

- inhalations: smoke gases and fumes. *Journal of Intensive Care Medicine* 1987;2:260-78.
- 12 Hall AH, Rumack BH. Clinical toxicology of cyanide. *Ann Emerg Med* 1986;15:1067-74.
- 13 Stevenson RN, Kingswood C, Cohen SL, Vesey CJ. Cyanide and fire victims. *Lancet* 1988;ii:1145.
- 14 Holland MA, Kozlowski LM. Clinical features and management of cyanide poisoning. *Clin Pharm* 1986;5:737-41.
- 15 Barillo DJ, Goode R, Rush BF, Reng Lang Lin, Freda A, Anderson EJ. Lack of correlation between carboxyhaemoglobin and cyanide in smoke inhalation injury. *Curr Surg* 1986;43:421-3.
- 16 Daunderer M. Fatal smoke inhalation of hydrogen cyanide from smouldering fires. *Fortschr Med* 1979;97:1401-5.
- 17 Smith RA, Kirby RR, Gooding JM, Civetta JM. Continuous positive airway pressure (CPAP) by face mask. *Crit Care Med* 1980;8:483-4.
- 18 Astrachan DI, Kirchner JC, Goodwin WJ. Prolonged intubation vs tracheostomy complications—practical and psychological considerations. *Laryngoscope* 1988;98:1165-9.
- 19 Sataloff DM, Sataloff RT. Tracheotomy and inhalation injury. *Head Neck Surg* 1984;6:1024-31.
- 20 Bartlett RH, Niccole M, Travis MJ, Allyn PA, Furnas DW. Acute management of the upper airway in facial burns and smoke inhalation. *Arch Surg* 1976;3:744-9.

(Accepted 7 August 1989)

## Lesson of the Week

### Communicating with Asian patients

Kathryn A Stevens, R F Fletcher

Patients from the Asian subcontinent who do not speak or read English need the help of a qualified interpreter or written information or videos in their own language

Patients cannot hope to benefit fully from the advice given in a consultation or be expected to comply with treatment if they cannot understand the information that is given to them. Many of our patients are of Asian ethnic origin, and some have obvious difficulties with written and spoken communication. Though a previous report recommended providing teaching materials in Asian languages,<sup>1</sup> there is doubt about the usefulness of such written material because of uncertainty about the level of literacy among patients. To help us develop suitable material in the dietetic department we carried out a survey of our patients to assess the possible value of different ways of communicating with them.

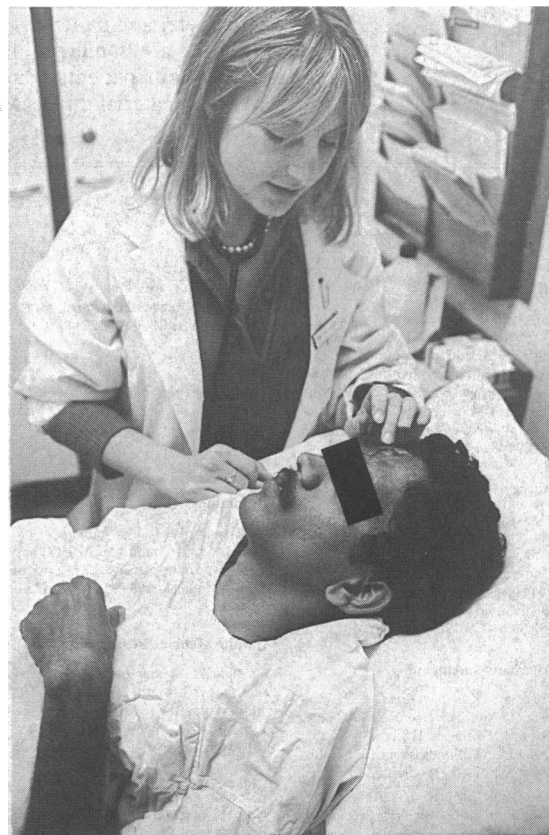
#### Patients, methods, and results

Patients of Asian ethnic origin from the Indian subcontinent who attended the general outpatients department at this hospital over seven days in May 1988 were invited to answer a short questionnaire. Only one patient refused, and 150 patients were interviewed by an Asian interpreter. Relatives were not asked to interpret.

The patient's ability to read English and an Asian language was assessed by asking the patient to read aloud a short, simple sentence in the appropriate language. Each sentence was different to reduce the possibility of the patient guessing the content.

The patients' ages ranged from 13 to 74; 96 were women. Eighty five could read an Asian language: Punjabi (43), Urdu (22), Hindi (10), Bengali (5), and Gujarati (5).

