

Assessment of physician-patient trust in the obstetrics and gynecology departments in Poland and Greece

Ocena zaufania pacjent lekarz na oddziałach położniczo-ginekologicznych w Polsce i Grecji

Krajewska-Kułał Elżbieta¹, Chilicka Magdalena², Kułał Wojciech³, Adraniotis Janis⁴, Chadzopulu Antigoni⁵, Rozwadowska Emilia¹

¹ Department of Integrated Medical Care, Medical University of Białystok, Poland

² Department of Neonatal and Intensive Care, Medical University of Białystok, Poland

³ Department of Pediatric Rehabilitation, Medical University of Białystok, Poland

⁴ Department of Obstetrics and Gynecology, Kavala Hospital, Greece

⁵ Kavala Hospital, Greece

Summary

Aim: To evaluate patient trust in their physicians of the obstetrics and gynecology departments.

Material and Methods: We used the Trust in Physician Scale comprising 11 - items. Data were collected from 150 women hospitalized in the obstetrics and gynecology departments in Poland and 109 in Greece.

Results: Of the surveyed, 25.3% from Poland and 47.4% from Greece did not doubt their doctor's proper care. Almost 90% of the respondents from Poland and 58.8% from Greece agreed with the statement "I trust my doctor very much, that is why I always comply with his/her advice". More than 68% of the patients from Poland and 56.9% from Greece were convinced that "if my physician tells me something, this has to be the truth". Almost 77 % of patients from Poland and 43.1% from Greece declared trust in their physician's therapy. Eighty-four percent of women from Poland and 49.55% from Greece were convinced that their doctor is a true expert in the treatment of their diseases. Nearly 97% of the patients from Poland and 35.8% from Greece did not declare fear of their physician not keeping the professional secret.

Conclusions: The Trust in Physician Scale is an appropriate tool for assessing levels of patient trust in their gynecologist. Patients reported a relatively high degree of trust in their gynecologists. Women from Greece more often than from Poland did not trust their physicians, and declared that doctors did not do all for their care.

Key words: **trust in physician scale / women / Poland / Greece /**

Corresponding author:

Elżbieta Krajewska-Kułał
Department of Integrated Medical Care,
Medical University of Białystok, Poland
7a Skłodowskiej str, 15-096 Białystok
tel.: +48 857485528
e-mail: elzbieta.krajewska@wp.pl

Otrzymano: 11.08.2011
Zaakceptowano do druku: 14.11.2011

Streszczenie

Cel pracy: Ocena zaufania jakim darzą pacjentki swoich lekarzy z oddziałów położniczo-ginekologicznych.

Materiał i metody: Materiał zebrano w grupie 150 kobiet z Polski i 109 z Grecji hospitalizowanych na oddziałach położniczo-ginekologicznych. W badaniu wykorzystano standaryzowaną skalę zaufania pacjent - lekarz, obejmującą 11 zagadnień.

Wyniki: We właściwą opiekę lekarza nad pacjentem nie wątpiło 25,3% badanych w Polsce i 47,4% w Grecji. Ze stwierdzeniem „ufam bardzo mojemu lekarzowi, dlatego zawsze stosuję się do jego rad” zgodziło się 90% kobiet w Polsce i 58,8% w Grecji. O tym, że „jeżeli mój lekarz coś mówi zawsze musi być to prawdę” przekonanych było 68,7% badanych w Polsce i 56,9% w Grecji. Co do sposobu prowadzonej terapii zaufanie do lekarza miało 77,3% pacjentek z Polski i 43,1% z Grecji. O tym, że ich lekarz jest prawdziwym ekspertem w leczeniu chorób, było przekonanych 84% chorych w Polsce i 49,5% w Grecji. Nie obawiało się dochowania przez lekarza tajemnicy zawodowej 96,7% badanych z Polski i 35,8% z Grecji.

Wnioski: Respondentki z Grecji, częściej niż z Polski nie ufaly swojemu lekarzowi i twierdziły, iż nie robi on wszystkiego dla dobra ich opieki. Respondentki z Polski częściej, niż z Grecji ufaly swoim lekarzom i były przekonane, że zawsze mówią prawdę i są ekspertami w leczeniu ich chorób.

