



# Strategy for preventing practice burnout: Suicide among physicians and surgeons

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The incidence of burnout is increasing rapidly at an alarming rate among physicians and surgeons. This is also true for physician and surgeon suicide rate which is higher than the general population. Furthermore, female physicians are committing suicide 250-400% more than their female professionals. A strategy to prevent burnout is presented and discussed with the hopes of reducing the suicide rate among physicians and surgeons as well. There are 4 steps that must be practiced on a regular basis for the strategy to help prevent future disasters like burnout.

**Key words:** burnout, suicide, strategic plan, support architecture, live in the moment, attitude awareness, know thyself, stress reduction activities, maintaining a positive outlook and enjoying life

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**B**urnout can destroy families of physician and surgeons including podiatrist. When it occurs it can be devastating emotionally, financially, professionally, and to one's health. Unfortunately among physician and surgeons it is estimated to occur to 30-38% of the physician population [1]. More recently it was determined that 87% of physicians and surgeons experienced some degree of burnout including medical students [2]. Burnout is defined as the mental and physical collapse caused by frustration, overwork and stress. This definition is applicable to the US labor work force where it is estimated for every non-burnout worker there are two who are burned out but still working [3]. For the podiatric profession, as well as the allopathic profession, burnout has a much greater effect on the male and female population of physicians and surgeons. There is a recent worrisome trend of increasing suicide rate among female physicians especially primary care physicians. The suicide rate was estimated to be 3.7-4.5% of the female population of physicians and surgeons in the US. The number jumped by an alarming 120-140% over the past few years [4-9].

Contrast this suicide rate to other females in other professions and the percentage is much higher between 250-400% [9]. For the male physician and surgeon population the suicide rate is between 1.5-3% of the total male population of physicians in the US. This has remained steady at this rate [5]. Both female and male population of physicians, suicide rates are higher than the general US population which is the tenth leading cause of death [5]. The cause of such an alarming suicide rates are multi-factorial and complex. Even though physicians and surgeons have access to medical care for their serious problems such as depression, they may choose not to get care for fear of losing their position, reputation, or be punished by medical disciplinary boards which compounds their problem [6-12]. There may be underlying depression, bipolar disorder, anxiety, panic attack, alcohol and drug addiction complicating the very active and busy lives of physicians and surgeons. Furthermore, overwork, overwhelming periods of stress, death of patients under your care, serious financial issues, medical malpractice, family responsibilities, serious personal health issues and divorce added to emotional and psychological problems already existing results in the formula for burnout and the worse case—suicide. This trend may continue as medical schools comprise equal numbers of male and female medical students.

For example, among physician specialties, psychiatrist have the highest divorce rate at 50% followed by surgeons [17-18]. Younger physicians experience burnout more than older physicians [1]. Older physicians developed skills and changed behavior and attitude allowing more adaptability to the constantly changing medical environment and lessening the overall stress increasing in their professional life.

There are early signs of burnout that, if left unnoticed, progresses to a more serious state. Boredom sets in. Enthusiasm to see patients and patiently listening to their complaints of pain and misery wanes. The physician is glad the clinic day is over and heads to the nearest bar or tavern to drink alcohol and wash away the difficulties of the day. Instead of exercising or doing other beneficial activities after clinic hours, the physician becomes lackadaisical and chooses activities that are not beneficial. This becomes a steady activity and choice. As burnout progresses, it becomes more difficult and challenging to get out of bed and face the day of complaining patients. Soon every problem at work becomes a major emotional issue sapping the physician of vital energy reserved for patient care. The stress is mounting dramatically and the mind of the physician is filled with negativity about everything now. Instead of 100% focus on the patients, energy is exerted to control the mounting emotional chaos within. Mistakes are made unintentionally until it is too late to correct them. The consequences to the patient are devastating. The mistakes cost the physician loss of reputation, increased guilt, loss of self esteem, and the threat of medical malpractice. After all, the lives of our patients are in our hands. It is a tremendous, constant burden that must be carried with humility, appreciation and a willingness to learn new things and by providing the best care possible to our patients. This is no easy task. Burnout reaches the end stage and reversing this stage is near impossible. Can burnout be prevented?

### **Strategic Plan to Prevent Burnout**

The key to preventing burnout is first acknowledging its ominous existence in medicine. The next step is to develop a customized plan that suits your needs, personality type, fitness level, dietary requirements, and a 'support architecture'. This plan should encompass four major areas of practice. The first is

to practice 'daily stress reduction'. The idea is to take small breaks during the busy work day to rejuvenate, take deep breaths, rest, nap, meditate or perform simple exercises. Awareness of your level of stress is paramount. This allows the podiatric physician and surgeon to neutralize the existing stress by taking time to restore calm, positive attitude. When there is more time exercise in a manner that suits your needs and your willingness to do regularly. For example, going for a walk, going to the gym to workout, practicing martial arts, yoga training, dance, meditation, prayer, reading a good book, listening to relaxing, soothing music, and other activities that focus your mind on the task at hand. It is recommended you mix the exercises so you don't plateau or get bored with the same old exercise routine. The second part of the plan is to 'live in the moment'. This is accomplished by taking the time to be aware of your inner self and your emotional status. It is a time to take deep breaths and fully appreciate your life and the people in your life as well as your many experiences both good and bad that have contributed to your life. This must be practiced daily so it too becomes a beneficial habit and daily stress reducer. This activity helps to maintain a balanced perspective of life which is vital in preventing burnout. The third factor is to create and maintain a relaxing yet functional work place. It is a fact workers who are more relaxed produce more than workers who are excessively stressed, negative, and chaotic [3]. This aspect of your plan entails hiring people who fit into your work paradigm. This is accomplished by having the potential hires take various personality and behavior inventories. This provides additional information about the person which can't be attained by a face to face interview where the hire is on his or her best behavior. If the interviewed is hired and turns out that he or she has a negative outlook on life in general and is a back stabber for example, can be destructive to a practice. This worker needs to be removed as quickly as possible before the damage is permanent or far reaching. If the worker is allowed to stay the stress will increase to the point where good workers will leave the practice to avoid interacting with this negative person. The fourth aspect of the strategic plan is to hire professionals when necessary. This presupposes you have the skills necessary to be open, honest and not in denial about yourself and your surroundings. The worse case is to have an elitist professional arrogance and attitude that assumes you

