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OPINION

Stress and Burnout in Doctors

Let's Look Deeper

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ABSTRACT

Doctors are at risk of stress and burnout. These are longstanding issues which have been identified for decades. Numerous articles talking about work life balance, mindfulness sessions, regular exercise, meditation, hobbies and a long list of positive activities are as old as the story of stress and burnout in the medical profession. The question remains: after all the knowledge about the existence of stress and burnout among doctors and the plentiful advice that abounds in tackling these, why are we still looking for the answers? What can we see, learn and do which is different?

INTRODUCTION

The COVID-19 pandemic has brought a number of brewing problems to the fore¹. Social, racial and ethnic inequalities which we knew existed have been highlighted in a way which is now undeniable. Alongside all the issues which have surfaced, stress and burnout among doctors have shown just how little buffer we were working with.

A recent BMA survey² received 6610 responses from doctors working across England. Of the 6550 responders to a question about their mental wellbeing, 43% said that they were currently experiencing work related depression, anxiety, stress, burnout, emotional distress, or other mental health condition and that it was worse than it had been before the pandemic started. The problems are global, not limited to the UK. A systemic review on doctor burnout conducted in August 20203 found that the COVID-19 pandemic had heightened existing challenges that doctors face, such as increasing workload, which is directly correlated with increased burnout. Evidence⁴ highlights the effectiveness of cognitive behavioural therapy, mindfulness techniques, team-based interventions, group

discussions, professional coaching, work-hour limitation, mental health training programs, and improving the work environment, targeting both the individual and organisation.

Following on from the well-known facts of doctor stress, burnout and the suggested interventions, in this article I have tried to focus on thinking in a problem solving model instead of listing techniques which are already well known and repeated in literature. I have shared personal perspectives from experience and observation.

IDENTIFY THE PROBLEM

Burn-out is defined in ICD-11 as follows⁵:

Burn-out is a syndrome conceptualized as resulting from chronic workplace stress that has not been successfully managed. It is characterized by three dimensions:

- feelings of energy depletion or exhaustion;
- increased mental distance from one's job, or feelings of negativism or cynicism related to one's job; and



reduced professional efficacy

Though ICD-11 makes it clear that burn out syndrome is in relation to work and occupation, not related to other areas of life, practically a difficult work-life balance could lead to doctor burnout. A junior doctor with young children, major professional examinations and a busy job is practically going to find circumstances more overwhelming than a senior colleague in a more stable phase of life. Personal circumstances can bring challenges at any point of life which makes a previously manageable job overwhelming.

As an overseas doctor from India and with no immediate family in the UK, my circumstances were similar to many acquaintances who, have gone through phases which entail looking after young children, difficult to access childcare provisions, homesickness, high-stake exams, first on-calls, frequently moving jobs and hospital accommodations with little homely warmth. Most people move on with sheer determination. Fortunately, as a natural course, circumstances change. Children grow up, exams are passed, and many buy their own houses and make their social circles.

The long-term problem, which needs the bull to be taken by the horns, is when they find themselves feeling unhappy, dissatisfied and burnt out in a substantive career grade job. Psychological interventions are unlikely to work long-term unless you identify what exactly is making you unhappy at your workplace.

The questions to ask yourself are:

- 1. Are you in the right specialty? Has it turned out to be what you hoped for, what you envisaged, what you thought you will be doing?
- 2. Maybe the specialty is fine but, are you happy at your workplace? Is it the system you find yourself trapped in or a particular colleague, line manager or senior making your job difficult?
- 3. Work is fine, workplace is fine, but are you feeling unacknowledged, caught in a monotonous routine with no career progression, no positive challenges?
- 4. Is your workload unmanageable and increasing possibly the most common reason for burnout3?
- 5. Maybe you want to do more take more responsibility, leadership, non-clinical activities and find yourself unsupported and obstructed to do that?

Take a step back and identify the problem. When you do that, the only way to tackle it is heads on. If this is something you are going to do for life, it is worth investing time and effort in, even if it feels difficult now. Change specialities, change jobs, change NHS Trusts if things are difficult and not likely to change even after negotiation and job planning. Otherwise you risk looking back after a decade and wishing you could have taken different decisions at the right time.

THINK OF TECHNIQUES WHICH WORK FOR YOU

The first advice usually given to professionals is to reduce the amount of work to reduce burnout. As a new consultant I was noticed by senior colleagues to be taking on a lot of extra work in teaching, training and research. 'Don't', said one of my colleagues when I was speaking to him about a University course I was organising pretty much singlehandedly.

'You cannot do this year after year'.

I continued organising that course year on year until the present time. It was on a clinical area of expertise I believed in and was passionate about. Subsequently I joined an international panel of trainers on the topic, progressed through the honorary titles of the University to Professorship and currently continue to work on embedding the training wider.

Personally I found I was someone who was driven to do more. I took up projects I believed in, which would make a change, which had specific aims.

