Safety Action Series
A Look at the Current State of Provider Well-Being and Its Effect on Patient-Centered Care
Speakers

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Disclosures

- Linda Drozdowicz, M.D., has no real or perceived conflicts of interest.

- Robert Krause, DNP, APRN-BC, has no real or perceived conflicts of interest.
Objectives

- Define provider wellness
- Define burnout and compassion fatigue, and understand how each affects quality of care
- Analyze conditions that contribute to burnout and compassion fatigue
- Discuss ways to enhance provider wellness
- Review self-care strategies for health care providers
Clinician Wellness

Mental construct:
• Absence of burnout
• Spiritual well-being
• Lack of depression
• Job/life satisfaction
• Sense of balance

Physical construct:
• Good health
• Positive personal health practices

Social construct:
• Social well-being
• Personal life

“Thriving”

“I can’t define it, but I know it when I see it.”
–Justice Potter Stewart, 1964
When Wellness Fades
Compassion Fatigue

- “In its simplest form, compassion fatigue implies a state of psychic exhaustion.” (Boyle 2011).
- “Severe malaise resulting from caring for patients experiencing varying aspects of pain (i.e., physical, emotional, social)… associated with the ‘cost of caring’ and refers to the resultant strain and weariness that evolves over time.” (Sabo 2006)

- How is this different from burnout?
  - Clinician with compassion fatigue can still care and be involved, albeit in a compromised way.
  - Compassion fatigue may lead to burnout.

- Studies report the prevalence of compassion fatigue as 7.3%-40%.

Wright B. Compassion fatigue: how to avoid it. Palliat Med. 2004;18(1):4-5.[PMID: 14982200]
http://doi.org/10.1371/journal.pone.0136955
Burnout: Definition

• A syndrome characterized by:
  – Loss of enthusiasm for work
  – Feelings of cynicism and detachment
  – Low sense of personal accomplishment
Physicians

Medscape National Physician Burnout, Depression & Suicide Report 2019

Which Physicians Are Most Burned Out?

- Urology: 54%
- Neurology: 53%
- Physical Medicine & Rehabilitation: 52%
- Internal Medicine: 49%
- Emergency Medicine: 48%
- Family Medicine: 48%
- Diabetes & Endocrinology: 47%
- Infectious Diseases: 46%
- Surgery, General: 46%
- Gastroenterology: 45%
- Ob/Gyn: 45%
- Radiology: 45%
- Critical Care: 44%
- Cardiology: 43%
- Anesthesiology: 42%
- Rheumatology: 41%
- Pediatrics: 41%
- Oncology: 39%
- Pulmonary Medicine: 39%
- Psychiatry: 39%
- Orthopedics: 38%
- Dermatology: 38%
- Allergy & Immunology: 37%
- Plastic Surgery: 36%
- Otolaryngology: 36%
- Ophthalmology: 34%
- Pathology: 33%
- Nephrology: 32%
- Public Health & Preventive Medicine: 28%

Cost of Burnout

FIGURE 1. Personal and professional repercussions of physician burnout.

Depression

• Major Depressive Disorder: Not the same as burnout, but burnout can be precursor.

• A) ≥5 sx during 2 week period (change from prior functioning) – MUST have **depressed mood** and/or **anhedonia**
  – Depressed mood most of day almost every day
  – Anhedonia
  – Unintentional weight loss/gain and/or change in appetite
  – Insomnia or hypersomnia
  – PMR/PMA nearly daily (that others notice, not just subjective feeling)
  – Fatigue or low energy
  – Worthlessness or excessive/inappropriate guilt
  – Poor concentration and/or indecisiveness
  – Recurrent thoughts of death, SI, SA

Burnout:
• Loss of enthusiasm for work
• Feelings of cynicism and detachment
• Low sense of personal accomplishment
On Physician Suicide

- 300-400 physician suicides yearly
  - “A doctor a day”
- Male physicians 1.41 times higher than the general male population
- Female physicians 2.27 times higher than the general female population

Burnout: Physicians vs Other Professionals

- MD/DO’s more likely to have symptoms of burnout than other working adults
  - ~7000 physicians surveyed, compared to working, non-physician controls
  - >30% ↑ odds of burnout in physicians compared to high school grads
  - Bachelor’s, master’s, professional or doctoral degrees – were at LOWER RISK of burnout than high school grads.

Burnout Among Midwives

• Sample of 100
  – Death and dying + conflict with physician were most stressful events perceived by midwives.
  – Mean scores for burnout:

<table>
<thead>
<tr>
<th></th>
<th>Mean</th>
<th>Std. deviation</th>
<th>Burnout rating</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emotional exhaustion</td>
<td>24,25</td>
<td>9,78</td>
<td>Moderate</td>
</tr>
<tr>
<td>Depersonalization</td>
<td>19,64</td>
<td>5,37</td>
<td>High</td>
</tr>
<tr>
<td>Personal accomplishment</td>
<td>14,78</td>
<td>7,57</td>
<td>High</td>
</tr>
</tbody>
</table>

The respondents reported average and high levels of depersonalization, emotional exhaustion and personal accomplishment, respectively.