A total of 76 of the 150 patients could speak English,



A doctor examines a patient in the casualty department after a road accident

TABLE I—Literacy among 150 patients of Asian origin seen in outpatient clinics

Literacy	No of patients
Read English only	20
Read English and an Asian language	33
Read an Asian language only	52
Read no language	45

TABLE II—Numbers of men and women of Asian origin who could speak English according to age

Age (years)	Men		Women	
	No	No speaking English	No	No speaking English
13-28	11	11	32	21
29-60	31	22	56	18
61-74	12	2	8	2

and 53 could read it as well (table I). All of the men and two thirds of the women aged 13 to 28 could speak English but the proportion fell to under a fifth of the men and one quarter of the women aged 61 to 74 (table II). Fifteen patients said that they could read, but they were unable to do so when tested.

#### Discussion

Our patients fell into three groups of roughly equal sizes. One third read English, and often an Asian language as well, one third read an Asian language only, and one third could not read. Among those speaking Asian languages, about half spoke Punjabi, but four other languages were also spoken. Thus the needs of our patients for help in understanding information about their health care are highly variable. One hundred and twenty five of our patients wanted

**Dudley Road Hospital,  
Birmingham B18 7QH**  
Kathryn A Stevens, BSC,  
state registered dietitian,  
department of nutrition and  
dietetics  
R F Fletcher, FRCP,  
consultant physician, diabetes  
and endocrine unit

Correspondence to:  
Miss Stevens.

*Br Med J* 1989;299:905-6

more information in Asian languages, mentioning particularly interpreters, directional signs in the hospital, and written information, posters, and videos.

Organisations that deal with Asian patients should consider these findings. Our test of literacy was crude, but presumably the one third of our sample of patients who spoke and read English benefit from routine consultations and their accompanying written material. But for those who cannot read multilingual interpreters are essential.

There are, however, problems in using interpreters. The main disadvantage is that communication is spoken only and depends on the patient's later recall, which is notoriously unreliable regardless of the language. The interpreter's ability is also important. In our experience an interpreter who is familiar with medical and dietetic words is much more helpful than one who is fluent but lacks knowledge of medical terms. Exact translations of medical terms may, however, not exist. For example, we have found that "diabetes" has to be referred to commonly as "sugar problems." There may also be no equivalent names for some internal organs that are understood by both interpreter and patients.

There are some problems also for the remaining third of our patients who would benefit from having written material in Asian languages. Generally the

written information provided for patients in English is not good—the writing is too elaborate and the reading ability required too high for the average patient. We have tried hard to write information leaflets in English which require a low reading age and so can be understood by most of the population. Translating such leaflets into a foreign language does, however, pose a further problem. A suitably qualified translator must always check the final text to ensure that it is expressed in a form that is meaningful to the local Asian community. Such material exists, but much more is needed. Videos would be particularly useful but we have found them difficult to produce.

Further efforts are needed to communicate effectively with patients who do not speak English. Interpreters are invaluable but require special training, which is not readily available and needs to be carried out locally. Perhaps written material and videos could be produced centrally as considerable resources are required, but their use would be widespread.

We thank Mrs Satnam Marwa for helping to collect data.

I Leatherdale BA, Jhittay P, Gill A. Communication with Asian patients. *Br Med J* 1978;ii:1197-8.

(Accepted 3 July 1989)

## BOOKS RECEIVED

### AIDS

*Infectious Disease and Therapy.* "Opportunistic Infections in Patients with the Acquired Immunodeficiency Syndrome." Ed G Leoung, J Mills. Series editors BE Scully, HC Neu. (Pp xxii+445; figs and colour plates; \$107.50.) New York: Dekker, 1989. ISBN 0-8247-8080-9.

### Allergy

*Monographs in Allergy.* Vol 26. "Auto-antibodies to Immunoglobulins." Ed F Shakib. Series editors P Dukor, LA Hanson, P Kallós, F Shakib. (Pp x+274; figs; £100.) Basel: Karger, 1989. Distributed by John Wiley and Sons. ISBN 3-8055-4913-X.

### Alternative medicine

*Iridology: a Complete Guide to Diagnosing Through the Iris and to Related Forms of Treatment.* F Sharan. (Pp 352; figs; £25.) Wellingborough: Thorsons, 1989. ISBN 0-7225-1645-2.

*The Raw Materials of Health: Effective Treatment Using a New Range of Special Supplements.* L Chaitow. (Pp 112; £4.99 paperback.) Wellingborough: Thorsons, 1989. ISBN 0-7225-1552-9.

### Anaesthesia

*Medicine in the Practice of Anaesthesia.* Ed L Kaufman, DJ Betteridge. (Pp vi+361; figs; £35.) London: Arnold, 1989. ISBN 0-7131-4685-4.

