Physician Burnout: How the gastroenterologist can cope with the stresses of modern practice

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Christina M. Surawicz, MD, MACG
Professor of Medicine,
Division of Gastroenterology
U of Washington, Seattle WA.
Why am I giving this talk?

• Berk lecture at ACG 2013
• I realized I survived it without knowing it
• For example…
  Lack of control

Today

• What is burnout?
• How are we doing in GI?
• What are the contributing factors?
• What are some solutions?
  • The practice of medicine
  • The practice of ourselves
Burnout Has 3 Components

- Emotional and physical exhaustion
- Depersonalization
- Decreased sense of personal accomplishments and successes
Emotional and Physical Exhaustion

- Overworked
- Overextended
- Downward spiral, even after attempting to rest


Depersonalization

- Unfeeling in response to patients and peers
- Dysfunctional coping mechanism
- Keeping your patients at a distance to not drain you more
- Cynicism, sarcasm, compassion, fatigue
- Nothing left to give
Decreased Sense of Personal Accomplishment

- Lack of efficacy
- What is the use?
- What is the purpose?
- Work is subpar
- Feel like not making a difference

The Paradox—A Fine Line

- Dedication ➔ Overwork
  The most dedicated are the most susceptible

- Traits that predispose
  - Idealism
  - Perfectionism
  - Responsibility

How well do we recognize burnout in ourselves and others?
• A challenge
• Surgeons self reported burnout significantly underestimated when evaluated on an instrument like the MBI
• One late clue - unprofessional behavior

How do we stack up in GI?
# Gastroenterologists

<table>
<thead>
<tr>
<th>Specialty</th>
<th>Rate of Burnout</th>
</tr>
</thead>
<tbody>
<tr>
<td>Critical Care</td>
<td>55%</td>
</tr>
<tr>
<td>Gen Internal Med, Family Practice</td>
<td>54%</td>
</tr>
<tr>
<td>Gastroenterology</td>
<td>49% (was 41% last year)</td>
</tr>
<tr>
<td>Diabetes, Ophthalmology</td>
<td>41%</td>
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<tr>
<td>Psychiatry</td>
<td>40%</td>
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# Gastroenterologists – ASGE Survey

- Compared Interventional GE (IGE) and GE
- Burnout higher in junior than senior doctors
  - Especially first 3 years
  - Both in academic and private practice

Keswani et al, Am J Gastroenterol 2011; 106: 1734-40
Factors for GI docs

**General GI**
- Worry that their endoscopic skills will be questioned
- Pressure by nurses to do cases faster

**Interventional GI**
- Confidence in their ability
- Procedure related stress
  - Missing cancer on EUS
  - Inability to cannulate bile duct
  - Misinterpreting fluoroscopic images
- Work life balance

Contributing factors

- Hours worked: a clear correlation
  - 44% for 60-80 hrs/week for surgeons
- Work home conflict
- Work home conflict resolved in favor of work
  - For surgeons, higher if...
    - 2-Career Couple
    - Married to another doctor
    - Married to another surgeon—highest incidence
Another Big Predictor

Spending less than 20% of time on the activities most meaningful to them, no matter what it is

54% vs. 30% Burnout Rate

External Forces

Friendly Fire (Well-Intentioned)
- Health care reform
- Pay for performance
- ICD 10
- CME
- EMR
- MOC/licensure

Enemy Fire (Not so Well-Intentioned)
- Insurance companies
- Pre-Authorizations
- Denials to patients
- For-Profit and CEO salaries

Privatera et al. Physician Burnout and Occupational Stress
J Hosp Admin 2015; 4:27
Stress and performance curve

Privatera et al. Physician Burnout and Occupational Stress, J Hosp Admin 2015:427

Productivity vs. Hours
Burnout Factors: Multivariate Analysis

- Spending less than 20% time on most meaningful activities, no matter what it is
- Being under age 55
- More hours worked
- Being a generalist vs. being a specialist

Mayo Clinic study
Burnout—Contributing Factors

- Work-Life imbalance
- Not having control
- Rewards are not aligned with values
- Conflict with peers, staff, patients
- Patient complaints/malpractice suits/errors