Słowa kluczowe: skala zaufania pacjent lekarz / kobiety / Polska / Grecja /

Introduction

Patients must trust their physicians to provide them with the appropriate information and act in their best interests [1]. According to Blenkiron and Hammill [2], satisfaction with health services correlated significantly with satisfaction in other areas of patients' lives, such as housing, money, social life and relationships. Patient satisfaction ratings are increasingly promoted as indicators of the quality of care [3]. However, satisfaction scores do not take into account differences between patients that may be due to sociodemographic characteristics or the type of illness rather than the quality of service delivered.

Owing to the central importance of trust in medical relationships, there have been increasing efforts in recent years to measure patients' trust in their physicians and other care providers [4-6]. Trust is critical to patients' willingness to seek care, reveal sensitive information, submit to treatment, and follow physicians' recommendations [7]. For effective treatment, physicians need to elicit trust almost instantaneously with new patients who know virtually nothing about them [8, 9]. It is frequently said that while trust in the medical profession has declined substantially in recent years, patients continue to have remarkably high levels of trust in their personal physicians [7, 10].

There are several models of the physician-patient relationship [8, 10, 11]. First is the *paternalistic* model, sometimes called the paternal. In this model, the physician-patient interaction ensures that patients receive the interventions that best promote their health and well-being. The physician acts as the patient's guardian. The second model - *informative* - assumes a fairly clear distinction between facts and values. The patient's values are well defined and known. It is the physician's obligation to provide all the available facts. The third model is the *interpretive* model. The aim of the physician-patient interaction is to elucidate the patient's values and what he or she actually wants. The patient's values are not necessarily fixed and known to the patient. In the *deliberative* model, the physician acts as a teacher or friend, engaging the patients in dialogue on what course of action would be best. The physician indicates what the patient should do, what decision regarding medical therapy would be admirable.

To our knowledge, no studies have examined trust within the patient-gynecologist relationship. The Trust in Physician Scale [12], developed by Anderson and Dedrick, focuses on the process of care and includes questions on the patient's trust in the physician's advice, opinions, and choice of medical treatment. It does not examine beliefs about the physician's ability to affect health outcomes. Over the past decade, five different research teams have developed and validated multi-item scales that quantify the level of patient trust, and have applied these instruments in a variety of settings [12-15].

The aim of this study was to assess patient trust in their physicians of the obstetrics and gynecology departments in Poland and Greece.

Materials and methods

Data were collected from 150 women hospitalized at the obstetrics and gynecology departments in Poland and 109 in Greece. We used the Trust in Physician scale (Anderson's and Dedrick's) comprising 11-items. This questionnaire measures three dimensions of trust, physician dependability, confidence in physician knowledge and skills, confidentiality, and reliability of information received from the physician.

Items are answered in a 5-point Likert scale format, ranging from 'totally disagree' to 'totally agree': 1- Strongly Disagree, 2-Disagree, 3 -Neutral (neither disagree or agree), 4 - Agree, and 5-Strongly agree.

We calculated the percentages and mean values of the scores obtained from the answers to particular questions of the scale. Internal reliability is excellent (Cronbach alpha = 0.90), although no factor analysis could be conducted to identify the three dimensions of trust. The validity of the measure, by comparison with other trust scales, showed moderate correlation with these other measures. Non-parametric statistic (Chi-square test) was used to assess the differences between the answers of women from Poland and Greece. We used a two-tailed significance ($p < 0.05$) for all analyses.

Assessment of physician-patient trust in the obstetrics and gynecology departments in Poland and Greece.

Table 1. Interpretation of physician-patient trust reported by patients of the obstetrics and gynecology departments.

