



## PROFESSION

### Stressed physicians reluctant to seek support

They cite lack of time and fear of hurting their careers as reasons to avoid employee-assistance programs.

By KEVIN B. O'REILLY, amednews staff. Posted April 30, 2012.

Nearly 80% of physicians at an academic medical center said they experienced a personal crisis within the past year, yet most said they would not seek support from physician-health services or employee-assistance programs.

The 108 surgeons, anesthesiologists and emergency physicians surveyed said they experienced a wide range of stressful events, such as serious illnesses or deaths in their families and severe adverse events in their patients. But most they said they were unlikely to turn to institutional sources of support, with 40% saying they would be willing to consult physician-health services and 29% open to using employee-assistance programs. About a third of the doctors had never even heard of these services, said an *Archives of Surgery* study published in March.

The reason offered most frequently for not getting help was lack of time, with 90% of the physicians surveyed at Brigham and Women's Hospital in Boston citing it. About 70% feared a lack of confidentiality, negative impact on their careers or the stigma of mental illness. Nearly half feared legal consequences or thought "using services means I am weak."

Between 15% and 75% of physicians are under severe stress or burned out. As many as 30% are depressed, according to 12 previous studies cited in the *Archives* article. Male physicians are 1.4 times more likely than other men their age to die of suicide, according to the American Foundation for Suicide Prevention. The problem is even worse among female physicians, who are about 2.3 times likelier to commit suicide compared with similarly aged women. Burned-out physicians also are likelier to make medical errors, change jobs or specialties, or retire from patient care, the *Archives* study said.

"Physicians underestimate the long-term effect of chronic emotional stress, and they certainly underestimate the effect of acute or chronic stress on their ability to give good care," said Jo Shapiro, MD, senior author of the study. "There is great data that correlates burnout with errors, and I don't think physicians have internalized that idea. We're not trained to think that our emotional state is worth examining, no less tending to."

To overcome some of the barriers doctors face in asking for help, Dr. Shapiro and her colleagues instituted a one-to-one physician peer support program. More than 30 doctors have been trained to offer "emotional first aid" to doctors experiencing stressors such as adverse events and medical liability suits. One way the peer-support team addresses physicians' lack of time is by addressing matters immediately on the phone if doctors cannot fit an in-person meeting into their schedules.

"We do not wait for people to ask. We do a reach-out call," said Dr. Shapiro, director of Brigham's Center for Professionalism and Peer Support. "The reason to do that is to normalize the whole process."

#### Targeting burnout before crisis hits

Such an approach is unusual, said Alan H. Rosenstein, MD, medical director of Physician Wellness Services, a Minneapolis-based consulting firm. Fewer than 15% of health care organizations actively reach out to physicians to let them know about the nonpunitive supportive sources available to them, according to a survey of 2,069 doctors the firm helped sponsor.

"We really need to work with physicians before these acute events happen," Dr. Rosenstein said. "The ultimate goal is prevention, more than it is in post-event management."

He said health care organizations should actively market wellness services to physicians.

"The biggest pitch is, 'We really value your services. We want you to be a continuing asset at this organization. We want you to be comfortable, because your services are precious.'"

It can cost up to \$123,000 to recruit a new physician, and losing a doctor could cost a health organization \$2 million in revenue, the *Archives* study said.

Some physicians are pursuing self-help strategies to help them deal with the stressors of life in medicine. A study in the Sept. 23/30, 2011, *Journal of the American Medical Association* found that 70 primary care physicians who took an eight-week course on achieving "mindfulness" through meditation felt less burned out and had greater empathy for their patients.

Mindfulness is among the skills that Dike Drummond, MD, offers to physician clients through his life-coaching service marketed at TheHappyMD.com. Dr. Drummond retired from his career as a family physician after experiencing severe burnout. He said that although physician schedules are always tight, doctors should see making time to seek support as an investment in their long-term well-being. Burned-out physicians must learn to set appropriate work-life boundaries and restructure their practices to reduce burnout, he added.

"Doctors need skills to protect them from the naturally draining environment that comes with being a physician," Dr. Drummond said.

## ADDITIONAL INFORMATION:

**WEBLINK**

“Physicians’ Needs in Coping With Emotional Stressors: The Case for Peer Support,” *Archives of Surgery*, March ([archsurg.ama-assn.org/cgi/content/abstract/147/3/212](http://archsurg.ama-assn.org/cgi/content/abstract/147/3/212))

“Association of an Educational Program in Mindful Communication With Burnout, Empathy, and Attitudes Among Primary Care Physicians,” *The Journal of the American Medical Association*, Sept. 23/30, 2009 ([www.jama.ama-assn.org/content/302/12/1284.short](http://www.jama.ama-assn.org/content/302/12/1284.short))

Copyright 2012 American Medical Association. All rights reserved.

**RELATED CONTENT**

- » **Life after lawsuit: How doctors pick up the pieces** May 16, 2011
- » **Quality-of-care concerns add to doctors' stress** Aug. 31, 2009
- » **Medical student stress and burnout leave some with thoughts of suicide** Oct. 20, 2008
- » **Doctor morale shaky as practice stressors surge** Jan. 15, 2007
- » **New culture for coping: Turning to peer support after medical errors** Sept. 11, 2006