Denial and Delayed Gratification

- Physicians tend to deny their...
  - Anxiety
  - Fears
  - Desires
  - Fatigue
- Delayed gratification: it will get better when.....
Burnout—Consequences

SELF
• Leaving profession early
• Substance abuse
• Depression
• Poor health
  • Suicide MD rate is 2x higher than general population
  • Women higher than men

CLINICAL
• Lower patient satisfaction scores
• Association with medical errors cause or effect—BOTH
• Unprofessional behavior
• Job turnover
  • Themselves
  • Those they work with
• Low-morale in workplace

Review Burnout Inventory—How Did You Score?

• Here is a questionnaire.....
Solutions—External

• How we practice medicine
• Support from our institutions and from our staff
• How we handle adverse events and complications
  • Our peers are our best support

Work-Life Balance

• Work-life balance is for people who do not like their work
• “Old Amazon Joke” per New York Times Article

• Maybe not a joke there?
We Must Control our Work Schedules

- Top 3 factors that contribute to burnout:
  - More hours worked
  - Recent work-home conflict
  - Work-home conflict resolved in favor of work

- Control over work schedule predicted better work-life balance (new term is INTEGRATION)

Scheduling

- Conflict with administrators
  - See more patients
  - Click thru EMR faster

- Consequences
  - Our stress
  - ↓ Patient satisfaction
  - ↓ ? Quality of care
Electronic Medical Record...biggest dissatisfier? Not made for us

How we practice medicine

• The patient who drains us
• The busy day
• Remember the quote of Ron Vender:
  • “Remember that for each patient, their visit with you is probably the most important event of the day”
    • Ron Vender  ACG President 2012-2013

• Easy to forget, I remind myself often, esp. at end of day
Can We Control Our Practice?

- High-performing primary care practices
- Staff to doctor ratio was 2 or 3:1
- Team approach--Scribes and order entry
- Saw more patients
- Went home earlier and didn’t chart at home
- Staff and patients more satisfied
- Bottom line: financially makes sense!

Sinsky et al Am Fam Med 2013: 11: 272

Complications

- A huge contributor to burnout is having a major complication
- “The day you stop feeling bad about your complications is the day you quit”

A Seattle Surgeon
Serious Complications and Errors are Inevitable

• Need to take seriously
• Need to learn from our mistakes
• Need to support each other
• Need to forgive ourselves (as we forgive our colleagues)

Malpractice Suits

• Magnifies everything—devastating
• MDs vs. Lawyers
  • Different mindsets—lawyers think differently from us
Burnout – errors: cause and effect?

Burnout leads to distress -- leads to errors -- leads to burnout

Peer support programs (after adverse medical events)

- Safe way to share emotional impact
- Renew compassion in the workplace
- This is not trivial
  - 79% of faculty and residents reported a serious adverse patient event or traumatic personal event in the prior year
  - Physician peer support preferred (88%) c/w employee assistance or mental health (29-48%)
- Van Pelt Qual Saf Health Care 2008; 17:249;
What I Learned About Adverse Events from Captain Sully—It’s Not What You Think, An Essay

- Miracle on the Hudson, May 2010
- Crew were all removed from duty immediately
- All had some PTSD
- Why don’t we do this too?

Steigler, JAMA 2015;313:361

Solutions

- Backup systems for emergencies like the residents have—night float, etc.
- Flexible work hours and part-time work
- Reasonable emergency call; schedule day off after?—Like airline pilots
- “These are the duties of the physician: first to heal his mind and to give help to himself before giving it to anyone else”
- Epitaph of Athenian Doctor, 2 AD
A 3-Step Program

- Identify and balance professional and personal goals
- Identify stressors and shape career path
- Nurture personal wellness strategies

Adapted from Balch and Shanafelt, Combating Stress and Burnout: A Surgical Practice, Advances in Surgery 2010;44:29-47.
Step 1: Values and Goals

- Identify your personal values
- Identify your professional values
- Do they jibe?
- Can you integrate them?