STATEMENT NUMBER/STATEMENT	COUNTRY	RESPONSE POINT SCALE (number of responses to each question version)					Mean value score
		POLAND N=150	Strongly Disagree (1 pkt.)	Disagree (2 pkt.)	Neutral (neither disagree or agree) (3 pkt.)	Agree (4 pkt.)	
1 <i>I doubt that my doctor really cares about me as a person</i>	POLAND N (%)	6 (4%)	32 (21.3%)	56 (37.3%)	48 (32%)	8 (5.3%)	3.1 ±0.9
	GREECE N (%)	16 (14.7%)	36 (33%)	34 (31.2%)	20 (18.3%)	3 (2.8%)	2.6 ±1.03
p		p=0.017	p=0.142	p=0.555	p=0.527	p=0.506	p=0.262
2 <i>My doctor is usually considerate of my needs and puts them first</i>	POLAND N (%)	9 (6%)	4 (2.7%)	48 (32%)	62 (41.3%)	27 (18%)	3.6 ±1
	GREECE N (%)	6 (5.5%)	10 (9.2%)	39 (35.8%)	48 (44%)	6 (5.5%)	3.3 ±0.9
p		p=0.912	p=0.06	p=0.747	p=8,72	p=0.014	p=0.489
3 <i>I trust my doctor so much, I always try to follow his/her advice</i>	POLAND N (%)	0	0	15 (10%)	112 (74.7%)	23 (15.3%)	4.1 ±0.5
	GREECE N (%)	5 (4.6%)	7 (6.4%)	33 (30.3%)	49 (45%)	15 (13.8%)	3.6 ±0.96
p		p=0.329	p=0.007	p=0.012	p=0.022	p=0.89	p<0.001
4 <i>If my doctor tells me something is so, then it must be true</i>	POLAND N (%)	0	8 (5.3%)	39 (26%)	96 (64%)	7 (4.7%)	3.7 ±0.6
	GREECE N (%)	6 (5.5%)	7 (6.4%)	34 (31.2%)	52 (47.7%)	10 (9.2%)	3.5 ±0.9
p		p=0.015	p=0.935	p=0.582	p=0.207	p=0.276	p=0.036
5 <i>I sometimes distrust my doctor's opinion and would like a second one</i>	POLAND N (%)	0	110 (73.3%)	17 (11.3%)	23 (15.3%)	0	2.4 ±0.7
	GREECE N (%)	5 (3.3%)	17 (15.6%)	40 (36.7%)	39 (35.8%)	8 (7.3%)	3.3 ±0.96
p		p=0.329	p<0.001	p<0.001	p=0.005	p=0.039	p<0.001
6 <i>I trust my doctor's judgments about my medical care</i>	POLAND N (%)	0	23 (15.3%)	26 (17.3%)	84 (56%)	17 (11.3%)	3.6 ±0.9
	GREECE N (%)	5 (4.6%)	6 (5.5%)	48 (32%)	40 (36.7%)	10 (9.2%)	3.4 ±0.9
p		p=0.329	p=0.042	p<0.001	p=0.084	p=0.763	ns
7 <i>I feel my doctor does <u>not</u> do everything he/she should for my medical care</i>	POLAND N (%)	0	117 (78%)	23 (15.3%)	10 (6.7%)	0	2.3 ±0.6
	GREECE N (%)	11 (10.1%)	22 (20.2%)	38 (25.3%)	34 (31.2%)	4 (3.7%)	3 ±1.04
p		p<0.001	p<0.001	p=0.006	p<0.001	p=0.064	p<0.001
8 <i>I trust my doctor to put my medical needs above all other considerations when treating my medical problems</i>	POLAND N (%)	0	10 (6.7%)	25 (16.7%)	107 (71.3%)	9 (6%)	3.8 ±0.7
	GREECE N (%)	6 (5.5%)	8 (7.3%)	46 (42.2%)	42 (38.5%)	7 (6.4%)	3.3 ±0.9
p		p=0.0158	p=0.959	p=0.001	p=0.007	p=0.349	p<0.001
9 <i>My doctor is a real expert in taking care of medical problems like</i>	POLAND N (%)	0	11 (7.3%)	13 (8.7%)	124 (82.7%)	2 (1.3%)	3.8 ±0.6
	GREECE N (%)	2 (1.8%)	9 (8.3%)	37 (24.7%)	54 (49.5%)	7 (4.7%)	3.5 ±0.8
p		p=0.351	p=0.984	p<0.001	p=0.016	p=0.074	p=0.008
10 <i>I trust my doctor to tell me if a mistake was made in my treatment</i>	POLAND N (%)	0	0	22 (14.7%)	119 (79.3%)	9 (6%)	3.9 ±0.5
	GREECE N (%)	6 (5.5%)	27 (20.2%)	10 (9.2%)	62 (56.9%)	1 (0.9%)	3.3 ±1.01
p		p=0.0158	p<0.002	p=0.324	p=0.119	p=0.087	p<0.001
11 <i>I sometimes worry that my doctor may not keep the information we discuss totally private</i>	POLAND N (%)	46 (30.7%)	99 (66%)	6 (4%)	0	0	1.7 ±0.5
	GREECE N (%)	7 (6.4%)	32 (29.4%)	25 (22.9%)	43 (38.4%)	2 (1.8%)	3.01 ±1.01
p		p<0.001	p<0.001	p<0.001	p<0.001	p=0.351	p<0.001