### Bacteriology

*Chlamydia.* P-A Mardh, J Paavonen, M Puolakkainen. (Pp xiv+370; figs; colour plates; \$50.) New York: Plenum Medical, 1989. ISBN 0-306-42965-9.

### Biochemistry

*Guide to Biochemistry.* JC Blackstock. (Pp xii+255; figs; £14.95 paperback.) London: Wright, 1989. Distributed by Butterworth Scientific. ISBN 0-7236-1151-3.

### Biology

*Human Monocytes.* Ed M Zembala, GL Asherson. (Pp xxi+553; figs;

£49.) London: Academic Press, 1989. Distributed by Harcourt Brace Jovanovich. ISBN 0-12-779440-9.

### Bone

*Positive Health Guides.* "Avoiding Osteoporosis." A Dixon, A Woolf. (Pp ii+151; figs; £5.99 paperback.) London: Optima, 1989. ISBN 0-356-15445-9.

### Cardiology

*A Colour Atlas of Palpitation and Syncope.* LM Shapiro, KM Fox. (Pp vii+123; colour plates; £35.) London: Wolfe Medical, 1989. ISBN 0-7234-0936-6.

### Cardiovascular diseases

*Raynaud's: a Guide for Health Professionals.* Ed S Roath. (Pp xii+137; figs and colour plates; £9.95 paperback.) London: Chapman and Hall, 1989. ISBN 0-412-33680-4.

### Child welfare

*Home is Where the Hurt is: Guidance for All Victims of Sexual Abuse in the Home and for Those Who Support Them.* J Turner. (Pp 208; £4.99 paperback.) Wellingborough: Thorsons, 1989. ISBN 0-7225-1631-2.

### Community medicine

*Dependent Territories: the Frail Elderly and Community Care.* U Maclean. (Pp xii+124; £4.50 paperback.) London: Nuffield Provincial Hospitals Trust, 1989. ISBN 0-900574-72-0.

### Cytology

*Cytokines.* Vol 1. "Macrophage-Derived Cell Regulatory Factors." Ed C Sorg. (Pp viii+234; figs; £90.) Basel: Karger, 1989. Distributed by John Wiley and Sons. ISBN 3-8055-4793-5.

*Monographs in Clinical Cytology.* Vol 12. "Cytopathology of Soft Tissue and Bone Tumors." SI Hajdu, EO Hajdu. Series editor GL Wied. (Pp xvi+348; figs; £100.) Basel: Karger, 1989. Distributed by John Wiley and Sons. ISBN 3-8055-4814-1.

### Disabled/handicapped people

*The A-Z of Disability.* Directory of

Information, Services, Organisations, Equipment and Manufacturers. P Saunders. (Pp 352; figs; £8.95 paperback.) Marlborough: Crowood Press, 1989. ISBN 1-85223-136-X.

*Impact Series.* "The Education of People with Profound and Multiple Handicaps: Resource Materials for Staff Training." Based on evaluated courses run by the British Institute of Mental Handicap. J Sebba. Series editors C Robson, J Sebba. (Pp x+160; figs; £16.95 paperback.) Manchester: Manchester University Press, 1989. ISBN 0-7190-2596-6.

### Forensic medicine

*A Colour Atlas of Forensic Dentistry.* DK Whittaker, DG MacDonald. (Pp 134; figs and colour plates; £35.) London: Wolfe Medical, 1989. ISBN 0-7234-0961-7.

*Pathology of Neck Injury.* P Vanezis. (Pp x+133; figs; £45.) London: Butterworth Scientific, 1989. ISBN 0-407-01380-6.

### Gastroenterology

*Campylobacter Pylori and Gastrointestinal Disease.* Ed BJ Rathbone, RV Heatley. (Pp ix+290; figs; £45.) Oxford: Blackwell Scientific, 1989. ISBN 0-632-02582-4.

### General practice

*Health Promotion in Primary Health Care: an Open Learning Package for Practice Nurses.* Contents: Introduction—16 page booklet; Part A Health Promotion—120 page wire-bound book; Part B Cervical Screening—36 page booklet; audio cassette; VHS video on cervical screening. Price £20 including postage and packing. The package items are not available separately. 1989. Obtainable from English National Board for Nursing, Midwifery and Health Visiting, Resource and Careers Service, 798 Chesterfield Road, Sheffield S8 0SF.

*Information Handling in General Practice: Challenges for the Future.* Ed RH Westcott, RVH Jones. (Pp xii+290; figs; £12.95 paperback.) London: Croom Helm, 1988. ISBN 0-7099-5228-7.

