

SPIKES: A communication framework for serious illness conversations

SPIKES provides clinicians with a structured approach to emotionally charged discussions about serious illnesses or end-of-life care, ensuring they are person-centred, value-aligned, and involve shared decisions.

Set up the meeting

Choose a comfortable, private setting free from distractions. Use mindful non-verbal communication, such as eye contact or reassuring touch, if appropriate. Include significant others and arrange for a translator if needed.



Assess the person's perception

Ask what the patient knows about their illness ('What have you been told so far?'). This helps gauge awareness, expectations, and misconceptions. Listen actively.

Invitation to provide information

Ask how much detail they want about their situation:

- We have your tests back. How would you like me to give you the results?
- Would you prefer detailed information about what is likely to happen with your illness? Or just the key points?

If someone does not want details at this time, offer to answer questions later.

Give **knowledge** and information to the patient Prepare people for bad news: 'I have some difficult news to share', 'I'm sorry to tell you that ...'. Use plain language, avoid jargon, and break information into small chunks. Repeat key points and check for understanding. Allow time for questions and explore goals. Ask: 'What matters most to you in this situation?'

Address emotions with empathy

Acknowledge emotions: 'I can see how hard this is for you.' If unclear, ask: 'What worries you most?' Respond empathetically: 'I wish I had better news.' Offer support: 'We'll do everything we can to help.'



Summary and strategy

When the person is ready, summarise care or treatment options, linking them to their own goals. They may prioritise symptom control, for example, or being well enough to attend an important family event. Reassure them of the care team's support and suggest practical or emotional resources as needed.

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