Results

The present study included 150 women from Poland and 109 from Greece with a mean age 56.2 ± 3.5 years (18-72). More than half of the surveyed from Poland 86 (57.3%) were in the 26-35 years age range, 39 (26%) in the 18-25 years, and 20 (13.3%) in the 36-45 years.

Of the respondents from Greece, 44 (40.4%) were in the 36-45 years age range, 22 (20.2%) in the 56-70 years, 20 (18.3%) in the 46-55 years, 13 (11.9%) in the 26-35 years, and only 7 (6.4%) were over 70.

Of these patients, 134 (89.3%) women from Poland and 68 (62.4%) from Greece had husbands. Thirteen (8.7%) of the respondents from Poland and 12 (4.8%) from Greece were single. There were only 3 (2%) widows from Poland and 11 (10.1%) from Greece. The surveyed from both countries more often had vocational training, 54 (36%) from Poland and 43 (39.4%) from Greece. Only 6 (4%) women from Poland and as many as 47 (43.1%) from Greece had a primary education. Of the respondents, 25 (16.7%) from Poland and 19 (17.4%) from Greece had a secondary education. Thirty-eight (25.3%) of the respondents from Poland had a higher education.

Overall, 134 (89.3%) women from Poland and 77 (70.6%) from Greece worked physically. Sixty-six (44%) respondents from Poland and 42 (38.5%) from Greece did intellectual work.

Of the surveyed, 114 (76%) from Poland and 54 (49.5%) from Greece had professional work. Only 5 (3.3%) women from Poland and 23 (21.1%) from Greece had an occupational pension.

The details of Anderson's and Dedrick's scale are summarized in Table I and Figure 1. Thirty-eight (25.3%) patients from Poland and 52 (47.7%) from Greece disagree or strongly disagree with the sentence "I doubt that my doctor really cares about me as a person", and 56 (37.3%) of the responders from Poland and 23 (21.1%) from Greece agreed with the above sentence.

Overall, 89 (59.3%) women from Poland and 54 (49.5%) from Greece agreed with the sentence "My doctor is usually considerate of my needs and puts them first", and 13 (8.7%) from Poland and 16 (14.7%) from Greece had an opposing view on this matter.

Of all the respondents, 135 (90%) from Poland, and 64 (58.8%) from Greece declared "I trust my doctor so much, I always try to follow his/her advice". Only 15 (10%) of the patients from Poland and 33 (30.3%) from Greece had no opinion.

In all, 103 (67.8%) respondents from Poland and 62 (56.9%) from Greece agreed with the sentence "If my doctor tells me something is so, then it must be true", and only 8 (5.3%) women from Poland and 13 (11.9%) from Greece did not agree with the above sentence.

Twenty-three (15.3%) patients from Poland and 47 (43.1%) from Greece agreed with the sentence "I sometimes distrust my doctor's opinion and would like a second one". Overall, 110 (73.3%) respondents from Poland and 23 (18.9%) from Greece had the opposite opinion.

