Words Matter: Ways to Combat Stigmatizing Language in Patient Records

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What is Stigmatizing Language in the Medical Record?

Stigmatizing language in medical records refers to terminology or phrases used to describe patients or their conditions in a way that conveys judgment, bias, or negative stereotypes. This language often reflects societal stigma about certain health conditions or behaviors, such as mental illness, substance abuse disorder, chronic pain, diabetes, obesity, or disabilities.

For example, questioning a patient's credibility by labeling them as "dramatic" or "attention-seeking" or by implying that they are exaggerating their symptoms—can be particularly harmful in medical records. This kind of language undermines the patient's **trustworthiness** and **validity** as a reliable source of information about their own health, often leading to negative consequences for both the patient and the healthcare provider.

How Stigmatizing Language Impacts Patient Care

Words are powerful, and with the 21st Century Cures Act (Act) ensuring greater patient access to medical records, the language used in medical documentation carries more weight than ever. The Act emphasizes the importance of transparency, patient access to their own health data, and patient engagement in their care. In a broader sense, the Act, specifically its information blocking rule, has empowered patients to review their health information more closely and identify potential inaccuracies or issues they may want to amend. If stigmatizing language is used in patient records, it may not only harm individual patients but also affect how they are treated by other providers.

How to Reduce Stigmatizing Language in Medical Records

Medical providers can educate themselves on common best practices and guidelines for reducing stigmatizing language in medical documentation. These principles are widely acknowledged in healthcare literature and are supported by organizations such as the American Medical Association, National Institutes of Health, and Centers for Disease Control and Prevention.

To combat stigmatizing language in medical records, physicians can practice the following recommendations:

1. **Use Person-First Language:** Emphasize the person rather than their condition. For example, say "a patient with diabetes" instead of "a diabetic".

2. **Avoid Negative Descriptors:** Steer clear of words that carry judgment or a negative connotation. For instance, instead of referring to someone as "non-compliant", consider "a patient who has difficulty following a treatment plan".

3. **Avoid Labels and Assumptions:** Refrain from labeling patients based on their condition or behavior. It's more beneficial to focus on describing the situation, such as patient experiencing mental health challenges", rather than "mentally ill patient."

4. **Be Aware of Biases:** Recognize or reflect on any personal biases or preconceived notions you might have about certain patients or conditions. Biases can influence language choice and medical decisions, so be mindful to ensure you are treating your patients equitably.

5. **Provide Context Instead of Oversimplifying:** When documenting a patient's condition, provide more additional context to avoid oversimplifying. For example, instead of writing a obese, provide more context like "patient is working with a nutritionist and has a history of weight-related health concerns". This shows a more complete understanding of the patient's situation.

The American Diabetes Association, another patient advocacy organization, convened a task force to discuss language in diabetes care and education. They developed a joint paper that provides recommendations for enhancing communication about and with people who have diabetes. To learn more about their findings, access the article here.

Examples of Neutral vs. Stigmatizing Chart Notes

Stigmatizing Language	Neutral Language
Mr. R is a 28-year-old **sickle cell patient** with chronic left hip osteomyelitis who comes to the ED **stating he has 10/10 pain "all up in my arms and legs."**	Mr. R is a 28-year-old **patient with sickle cell disease** and chronic left hip osteomyelitis who comes to the ED **with 10/10 pain in his arms and legs**.
He is narcotic dependent and in our ED frequently. At home, **he reportedly takes** 100 mg OxyContin BID and oxycodone 5 mg for breakthrough pain.	**He is narcotic dependent and in our ED frequently.** At home, **he reportedly takes** 100 mg OxyContin BID and oxycodone 5 mg for breakthrough pain.
After 1 hour, the nurse documents: Mr. R is sleeping but easily arousable and **has been cussing at nurse. He refuses to wear his oxygen mask and is insisting that his pain is "still a 10."** His girlfriend is **on the bed with shoes on and requests a bus token to go home**.	After 1 hour, the nurse documents: Mr. R is sleeping but easily arousable and **seems distressed. He is not tolerating the oxygen mask and still has 10/10 pain**. His girlfriend is **by his side but will need to go home soon**.

Table 1: Neutral vs. Stigmatizing Chart Notes Vignettes
Casau, Armelle, and Mary Catherine Beach. Words Matter: Strategies to Reduce Bias in Electronic Health Records. Center for Health Care Strategies, October 2022.

Final Thoughts: Why Words Matter In Healthcare

The language used in medical records shapes perceptions, influences behaviors, and contributes to patient outcomes. To promote a more effective and collaborative approach to care, it's imperative medical professionals understand the role their documentation practices play in combating stigma in medical records. ◼

References

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