Identify Your Professional Goals

- Why did I choose to become an MD?
- Why did I choose to go into my field?
- What do I like most about my job?
- What 3 things motivate me professionally?
- By the end of my career, what 3 things do I want to have accomplished?
- My Steven Covey experience
Integrating Work and Everything Else

• What is my greatest priority in life?
  • Do I live this way?
• Where am I most irreplaceable?
  • Home?
  • Work?
  • Elsewhere?
• What do I want to sacrifice?
  • Glass and rubber balls

Integrating (Cont’d)

• What legacy do I want to leave?
• How would I change this past year if I could?
• What do I fear?
  • Giving up things? Or admitting it is time to?
  • What others might think of me?
Step 2: Shape Your Career Path and Identify Stressors

- Enhance work that is personally meaningful to you
- Reshape practice? Give up stressful procedures? Eliminate other things?
- More training?
- Reflect with your colleagues
- Reassess what you enjoy

What Energizes and What Drains You?
Other People’s Problems

• We want to fix things but we don’t have to fix everything
• We don’t own other people’s problems
• Listen—don’t reply immediately
  • Chinese saying: pancake has 2 sides or 3 sides?
  • Applies to patient care as well

Step 3: Nurture Personal Wellness Strategies

• Nurture yourself—mentally and physically
  Your relationships
  Vacations, hobbies
  Sleep and eat
• Protect time for personal reflection
• See your primary care doctor
• Care for yourself first: Oxygen mask on airplane
We Cannot Do It All

• At least not all at the same time…
• Limit what you take on
  • “Exhaustion as a badge of honor”
• Plan your day backwards
  • Number hours of sleep
  • Time for self-care: exercise, relaxation
  • Number of hours with friends, family; dinner, homework
  • Subtract: hours for work
• OK…it won’t work every day but it is a good goal

Attack Your Schedule

• Take a day off after travel
• Identify emergency backup systems
• Be realistic but be generous
• Block time off—random days or half days
  • Schedule with Presidents
• Date night
• Decide what time is sacred and honor that
Someone I knew all too well…

- "The degree to which you do not believe you have time to spend even ten minutes sitting quietly is the degree to which you desperately need to spend ten minutes sitting quietly"

- Fahri (2003) Bringing Yoga to Life,
- Harper Collins, New York

Mindfulness Based Stress Reduction (MBSR)

- Deliberately paying full attention to what is happening around you and within you—in your body, heart and mind
- Awareness with no judgement or criticism
- Can include narrative writing and meditation
Just Think: The Challenges of the Disengaged Mind

- Series of eleven studies
- Participants did not enjoy spending 6-15 minutes alone in a room with nothing to do
- Being alone for 15 minutes with their thoughts was so aversive that they would self-administer electrical shocks (even when earlier would pay to avoid them)
- Preferred mundane external activities
- 67% of men; 25% of women
- The untutored mind does not like to be alone with itself"

Wilson et al. Science 2014; 345: 75-77
Summary: A 3-Step Program

• Identify and balance professional and personal goals
• Identify stressors and shape career path
• Nurture personal wellness strategies

• Adapted from Balch and Shanafelt, Combating Stress and Burnout:
  • A Surgical Practice, Advances in Surgery 2010;44:29-47.

A few other ideas

• Having the right colleagues
  • We spend more time with them than family

• Gratitude journal
  • 3 things/ day

• Narrative writing
  • Power of reading it aloud

• Black humor
  • Necessary but under threat
Focus Your Strategy
This requires daily attention

- Recognize sources of stress
- Let go of frustrations
  - What can and cannot be changed
- Two 80% rules

Resilience

- Finding meaning in our work
  - That we are important
  - That what we do helps people, not just patients
  - Mentoring our juniors will be one of our legacies
- Will help us on the days when work does overshadow “everything else”
- Why I do this file
Try one thing....

• Day off after being on call
• Schedule a 2 week vacation
• Write a thank you letter to someone meaningful to you
• Talk with your colleagues to see what could be better
• Read something funny
• Enjoy this wonderful city tonight

Survive and Thrive

• Renewing our priorities
• Taking control of our lives as much as possible
• Finding ways to recharge our batteries
• Aligning work and “everything else”
Thank you....