In all, 101 (67.3%) of the surveyed from Poland and 50 (45.9%) from Greece declared "I trust my doctor's judgments about my medical care". Only 23 (15.3%) of the respondents from Poland and 11 (10.1%) from Greece did not trust their doctor's judgments, and 26 (17.3%) women from Poland and 48 (44%) Greek women had no opinion on this matter.

Of the patients, 117 (78%) from Poland and 33 (30.3%) from Greece did not agree with the sentence "I feel my doctor does not do everything he/she should for my medical care", and only 10 (6.7%) from Poland and 38 (34.9%) from Greece agreed with the above sentence.

Of the surveyed, 116 (77.3%) respondents from Poland and 49 (44.9%) from Greece declared "I trust my doctor to put my medical needs above all other considerations when treating my medical problems". In contrast, 10 (6.7%) patients from Poland

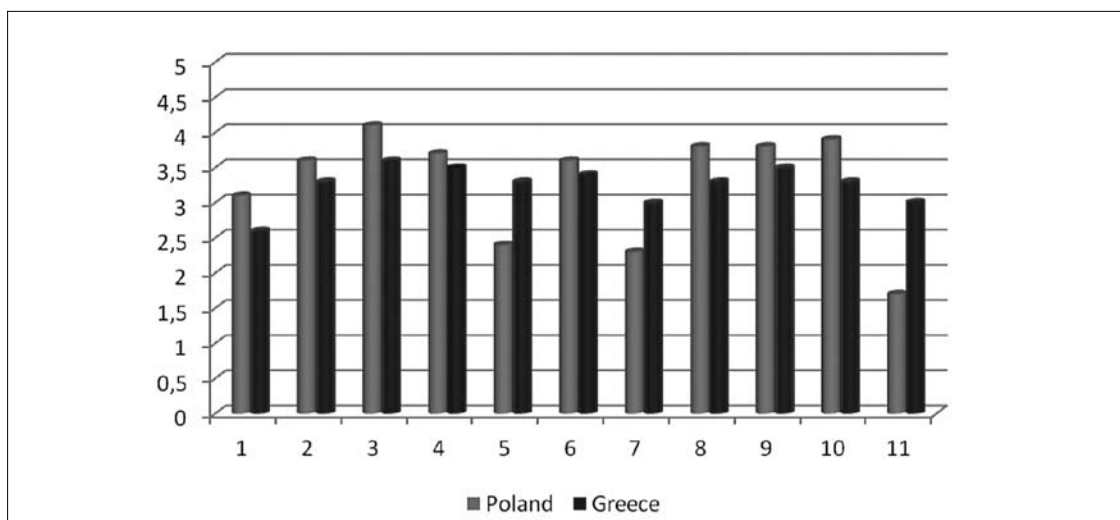


Figure 1. General information on the physician attitudes by patients from Poland and Greece. Mean value scores and items in the physician-patient trust scale.

1. I doubt that my doctor really cares about me as a person
2. My doctor is usually considerate of my needs and puts them first
3. I trust my doctor so much I always try to follow his/her advice
4. If my doctor tells me something is so, then it must be true
5. I sometimes distrust my doctor's opinion and would like a second one
6. I trust my doctor's judgments about my medical care
7. I feel my doctor does not do everything he/she should for my medical care
8. I trust my doctor to put my medical needs above all other considerations when treating my medical problems
9. My doctor is a real expert in taking care of medical problems like
10. I trust my doctor to tell me if a mistake was made about my treatment
11. I sometimes worry that my doctor may not keep the information we discuss totally private

and 14 (12.8%) from Greece had the opposite opinion.

In all, 126 (84%) women from Poland and 61 (54.2%) from Greece could say “*My doctor is a real expert in taking care of medical problems like*”. Only 11 (7.3%) patients from Poland and 11 (10.1%) from Greece had the opposite opinion.

Of the surveyed, 128 (85.3%) patients from Poland and 63 (57.8%) from Greece declared “*I trust my doctor to tell me if a mistake was made in my treatment*”, and 22 (14.7%) respondents from Poland and 10 (9.2%) from Greece had no opinion.

Overall, 145 (96.7%) of the respondents from Poland and 39 (35.8%) from Greece did not agree with the sentence “*I sometimes worry that my doctor may not keep the information we discuss totally private*”. The remaining respondents from both countries agreed with the above sentence.

