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## FROM THE EDITOR

### The Importance of Sharing Health Decisions

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Illness and injury impact patients far beyond the physical or biological changes they inflict. They can strip patients of autonomy, present new or overwhelming information, and make the future even more uncertain. The pathogenesis of a particular medical condition may be the same among patients, yet the context of treatment is distinct since individual patients' preferences and goals differ. Often, disease and medical treatment require patients to take stock of their entire life—what they value, what they want from their care, and what they hope to achieve moving forward. As such, physicians must be able to take all these patient characteristics into account. This partnership demands more than merely a patient coming to a physician for help and the physician providing a service in return. Gone is the era in which physicians should not use their expertise to drag a patient towards a particular endpoint; physicians and patients should be partners, traversing a treatment path in tandem, both contributing to crucial discussions.

But how can patients truly receive care that is sensitive to their values and desires if they do not appreciate or feel included in important decision-making moments? Mounting evidence indicates that patients may not comprehend their diagnosis or treatment options,<sup>1,2,3,4</sup> that physicians define successful outcomes (for instance, the notion of "cure") differently than patients,<sup>5,6,7,8</sup> and that patients frequently have unmet communication or shared decision-making needs,<sup>9,10,11,12</sup> among other barriers. The decision-sharing process, unfortunately, is flawed and unsatisfying for many patients, even if physicians believe that shared decision making is being implemented.<sup>13</sup>

This theme issue of the *AMA Journal of Ethics* on the topic of sharing health decisions addresses these shortcomings. What happens, for example, when patients come to regret their treatment decisions, when patients misinterpret a clinical research trial as a novel therapeutic opportunity, or when adolescents and parents are at odds over the decision-making process? What does a proper model for sharing health decisions look like? How can we train physicians to more effectively incorporate patients into the decision-making process, and how do time constraints or new technologies affect decision making? Indeed, should every patient even be considered eligible for shared decision making? This issue will address these topics and more to synthesize discourse about shared decision making that is applicable to all medical specialties, adult or pediatric, surgical or nonsurgical.

Of course, a single theme issue such as this one cannot provide an all-encompassing overview of shared decision making and the ways in which it could be improved. But the hope is that these articles will serve as a reminder to clinicians to remain conscious of this vital practice during each clinical encounter. Reinforcing the need for decision sharing will help realize the goal of a patient-physician relationship that is open, trusting, and truly patient centered becoming a reality for ever more patients.

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