Impact on Patients: Medical Errors

- Survey of ~400 IM residents at Mayo Clinic: Self-reporting of major med errors
  - Surveyed throughout training
  - Those with medical errors:
    - 3.49 times as likely to have depersonalization (p<0.001)
    - 5.33 times as likely to have emotional exhaustion (p<0.001)
    - 2.25 times as likely to feel sense of low personal accomplishment (p=0.001)

- Survey of ~8000 surgeons
  - Each 1 point ↑ in depersonalization (range 0 –33) ⇒ 11% ↑ odds of medical error
  - Each 1 point ↑ in emotional exhaustion (range 0 –54) ⇒ 5% ↑ odds of medical error

- BURNOUT MATTERS

Impact on Patients

- Study: Work-related stress in doctors:
  - 50% reported reduced standards of patient care (taking short cuts, not following procedures).
- Depersonalisation dimension of physician burnout $\rightarrow \downarrow$ patient satisfaction and $\uparrow$ recovery time after discharge.
- ...you get it.

WHY PHYSICIAN BURNOUT?
“Mom, Dad – Where Do Physicians Come From?”

- **Bachelor’s degree**: ~4 yrs
- **Medical School**: 4 yrs
  - Equivalent of ~24+ credits/semester
  - Multiple Board Exams (oy!)
- **Residency**: 3-7 yrs; 80+ hrs/wk
  - Another Board Exam (oy!)
- **Fellowship (if subspecializing)**: 1-3 yrs
- **Specialty Board Exam** (double oy!)
- **Attending! Pay back loans.**
  - Median debt: $192,000
Physician Culture

• Heavy hours: Average 50-60 hrs/wk when not on call.
• Care for others but not ourselves.
  – “Suck it up” mentality.
  – Common not to have formal coverage pool.
  – Study: 30% of young Irish physicians had not been to a general practitioner in the previous 5 years.
    • 65% felt unable to take time off from work when they were ill
• Licensing boards can discriminate for seeking mental healthcare in many states.
• Generally not unionized in U.S.

Real Life
Systems Issues

“Although burnout is a system issue, most institutions operate under the erroneous framework that burnout and professional satisfaction are solely the responsibility of the individual physician.”

— Shanafelt and Noseworthy, Mayo Clinic
Drivers of Burnout

**FIGURE 2.** Key drivers of burnout and engagement in physicians.
Obstetrics and Gynecology Considerations

- “Exposure to severe events in maternity care is part of the professional experience.”
  - Miscarriage, stillbirth
  - Child death or severe asphyxia during birth
  - Maternal miss or near-death in delivery
  - Violence, threats
Obstetrics and Gynecology Considerations

• Study
  – ~2300 Swedish obstetricians and midwives
  – >70% experienced severe event on delivery ward
    • 15% with partial symptoms of PTSD
    • 7% of obstetricians and 5% of midwives with full blown PTSD

• Not always just “stress” or “upset”

PTSD

• Does the definition of PTSD cover clinicians?
  – Yes!
  – People exposed to actual or threatened death or serious injury in the following ways:
    • Witnessing, in person, the event(s) as it occurred to others
    • Experiencing repeated or extreme exposure to aversive details of the traumatic event(s)

• Know the signs:
• To be diagnosed with PTSD, an adult must have all of the following for at least 1 month:
  • At least one re-experiencing symptom
  • At least one avoidance symptom
  • At least two arousal and reactivity symptoms
  • At least two cognition and mood symptoms

PTSD and the Stress Response

• PTSD causes specific changes to the HPA axis.

• Chronic stress downgrades cortisol response.
  – However sensitivity to cortisol increases causing hyperarousal, hypervigilance, chronic anxiety and sleep issues.

Enhancing Wellness: Systems Level

• Physicians
  – Those who spend >20% of their professional effort on what they personally valued most in medical practice more likely to avoid burnout.
    • Special clinics, teaching, administration

• Leaders
  – Choose physician leaders based on ability to listen, engage, develop and lead physicians - not based on meeting organizational performance targets.
  – Let those they lead rate them.
Enhancing Wellness: Systems Level

• Inefficiency
  – Universal driver of dissatisfaction/burnout, but specific issues vary in each setting/field.
  – Ask each specialty/work unit what would be most helpful for improving wellness.

• Foster community for physicians
  – 1 hour protected meeting time every other week can reduce burnout.

• Nix productivity-based physician pay.

Enhancing Wellness: Individual Level

Yoga and meditation have both been shown to decrease cortisol and reduce amygdala activation.

How?

• By enhancing positive neuroplastic changes in the PFC (executive functioning) and shrinking amygdala.
• By enhancing prefrontal executive control, sending inhibitory messages to the amygdala.
Enhancing Wellness: Individual Level

- Regularly discuss cases and your reactions with at least one colleague.
- In the same way a patient benefits from talking with you, you will gain strength from talking with others (e.g. Balint groups).
- Also, remember that basic self-care techniques such as good sleep hygiene, diet, exercise, and stress reduction (e.g. meditation) should be integrated into a routine self-care protocol.

Q&A Session
Press *1 to ask a question

You will enter the question queue
Your line will be unmuted by the operator for your turn

A recording of this presentation will be made available on our website:
www.safehealthcareforeverywoman.org
Next Safety Action Series

Moving from Surviving to Thriving

May 8, 2019
2 pm Eastern

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