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Culturally adaptive argumentation: A key to effective global healthcare communication

Dear Editor.

We commend Sarah Bigi for her insightful article, "Argumentative Discourse in Clinical Dialogues: An Interdisciplinary Perspective," [1] which highlights the dual functions of argumentation persuasion and agreement building in healthcare communication. This framework offers valuable insights into clinical decision-making. However, we believe integrating a broader global perspective could enhance the study's applicability and impact across diverse healthcare systems.

Healthcare communication is deeply influenced by sociocultural contexts, shaping both the use and reception of argumentative discourse. In Western healthcare systems, where patient autonomy is prioritized, argumentation often facilitates informed decision-making. [2] Conversely, in collectivist cultures, such as those in Asia and parts of Africa, patients tend to defer to the authority of healthcare professionals (HCPs), requiring a more hierarchical approach to communication. [3] These contrasting dynamics underscore the need for culturally sensitive approaches that respect local norms while adhering to universal ethical standards.

Bigi's emphasis on analyzing broader stretches of dialogue is particularly relevant in multicultural and multilingual contexts. Patients with limited fluency in the dominant language face significant barriers in understanding complex medical information. In these scenarios, empathetic and culturally attuned argumentation, supported by professional interpreters and tailored communication strategies, can bridge gaps in comprehension and foster trust.[4]

The practical implications of Bigi's findings highlight the urgent need to enhance HCPs' communication skills to address global disparities in healthcare delivery. Training programs inspired by this research should prioritize the development of culturally adaptable argumentation techniques, equipping HCPs to navigate diverse linguistic, cultural, and social contexts. [5] These initiatives are vital for reducing communication-related inequities, building trust, and promoting equitable, patient-centered care.

Future research should examine the influence of cultural norms on argumentative discourse dynamics, identify strategies for training HCPs in multicultural settings, and explore the role of advanced technologies, such as AI-powered language tools, in facilitating effective argumentation. [6] By integrating these dimensions, the global applicability and transformative potential of argumentative discourse in healthcare can be fully realized.

In conclusion, we applaud the author's contributions to this underexplored area of healthcare communication. By incorporating a global perspective, we can further advance argumentative discourse as a critical tool for improving patient outcomes and fostering equity in healthcare delivery worldwide.

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CRediT authorship contribution statement

Istiqomah Musnif: Investigation. Khalim Ahmad Dwi Nur: Investigation. Taufiqurrahman Muhammad: Conceptualization, Supervision, Validation. Afrina Cut: Investigation. Rizkyantha Okky: Investigation. Mubin Muhammad Nurul: Investigation, Writing – review & editing. Ngadri Valensius: Writing – original draft.

Declaration of Competing Interest

The authors declare that there is no conflict of interest regarding the publication of this letter.

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Notes on contributors

Muhammad Taufiqurrahman: Muhammad Taufiqurrahman was responsible as the drafter and supervision of this paper. Muhammad Nurul Mubin: Muhammad Nurul Mubin was responsible as an investigator and wrote the final article. Okky Rizkyantha: Okky Rizkyantha was responsible as investigator and wrote the draft article. Cut Afrina: Cut Afrina was responsible as an investigator. Ahmad Dwi Nur Khalim: Ahmad Dwi Nur Khalim was responsible as an investigator. Musnif Istiqomah: Musnif Istiqomah was responsible as an investigator. Valensius Ngardi: Valensius Ngardi was responsible as an investigator. All authors contributed to the writing of the final manuscript and were comprehensively involved

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