are far superior to others and don't need their professional expertise. This attitude will keep the arrogant elitist blind to the deteriorating effects of burnout until it is too late. The fact is, we don't know everything there is to know. Even the smartest person with the highest IQ doesn't possess the ability to know all that there is. The adage 'know thyself' is a key component in this section. However, this has limitations depending on the skills and abilities of the podiatric physician. The other important section is building a 'support architecture' which comprises of key professionals, trusted friends, colleagues, family, mentor(s), and inspiring authors on books about success, self help, spirituality, religion, and more. The foundation for a good support group is established to assist you when you need help to prevent burnout or worse yet—suicide. This will help ensure you reach your highest aspirations and life goals as a professional and human being.

Other subdivisions of the strategic plan include exposure of your mind to positive, loving, healing and calming words, sounds, reading material, music etc. A mind constantly bombarded with violence, negativity, chaos, rage, anger, and hatred becomes susceptible to burnout and more. Thus, practicing a daily habit of listening to healthy sounds, music, words, thoughts, vibrations in the practice workplace and personal life is advocated [2,19]. Likewise, diet can affect mood and energy levels needed to care for patients. There is mounting evidence how our diet affects our immune system, brain function, heart activity, blood pressure, blood sugar levels and more. We have control of our diets including our 'mind diet' if we choose. As we know if stress levels increase excessively the adrenal glands are forced into action due to the fight or flight mechanism. If the stress is prolonged the adrenals overwork eventually the person crashes in terms of no energy and loss of vitality and vigor.

Attitude Awareness Training is another subsection of the strategic plan. As the podiatric physician and surgeon practices living in the moment, awareness of one's attitude is revealed. 'Self talk' is another awareness that reveals the attitude and perspective one has about an issue or experience for example. If the self talk is negative or self destructive this must be changed in order to help prevent burnout. Switching the negative self talk off is difficult to do without

practice and training. This is where an expert in this field may be very helpful in developing new skills to switch positive self talk on. This process will take time, patience, practice, and perseverance to achieve this ability until it becomes habitual. Lastly, as stated previously boredom may be a prelude to burnout if left unchecked. Part of the plan is to be aware of it and take steps to reverse this should it occur. Taking the time periodically to inventory your emotional and mental status is recommended. If changes are needed, this will keep your practice viable, happy, healthy and fulfilling to you. We have a wonderful opportunity to practice a profession we love despite all the changes occurring to the medical environment.

## Conclusion

Burnout is a very real threat to the health and well being of podiatric physicians and surgeons. Thirty to thirty eight percent of physicians and surgeons experience burnout in the US. It has been estimated that this is now up to 87%. Underlying severe depression, bipolar disorder, chronic anxiety, chronic panic attack, alcohol and illicit drug abuse combined with mounting, uncontrolled stress are contributing factors for burnout in medicine and surgery. Other serious issues like divorce, financial difficulties, medical malpractice, and serious health concerns also contribute to burnout. Suicide is one such consequence of severe burnout. Now that there are just as many female physicians in practice now as male physicians, there is an unwelcomed and serious trend of much greater higher suicide rates than ever before among female physicians especially primary care practitioners. The causes are multi-factorial and complex and should be studied to determine ways to reduce this tragic waste of human lives. Many lives are affected including children, families, spouses, and patients.

Avoiding burnout requires strategic planning. The plan establishes goals to be accomplished in four major areas of concern. The first is practicing daily stress reduction activities. This includes but not limited to meditation, prayer, exercise, massage, taking vacations, taking short vacations or dates to focus on rest and rejuvenation. The second step is 'living in the moment'. This is accomplished by developing self awareness techniques which inventory your state of mind and emotional status. This also incorporates

being aware of one's surrounding environment including the clinic staff. The third plan is creating and maintaining a relaxed yet functional work space and hiring people who have a positive and enthusiastic outlook on life. This is accomplished in part by having potential hires take various personality and psychologic inventories to understand who you may be hiring. A subsection of this plan is building the 'support architecture' that will help you when you are in crisis or have issues and problems that are difficult to resolve without assistance. The support group includes trusted professionals, friends, family, mentor(s), and teachers. Keeping this support structure and group together involves maintaining connections with them periodically. When a member quits or no longer wants to function in this capacity, you will have to find a replacement especially if this person is crucial to you. Getting the assistance when it is needed is paramount in helping to prevent burnout. The future is unknown and we have no idea what may occur to our practices. No one really knows how long we are meant to practice podiatric medicine and surgery. As we know, death is inevitable for all of us including the eventual cessation of our professional career. With strategic planning we have the choice and opportunity to continue practicing our chosen profession as long as we want to and if our health allows us to.

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