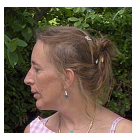


COMMENTARIO

The communication of uncertainty: the lessons of Ebola and Tzunami.



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Abstract

An enlightening article, recently published in the New England Journal, mentions the natural disasters and the epidemic of Ebola to discuss the importance and the difficulty of the communication of uncertainty.

History shows how difficult it is to make a prognostic (and being understood). The story of the tsunami is similar, it explains the fear and the difficulty to communicate forecasted events which by nature have a certain level of probability and it are not a certainty.

In this article, we take the opportunity to reflect on the changing of our paradigms. "How can we trust you, if your opinions are always changing?" says the author, underlining how this aspect of science is not intuitive. In a time in which our work is changing, early dialysis is replaced by intent to delay, palliation intensifies along with the pride of being able to start renal replacement therapy at any age, pregnancy is made possible on dialysis, the so-called conservative therapy is rediscovered. This work can make us wonder about the fragility of dogmas and can make us reflect on the importance of communication, in a balance between answering to our patients and admitting that, often, we are the first ones not to have all the answers.

Key words: catastrophes, communication, uncertainty

In an article of illuminating clarity, on line first on the New England Journal of Medicine at November 13, 2014, Lisa Rosenbaum "national correspondent" of the journal, is inspired by the natural disasters and epidemic of Ebola to discuss the importance and the difficulty in the communication of uncertainty [1] ([full text](#)).

From Cassandra on, history shows how difficult is to make a prognostic (and being understood).

In 2001, once again in the Lancet, comments on terrorism stressed the difficulty to believe in the predictions that we do not want to listen to [2].

The terrible and fascinating story of the tsunami is somehow similar, explaining how it is easy to deny what is indeed expected, because of the difficulty, and of the fear, to communicate forecasts that deal, by their nature, with probability, possibility, not with certainty [3].

But why should we, neither seismologists nor specialists in infectious disease, take the time to read this article?

First, because this paper is an opportunity to reflect on the changing of all paradigms.

To paraphrase the article: "how can we trust you, if your opinions are always changing?". Clearly, says the Author, understanding this aspect of science is not intuitive. In fact, it is interesting to read such a comment on the changes of dogmas in one of the journals that most often convey guidelines and "new dogmas."

In a time in which much of our work is changing, early dialysis is replaced by intent to delay, palliation gains space next to the pride of the being able to start renal replacement therapy at any age, pregnancy is made possible on dialysis, the so-called conservative therapy, including diet, is rediscovered to allow the prolongation of life without dialysis, in short, when everything changes, reading this work can make us wonder about the fragility of the dogmas, and, perhaps, can make us more critical towards all dogmas.

Furthermore, this is a great paper to reflect: the uncertainty implicit in the communication is vital for those who deal with chronic diseases: the side effects of complex therapies, such as those of glomerulonephritides, may be, for the individual patient, tremendous and unpredictable as a tsunami; cardiovascular events, such as the expected movement of tectonic plates, can be just as predictable, but are not easily dated.

The article by Lisa Rosenbaum can help us striving for attaining a balance between terrorize and deny, between possible and likely, and can make us reflect on the importance of communication, as hard as it is, however never boring and always critical, to describe to our patients what, in fact, we often do not know as precisely as we would like.

Bibliografia

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