Discussion

In the present study, patients reported a relatively high degree of trust in their gynecologists. Respondents from Greece more often than from Poland did not trust their physicians, and declared that doctors did not do all for their care.

There are several explanations of these differences, e.g., system of health care, cultural differences, patient age, health status, education level and financial status. Nowadays, the health care sector in Greece is characterized as a mixed system of health care provision financed through salary based on the National Health System providers, prepaid administered payments based on social and private insurance funds and fee-for-service private practitioners [16].

In contrast, Poland has an easily accessible and extensive public health care system. The public health care system is extensive without financial barriers to access. In earlier investigations, age and self-reported health status were inconsistently associated with trust in a physician [17, 18]. Trust levels were higher among patients with poor health [19]. Decreased trust was associated with older age, minority status, higher education, diagnosis of fibromyalgia or osteoarthritis, and poorer health [20].

Similarly, in the present report more respondents from Greece were older and had a decreased trust level. In contrast in our study, more women from Greece than Poland had a primary education.

There is evidence to suggest that greater trust in the physician is associated with better adherence to the physician's instructions, which may ultimately improve outcomes of care.

Based on theoretical and empirical work by others on medical trust [8, 19, 21], and on general, social, and institutional trust in other arenas [10], we conceptualized general physician trust as having potentially five overlapping domains, (1) fidelity, which is caring and advocating for the patient's interests or welfare and avoiding conflicts of interest, (2) competence, which is having good practice and interpersonal skills, making correct decisions, and avoiding mistakes, (3) honesty, which is telling the truth and avoiding intentional falsehoods, (4) confidentiality, which is proper use of sensitive information, and (5) global trust, which is the irreducible “soul” of trust, or aspects that combine elements from some or all of the separate dimensions [11].

Raduj et al. [22], in a study conducted among 102 patients from six psychiatric departments, showed that 91.2% of patients had a positive doctor – patient relation.

In the current study, almost 37% of the Polish women and 21% of women from Greece were convinced that the doctor really took care of them.

Józwicka et al. [23] evaluated the quality of first aid services on the basis of patients' opinions and assessed the influence of socio-demographic factors on the expressed views. The survey covered 132 hospitalized patients of a regional hospital in Poland. The respondents assessed their contact with a call taker/dispatcher, the work of the physician and other ambulance staff. The work of the emergency department was assessed positively by 86% of the respondents. Patients who negatively evaluated the work of medical staff more often had low income.

The CBOS report in 2009 [24] showed that almost three-quarters of Poles (74%) declared that they trust their doctors who have a cure, one-fifth (20%) had little trust in them, and few (3%) - very small.

In the present study, nearly 90% of respondents from Poland, and more than half from Greece declared trust in their gynecologist and their advice.

The CBOS report [24] demonstrated that when a physician makes a diagnosis and introduces therapy, only 6% of patients tried to verify it with other doctors. Almost 15% of patients searched in books, magazines and additional sources on disease and treatment. Nearly 49% of the respondents thought to consult another specialist. In contrast, 36% of the respondents had the opposite opinion. Most patients declared trust in their physicians, but 16% of them had great trust, and 64% quite good.

In the present study, 77.3% of women from Poland and 45.9% of women from Greece declared trust in their gynecologist's judgments about medical care.

In 2009, it was demonstrated that 63% of Polish patients were not satisfied with the health care system, and 34% was satisfied [24].

Our study had several limitations, the gynecologic disorders were not explored, and we used a small sample of women (n=259).

Conclusions

1. The Trust in Physician Scale is an appropriate tool for assessing levels of patient trust in their gynecologist.
2. Patients reported a relatively high degree of trust in their gynecologists.
3. Women from Greece more often than from Poland did not trust their physicians, and declared that doctors did not do all for their care.

