to be created to remedy this impediment based on ethical and bioethical parameters, chosen according to the values of each society.



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