SUPPORTIVE CARE

SPIKES: A Framework for Breaking Bad News to Patients With Cancer

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SPIKES is an acronym for presenting distressing information in an organized manner to patients and families. The SPIKES protocol provides a step-wise framework for difficult discussions such as when cancer recurs or when palliative or hospice care is indicated. Each letter represents a phase in the six-step sequence. S stands for setting, P for perception, I for invitation or information, K for knowledge, E for empathy, and S for summarize or strategize. Breaking bad news is a complex communication task, but following the SPIKES protocol can help ease the distress felt by the patient who is receiving the news and the healthcare professional who is breaking the news. Key components of the SPIKES strategy include demonstrating empathy, acknowledging and validating the patient’s feelings, exploring the patient’s understanding and acceptance of the bad news, and providing information about possible interventions. Having a plan of action provides structure for this difficult discussion and helps support all involved.

The Intervention: Breaking Bad News

This type of discussion usually is quite difficult and uncomfortable for healthcare professionals to participate in. Often they have little preparation and experience in how to support the patient in a constructive, empathetic manner when delivering bad news. Having a prepared plan of action can help support all the participants in this difficult discussion.

The oncology team has four goals in breaking the news to M.J.: (a) learn what she already knows about the situation and determine her readiness to hear the news, (b) provide clear information tailored to her needs and desire to know, (c) provide empathy and emotional support, and (d) develop a treatment plan that takes her wishes into account (Baile et al., 2000).

A useful strategy for accomplishing these goals employs a six-step protocol for breaking bad news, known as SPIKES. SPIKES is an acronym for presenting distressing information in an organized manner to patients and families. It provides a step-wise structure for difficult discussions, such as when cancer recurs, or when treatment options have been exhausted and palliative or hospice care is indicated. Each letter represents a phase in the six-step framework (Back, Arnold, Baile, Tulsky, & Fryer-Edwards, 2005; Baile et al., 2000; Buckman, 2005; Finlay & Casarett, 2009) (see Figure 1).

The SPIKES Protocol

S = Setting

Respect and empathy for the patient is shown by choosing a setting which provides quiet and privacy. Pagers are turned off to vibrate and calls are held. Significant others are included in the discussion as the patient wishes. The person delivering the bad news demonstrates good listening skills and focuses his or her attention on the patient in a calm, engaged manner.

P = Perception

Before launching into a description of the plan of care with the patient and

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