Letter in Reply: From SPIKES to System Reform: Embedding Structured Communication into Oman's Medical Curriculum and Clinical Audits

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Dear Editor,

We would like to thank the authors for their thoughtful and constructive engagement with our article, *"Evaluating Physicians' Experiences and Compliance with the SPIKES Protocol for Communicating Adverse News: A Cross-sectional Study Conducted in Muscat, Oman."*[1] We appreciate their recognition of the importance of structured communication and their insightful reflections on our findings.

We agree that the observed gaps in adherence to certain components of the SPIKES protocol—particularly the "Invitation" and "Knowledge" steps—are not unique to our setting but reflect broader, system-level challenges. As highlighted by the authors, similar trends have been reported internationally, reinforcing the need for a more structured and longitudinal approach to communication skills training.

The proposed three-layered roadmap is both timely and highly relevant. We strongly support the integration of structured communication models into undergraduate curricula, as early exposure is essential in shaping professional competencies. In addition, reinforcing these skills during residency training through structured assessments, such as OSCEs with formative feedback, would further consolidate learning and ensure competency.

We also concur with the importance of embedding communication practices within clinical governance frameworks. The suggestion to incorporate structured audits and leverage digital health records to monitor adherence is particularly valuable. Such approaches could facilitate continuous quality improvement while aligning communication practices with institutional standards and patient-centered care goals.

While our study primarily aimed to assess current practices, it also underscores the need for future interventional research to evaluate the impact of educational and system-level reforms on communication outcomes. We believe that collaborative efforts between academic institutions, training bodies, and healthcare organizations will be essential in translating these recommendations into practice.

Once again, we thank the authors for their valuable contribution and for advancing the dialogue on this critical aspect of clinical care. We hope that this exchange will stimulate further research and policy development in the field of healthcare communication in Oman and the wider region.

References

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