References

1. Wroński K, Cywiński J, Bocian R. Quality of medical practices. *Ginekol Prakt.* 2008, 2, 42-45.
2. Blenkiron P, Hamill C. What determines patients' satisfaction with their mental health care and quality of life? *Postgrad Med J.* 2003, 79, 337-340.
3. Rea C, Rea D. Managing performance and performance management: information strategy and service user involvement. *J Manag Med.* 2002, 16, 78-93.
4. Pearson S, Raeke L. Patients' trust in physicians, many theories, few measures, and little data. *J Gen Intern Med.* 2000, 15, 509-513.

Krajewska-Kulak E, et al.

5. Zheng B, Hall M, Dugan E, Kidd K, [et al.]. Development of a scale to measure patients' trust in health insurers. *Health Serv Res.* 2002, 37, 187-202.
6. Kayaniyl S, Gravelly-Witte S, Stewart D, [et al.]. Degree and correlates of patient trust in their cardiologist. *J Eval Clin Pract.* 2009, 15, 634-640.
7. Blendon R, Benson J. Americans' views on health policy: a fifty-year historical perspective. *Health Aff. (Millwood).* 2001, 20, 38-46.
8. Hall M, Dugan E, Zheng B, Mishra A. Trust in physicians and medical institutions, what is it, can it be measured, and does it matter? *Milbank Q.* 2001, 79, 613-639.
9. Sturmberg J. Variability, continuity and trust - towards an understanding of uncertainty in health and health care. *J Eval Clin Pract.* 2010, 16, 401-402.
10. Axelrod D, Gool S. Maintaining trust in the surgeon-patient relationship, challenges for the new millennium. *Arch Surg.* 2000, 135, 55-61.
11. Emanuel E, Emanuel L. Four models of the physician-patient relationship. *JAMA.* 1992, 267, 2221-2226.
12. Anderson L, Dedrick R. Development of the Trust in Physician scale, a measure to assess interpersonal trust in patient-physician relationships. *Psychol Reports.* 1990, 67, 1091-1100.
13. Safran D, Kosinski M, Tarlov A, [et al.]. The primary care assessment survey, tests of data quality and measurement. *Medical Care.* 1998, 36, 728-739.
14. Kao A, Green D, Davis N, [et al.]. Patient's trust in their physicians, effects of choice, continuity, and payment method. *J Gen Intern Med.* 1998, 13, 681-686.
15. Krupat E, Bell R, Kravitz R, [et al.]. When physicians and patients think alike, patient-centered beliefs and their impact on satisfaction and trust. *J Fam Pract.* 2001, 50, 1057-1062.
16. Lionis C, Symvoulakis E, Markaki A, [et al.]. Integrated primary health care in Greece, a missing issue in the current health policy agenda: a systematic review. *Int J Integr Care.* 2009, 30, 9.
17. O'Malley A, Sheppard V, Schwartz M, Mandelblatt J. The role of trust in use of preventive services among low-income African-American women. *Prev Med.* 2004, 38, 777-785.
18. Bonds D, Foley K, Dugan E, [et al.]. An exploration of patients' trust in physicians in training. *J Health Care Poor Underserved.* 2004, 15, 294-306.
19. Joos S, Hickam D, Gordon G, Baker L. Effects of a physician communication intervention on patient care outcomes. *J Gen Intern Med.* 1996, 11, 147-155.
20. Freburger J, Callahan L, Currey S, Anderson L. Use of the Trust in Physician Scale in patients with rheumatic disease, psychometric properties and correlates of trust in the rheumatologist. *Arthritis Rheum.* 2003, 49, 51-58.
21. Plomp H, Ballast N. Trust and vulnerability in doctor-patient relations in occupational health. *Occup Med (Lond).* 2010, 60, 261-269.
22. Raduj J, Induska A, Janczewska M, [et al.]. Quality of inpatient psychiatric services as rated by patients of selected psychiatric wards. *Post Psychiatr Neurol.* 2005, 14, 293-298.
23. Józwicka M, Ślusarz, R, Szewczyk M, [i wsp.]. Satysfakcja pacjenta z opieki medycznej w szpitalnych oddziałach zabiegowych. *Ann Univer Marie Curie-Skłodowska.* 2005, 16, 68-72.
24. CBOS report. Opinions on health care. Warszawa, 2009, 4, BS/55/2009. (Polish)