

# **THE NOTIFICATION OF THE HUNTINGTON'S DISEASE ASYMPTOMATIC DIAGNOSIS : PSYCHOSOCIAL ASPECTS**

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## **INTRODUCTION**

The principal objective of this study is to describe the predictive clinic visit between the pluridisciplinary team (C.H.R.U.Nancy) and the subject requesting a Huntington's disease asymptomatic diagnosis. This consists of a complex interaction where information is transmitted, beliefs and emotions are expressed, anticipation is verbalized, unbiased knowledge is announced by molecular analysis simultaneously. We bring to evidence the psychological impact of the request of genetic status by the professional as well as by the requesting subject. We describe how the concepts concerning the genetic status have been explained during the conversation and show how are managed the disruptive effects [2] of a possible access to an infallible knowledge confirmed by Science.

At a global level, we pursue three objectives : i) to bring to evidence the language game's grammar of the predictive clinic visit ii) to identify the social, cognitive and emotional decisive moments of this interaction which contribute to its success or failure iii) to recommend adaptation of this interaction and to sensitive the practitioners to a correct management of decisive moments.

## **INTERVIEWS AND METHODS**

Our study includes 15 requests of a predictive test. Each request is examined by a team consisting of a geneticist, a neurologist and a psychologist. One to 10 conversations could be necessary to treat one request. Therefore, the 15 analysed requests make up a corpus of 55 conversations divided into 4 stages.

Stage A			Stage B	Stage C	Stage D
Request of genetic diagnosis period of thinking before signing consent form			Signed patient consent form  Blood sample	Information on the genetic status	Manage the psychological impact of the given information
Interview subject requesting- geneticist	Interviews subject requesting- neurologist	Interviews subject requesting – psychologist	Interview subject requesting- geneticist	Interview subject requesting- geneticist plus psychologist	Interviews subject requesting – psychologist

Table 1 : Organisation of the predictive plurisdisciplinary clinic visit

The predictive visit includes a series of talks. We record each conversation, we transcribe them, then using the Interlocutory Logic [1], we carry out a systematic analysis. This analysis developps into two axis : a cognitive and a relationship axis [3]. Below is an

example of a decisive moment presented in a semi-intuitive manner, where the subject installs a kind of prediction's denial that the practitioner found very difficult to handle as it was implicit.

### AN EXAMPLE OF PREDICTION'S DENIAL

#### Sequence

P : subject requesting the test ; M : a pluridisciplinary team member.

(...)

P162 : so, I'm ready, I can do that for them, that's all, it will be a present for them

M163 : and

P163 : it will be a present

M164a : it will be a present

M164b : yes but what if

P164 : so, we will see, one thing at a time

M165 : yes but

P165 : and what's more I have faith

#### Formalization of the interaction

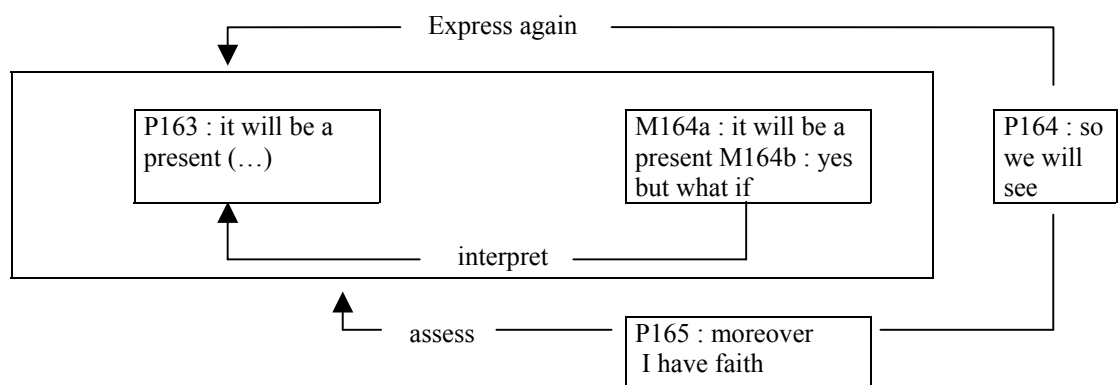


Diagram 1 : The structure of the interaction

## Interlocutor analysis

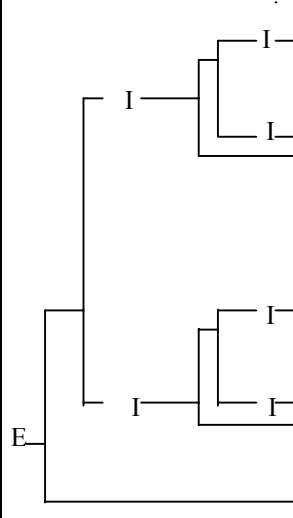
Transaction	Structure	Sequential	Conversational			
The management of judgment of probability		P163 : it will be a present	Assertion	Common thought	Revelation = Present	<i>Present probability = 50%</i>
		M164a : yes M164b : but what if			Validation Opposition <i>Request of anticipation</i>	
		P164 : so we will see, one thing at a time	Assessment	carrier : anticipation refused		
		M165a : yes M165b : but	Validation Opposition	Probability depends on the belief		
		P165 : I have faith	No validation of opposition			

Table 2 : Interlocutory analysis of probabilities interactional management

I : intervention ; E : exchange; in italic : implicit talk

## Results

M asks P in an indirect way to accept an unbiased judgement [4] of the risk of being a bearer of a genetic mutation. Both interlocutors seem to understand the motives of their opposition. We didn't observe any changes in P's thoughts by M, neither M's thoughts by P.

## CONCLUSION

In such a position, the practitioner failed to deliver his message. More globally, this case shows that a predictive visit does not only consist in transmitting an information but in dealing with a complex interaction involving several persons.

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