Doing less is not always the answer. It is the quality of work and what brings satisfaction to the doctor that matters. Work part time if it suits you, work purely clinically with no additional teaching, research or management responsibilities if that is what you enjoy.

It would seem reasonable advice to say 'don't take work home'. But think for yourself. If catching up with a few deadlines in a few hours over the weekend means that you start Monday with no backlog that is better than feeling the mounting pressure of falling behind. You need to work out what suits you. Virtual Private Network and the choice of working from home has certainly made life easier for me on many counts but I do agree that keeping at least one weekend day free from the laptop is essential.

There is no one size fits all solution for everyone.

BE CREATIVE ABOUT SOLUTIONS

Over the years in the United Kingdom, juggling a full time consultant job, educator responsibilities and home life, I found outlets I would never have thought about some years ago. I took up dancing and passed Bharatanatyam examinations, I started running and have done half-marathons; I travelled extensively and started travel writing. I started solo travel. Female solo travel is a world altogether.

More than ever, I felt solidly grounded in a Bengali social circle with whom, I share cultural interests. Even better I found a group of likeminded women who have been the best support, advisers and companions throughout. Overseas doctors need to form a 'pseudo-family' in the UK and a social network outside work. Cultural isolation is difficult to bear.

Regular exercise, yoga, healthy eating, talking to people, social networks - all of these worked for me. But again, find something that works for you.

Do not feel pressurised into doing what others are doing. Friends might be running but you might be more of a walker. Or maybe you like the treadmill more! Online exercise programmes are accessible and abound in variety and time lengths. Learn to hula - hoop while watching television perhaps. There are a variety of exercise options. In short, there has to be more than the 9-5 work to sustain doctors. What you decide for yourself has to be something that makes you really happy and satisfied.

There is something there for you - find it.

THE STANDARD ADVICE

There is standard advice which seems simplistic but these do go a long way. Take all your annual leave even if you are not going anywhere. Take all your study leave and use your entire study budget. Spend time with your family, you have to. Talk to them, about everything and anything. Make time for yourself a hot bath, a late morning, swapping cooking for a takeaway once in a while, reading a book in bed. The usual advice still works but only if you have tackled the roots of what is burning you out. Otherwise these become sticking plasters, a distraction to a mounting problem which at one point will grow to undeniable proportions.

WHO DO YOU WORK FOR? WHY DO YOU DO WHAT YOU ARE DOING? WHAT ARE YOU WORKING TOWARDS?

Work needs to have a purpose. Doctors need to ask, what drives them, what do they get satisfaction from. Just as they need to ask if they feel burnt out, what is making them unhappy; and so they need to be clear to themselves what the job is about.

Yes, we all came into medicine for helping people, to feel the satisfaction of seeing people get better, saving lives. Seeing treatment work effectively is immensely rewarding but we are human and it is okay to have some interest for ourselves. We need to be honest about what we get out of our jobs in return for what we do. Financial rewards are not just money they are an acknowledgement of what we do. A doctor doing a busy job but being paid 14 Programmed Activities (PA) is being acknowledged financially. A doctor doing a 12 PA job with the job plan of 10 PAs is not just underpaid, they are

unacknowledged as well.

Is doing a good job for your caseload sufficient or do you want to be the person who changes systems?

Do you want to bring change locally or nationally?

Does the networking, the challenge of change motivate you?

A job without a clear purpose becomes a drill. A drill for thirty years is difficult to look forward to.

REFLECTION IS NOT JUST FOR APPRAISAL **RECORDS**

I have heard many colleagues laugh about the 'reflections' we are all expected to do for the portfolio. The appraisal process itself is often ridiculed as a tick box, a paper exercise for the system, not for the doctors.

Let us look at it this way. Appraisals and portfolios are here to stay. We might as well make the best use of the time to think through what is happening with our careers, where we want to go, to think beyond getting through the admin and deadlines of the week ahead.

We do complex jobs and within the regular pressures it is not unusual to lose sight of a bigger picture. Sometimes we need to step back and think, step back and reflect.

CONCLUSION: BE HONEST TO YOURSELF

We need to be mindful of the risks of stress and burnout all doctors face. In tackling these issues though, the central task is to be honest to one self. It is too easy within our easy jobs to stop thinking about ourselves and when we do, we try and convince ourselves in the way we are expected to. Doctors are meant to be hard working, doctors are meant to be selfless, doctors are meant to keep working without complaint and most of all doctors are resilient - idealistic expectations but not universal truths.

It is okay to want acknowledgement and reward as much as we give to our patients and to admit what keeps us going if we are to prevent burnout and deal with stress. After all we can give to society and our patients only if we survive as well functioning clinicians.

The universal truth is doctors are human as anyone else.

- Identify the problem
- Find creative solutions which work for you
- Reflect truly and effectively, beyond appraisals
 - Who do you work for?
 - Why do you do what you are doing?
 - What are you working towards?
- Be honest to yourself



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