

Doctor—Patient Communication in the Age of Intelligent Media: A Review of Panel1 at MHM2026

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Abstract

On the afternoon of July 18, 2026, Panel 1 Doctor Patient Communication in the Era of Intelligent Media of the 9th "Medicine, Humanity and Media" Health Communication International Conference and PhD Symposium was held at the School of Journalism and Communication, Peking University. Grounded in local healthcare communication contexts, these papers explore cutting edge issues of human machine interaction and online doctor patient communication under intelligent media. Reviewers put forward suggestions for improvement regarding sample limitations, research design and variable settings, and affirmed that these findings provide valuable theoretical and practical references for human centered doctor patient communication and human machine health communication in the digital intelligence era.

Keywords: doctor Patient Communication; health communication; digital media

On the afternoon of July 18, 2026, Panel 1 doctor Patient Communication in the Era of Intelligent Media of the 9th "Medicine, Humanity and Media" Health Communication International Conference and PhD Symposium was held in Room 347, School of Journalism and Communication, Peking University. This session was chaired and commented by Jiang Shaohai, Associate Professor at the Department of Communications and New Media, National University of Singapore, and Liu Zikun, Distinguished Associate Research Fellow at the School of Journalism and Communication, Wuhan University. Six paper authors delivered presentations in sequence: Zhou Yan from Guangxi University, Liang Qian from Renmin University of China, Zhang Runzi from Xiamen University, Niu Wenxi from Shenzhen University, Hao Antai from Huazhong University of Science and Technology, and Xie Qingqing from Shenzhen University.

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Zhou Yan's paper *When AI Becomes a Digital Confidant: The "Emotional" and "Rational" Mechanisms Underlying Dependence on Generative AI Chatbots* focuses on dependence on generative-AI chatbots and explores the formation mechanisms of user dependence through emotional and rational pathways. Drawing on questionnaire data, the study constructs a theoretical model with serial mediation and moderation effects. It verifies that the lack of perceived emotional support gives rise to AI dependence via the serial transmission of mental-health help-seeking stigma and loneliness. Combined with local sociocultural contexts, it discusses why the public turn to AI for emotional venting, offering theoretical references for the governance of intelligent mental-health services.

During the comment session, the commending experts praised the well-structured theoretical model and its engagement with the topical issue of AI-powered emotional compensation. Meanwhile, they pointed out that the sample consisted mainly of cross-sectional data from young adults without differentiating various types of AI products. It was suggested that qualitative interviews and intervention experiments be added to further clarify discrepancies in users' perceptions of AI's pseudo-empathy.

Liang Qian's paper *Healing the Body Starts with Healing the Mind? Predictors of Online TCM Consultation Communication Patterns and Patient Satisfaction Based on the RIAS Framework* adapts the RIAS doctor-patient communication framework to online traditional Chinese medicine consultations. Based on coding and regression analysis of online consultation dialogues, the paper identifies the "high-participation, light-consultation" interactive features of online TCM visits. It tests how communication behaviors such as small talk, emotional expression, and professional syndrome differentiation predict patient satisfaction, and clarifies performance differences among communication strategies in text-based online consultations.

In the comment session, experts acknowledged the localized adaptation of the RIAS theory to online TCM practice. They also noted the relatively single data source and simplistic categorization of satisfaction. Recommendations included adding an offline consultation control group, as well as drawing fine-grained comparisons between formulaic consolation and personalized emotional support.

Zhang Runzi's paper *Authoritative or Approachable? The Influence of AI Communication Styles on Perceived Credibility in Health Consultation — Mediated by Automated Social Presence and Moderated by Personal Traits* adopts between-subject controlled experiments to investigate how authoritative versus approachable AI tones shape perceived credibility of health information. Taking perceived competence and perceived warmth of automated social presence as dual mediators, and health anxiety and need for cognitive closure as moderators, the study reveals divergent persuasive pathways of the two communication styles and provides empirical evidence for health-AI wording design.

Commentators commended the rigorous experimental manipulation and innovative dual-mediator model. They observed the absence of a neutral-tone control condition and noted that experimental stimuli were static texts, which diverge from real-world dynamic human-AI interactions. Suggestions included expanding to diverse disease scenarios and conducting long-term follow-up studies.

Niu Wenxi and Wang Tongchen's paper *How Relational Communication Empowers Users: Functions, Boundaries and Stigma-Context Differences of Patient-Centered Communication in AI-Powered Health Consultations* employs a mixed-methods design combining questionnaires and in-depth interviews. It extends patient-centered communication theory to human-machine health consultation settings, with patient empowerment as the core mediator. Comparing the functional boundaries of AI communication across

health-related stigma contexts, the study finds that the constraining effect of AI hallucination risks only holds for low-stigma topics; in high-stigma contexts, the non-judgmental nature of AI communication is hard to substitute.

In the comment segment, experts highlighted the innovative quantitative design and stratified perspective of stigma contexts. They suggested separating quantitative and qualitative components into independent manuscripts, further manipulating the severity of AI hallucinations, refining source-preference distinctions, and conducting cross-sample validations to test model generalizability.

Hao Antai's paper *How Resource Investment Mitigates Turnover Intention: A Serial-Mediation Study Based on the JD-R Model* draws on the Job Demands-Resources (JD-R) model and surveys medical staff in public hospitals. It examines the serial-mediation mechanism linking organizational resource investment to turnover intention, analyzes the mediating roles of occupational-risk perception and job satisfaction, and tests the moderating effect of permanent staffing status. The research enriches health-communication scholarship from the practitioner perspective.

Commentators remarked that the study fills the research gap concerning healthcare workers within health communication and carries practical implications. Limitations included geographically constrained sampling and exclusive reliance on self-reported data. It was advised to disaggregate participant subgroups and complement analyses with objective personnel records.

Xie Qingqing's paper *Fostering Trust in AI Medical Advisors: An Experimental Study of Design Nudges and User Adoption* conducts experiments on trust-building for AI medical advisors. It explores how design nudges affect user adoption intentions, and examines how subtle interface and wording interventions shape public trust in and usage of AI medical tools, delivering practical insights for interaction optimization of intelligent health products.

Reviewers appreciated the complete research design and solid empirical work, noting its close alignment with real-world AI-medical product deployment and practically-relevant experimental outcomes. They pointed out the lack of moderation analyses on individual variables such as health literacy and age, and recommended subgroup-specific experiments and continuous tracking of long-term user behavioral changes.

Centered on two core themes-human-machine interaction and online doctor-patient communication in intelligent-media contexts-this session presented research covering cutting-edge topics including generative-AI dependence, AI communication styles, online TCM consultations, and healthcare professionals' career development. Employing diverse methodologies such as controlled experiments, questionnaire-based modeling, mixed methods, and dialogue textual analysis, these papers are grounded in local Chinese healthcare-communication scenarios. They offer new perspectives and empirical support for optimizing intelligent medical-communication platforms, governing AI-enabled health services, and safeguarding healthcare-workforce wellbeing. The outputs bear notable academic and practical value for building human-AI health trust and deploying digital-health services under stigmatized conditions. The two commenting supervisors highly affirmed the research topics and innovative attempts across the six presentations, concluding that this body of work provides solid theoretical foundations and practical references for humanistic-oriented doctor-patient communication and human-machine health-communication research in the digital-intelligence era.