*Practical Guides for General Practice 9.*

"On-Call: Out-of-Hours Telephone Calls and Home Visits." J DE Knox. (Pp x+66; £5.95 paperback.) Oxford: Oxford University Press, 1989. ISBN 0-19-261777-X.

*Skills and Management in Family Medicine.* EK Koh, LG Goh, P Kee. (Pp xvi+265; \$30.) Singapore: PG Publishing Pte, 1988. ISBN 981-3096-75-6.

### Genetics

*ABC of Clinical Genetics.* Articles published in the *British Medical Journal*. HM Kingston. (Pp viii+62; figs and colour plates; £10.95, overseas £13 paperback, including postage, airmail overseas. BMA members £9.95, overseas £12 including postage.) London: British Medical Association, 1989. In North America available from the American College of Physicians, PO Box 7777-R0270, Philadelphia, PA 19175, USA. ISBN 0-7279-0263-6.

*The Fragile X Syndrome.* Ed KE Davies. (Pp ix+138; figs; £15 paperback.) Oxford: Oxford University Press, 1989. ISBN 0-19-261836-9.

### Geriatrics

*Families, Services and Confusion in Old Age.* E Levin, I Sinclair, P Gorbach. (Pp x+328; figs; £29.50.) Aldershot: Avebury, 1989. ISBN 0-566-05714-X.

*Positive Health Guides.* "Alzheimer's Disease and Other Confusional States." G Bennett. (Pp viii+136; figs; £5.99 paperback.) London: Optima, 1989. ISBN 0-356-17087-X.

*Research Studies in Gerontology.* "Human Ageing and Later Life: Multidisciplinary Perspectives." Ed AM Warnes. (Pp ix+229; figs; £14.95 paperback.) London: Arnold, 1989. ISBN 0-340-42953-4.

*Year Book of Geriatrics and Gerontology 1989.* Ed JC Beck. (Pp xii+312; £40.) Chicago: Year Book Medical Publishers, 1989. Distributed by Wolfe Medical Publications. ISBN 0-8151-0632-7.

### Haematology

*Haematology Revision for MRCP and MRCPath.* ASJ Baughan, DC Linch, SJ Machin, et al. (Pp iii+201; figs; colour plates; £11.50 paperback.)

Edinburgh: Churchill Livingstone, 1989. ISBN 0-443-03666-7.

*Laboratory Haematology: an Account of Laboratory Techniques.* Ed I Chanarin. (Pp xvi+450; figs; colour plates; £24.95 paperback.) Edinburgh: Churchill Livingstone, 1989. ISBN 0-443-03343-9.

*Methods in Hematology.* Vol 20. "Molecular Genetics." Ed EJ Benz, Jr. (Pp xiv+208; figs; £35.) Edinburgh: Churchill Livingstone, 1989. ISBN 0-443-03852-X.

*New Concepts in Blood Formation and Cell Generation in Malignant and Benign Tissues.* Vol 1. HG McDonald. (Pp 111; figs; colour plates; \$95.) 1989. Diagnostic and Cell Research Institute, PO Box 7216, Waco, Texas 76714-7216, USA.

*Transfusion Medicine.* Ed WH Churchill, SR Kurtz. (Pp xii+366; £37.50.) Boston: Blackwell Scientific, 1989. ISBN 0-86542-052-1.

### Miscellaneous

*The Better Back Book.* CA Bean. (Pp 191; figs; £7.95 paperback.) London: Anaya, 1989. ISBN 1-85470-006-5.

*Debates in Medicine.* Vol 2. Ed G Gitnick, HV Barnes, TP Duffy, RH Winterbauer. (Pp xvi+275; figs; £42.50.) Chicago: Year Book Medical Publishers, 1989. Distributed by Wolfe Medical Publications. ISBN 0-8151-3601-3.

*A Doctor's Life: the Diaries of Hugh Selbourne MD 1960-63.* Ed D Selbourne. (Pp 288; figs; £12.95.) London: Cape, 1989. ISBN 0-224-02369-1.

*Exacta Medica: Reference Tables and Data for the Medical and Nursing Professions.* 1R Entwistle. (Pp 40; £2.75 spiral bound paperback.) Edinburgh: Churchill Livingstone, 1989. ISBN 0-443-04194-6.

*Financial Strategies for Physicians.* PH Sutherland. (Pp xii+218; figs; £15.50 paperback.) Philadelphia: Grune and Stratton, 1989. Distributed by Harcourt Brace Jovanovich. ISBN 0-8089-1831-1.

*High-Altitude Medicine and Pathology.* D Heath, DR Williams. (Pp xii+352; figs; £65.) London: Butterworth Scientific, 1989. ISBN 0-407-00499-8.