

BURN-OUT
Compassion Class Apr 2011

I. INTRODUCTION

- A. I'm going to talk with you about burn-out. The way this topic fits into your class I think is that it is about turning compassion inward, showing some compassion toward yourself.**
- B. Burn-out can happen to anyone**
- 1. About 20 years into my career, I'd climbed the academic ladder. I was doing more and more administration, culminating in being interim chair of my department. And I was more and more miserable. One day I told my husband I was thinking of quitting. To my surprise, he didn't argue with me, but just said, "Okay, we'll make it work. But is there anything you'd like to do before you leave?" I thought about it, and finally said, "I'd like to teach a class on literature and medicine," which was crazy because I'd never taught anything in that area before. It took me a year to put the course together and get it approved, but finally I taught the class. That one experience brought me back to a lot of direct involvement with medical students and teaching, which I loved, reminded me of why I'd gone into academia in the first place, and led to my developing a whole new program and dimension to my career which I found satisfying and rewarding.**
 - 2. So I was in mid-life when I burned out. But it can happen at a much younger age. I remember a medical student who went to Uganda on a medical mission. When she left, she was excited and eager. But when she returned, she was bitter and cynical. She and the other volunteers had lived in unbelievably difficult and primitive conditions. The medicine available was also very primitive by American standards, so that she saw many patients die, including children, whom she knew could have been saved in this country. Worse, the mission was torn by internal strife, ego clashes, and petty conflicts. "After awhile," she said, "I just stopped caring."**
- C. Has anyone here seen the Andrew Lloyd Weber musical Jesus Christ Superstar? It's a musical about... well, Jesus. One scene in the movie version I think speaks to burnout.**
- D. In this scene Jesus is wandering alone in the desert. Suddenly, from behind a rock a leper appears, or as we would say today, someone with Hansen's disease. The leper walks painfully toward Jesus, who talks with the woman a bit about her family, what it's like living in the desert. Jesus examines the leper thoroughly, takes a history of present illness, then reaches out his hand and touches her. Miraculously, Jesus being Jesus, the woman is healed!**
- E. Jesus is happy and the woman is really happy, and she runs off, presumably to reunite with her soon-to-be-very-happy family.**

- F. Jesus keeps walking and a couple of other lepers appear. Jesus talks with them, examines them, touches them, and BOOM, same miracle. Everyone is still pretty happy.
- G. But then more and more lepers start pouring out from the caves and crevices. You can see that Jesus is getting a little tense. He doesn't really have time to talk with his patients any more. He has to touch more and faster. The lepers are getting annoyed that they have to wait in line to see Jesus, and Jesus is starting to feel frustrated and overwhelmed.
- H. Then the camera pulls back, and we see the entire desert is filled with thousands of people, the halt, the lame, and the blind, all coming toward Jesus, and beseeching his help.
- I. Jesus throws up his hands, and gives a cry of despair.
- J. So what's wrong with Jesus? He has burn-out.
- K. I share this anecdote because if, at least in some depictions, even Jesus can have burn-out, then so can the rest of us.

II. What is Burn-Out?

Burn-out is primarily a professional, not a personal phenomenon (e.g., like depression), but it can have devastating personal consequences

- A. Emotional exhaustion – losing enthusiasm for work
- B. Depersonalization – treating people as objects
- C. Lowered sense of accomplishment – work is no longer meaningful
- D. Chronic irritability, negativity, and pessimism

III. Here is an animated portrayal of burn-out. Imagine these are two medical residents (and not two bears) talking to each other

IV. You might not have experienced burn-out exactly at this point in your lives, but try to connect with the idea anyway.

- A. Turn to the person on your right and share an experience of burn-out or compassion fatigue
- B. Think about jobs you've held, pressures from school, a really hard class, volunteer experiences

V. Burn-out is a significant risk for health professionals

- A. You've chosen a field with a significant risk of burn-out
- B. Doesn't mean you should become stockbrokers, but it does mean you should put time into anticipating how you might cope with burn-out

VI. Stigma and Other Reasons Not to Talk about Burn-out

- A. Saying you're burned-out sounds uncompassionate
 - You're supposed to care about others
 - It seems selfish
- B. The machismo ethic in medicine, and in premedicine, which unfortunately is still alive and well, says that real doctors (or pre-meds) should be too tough, too dedicated, to feel burned-out.

- There's something kind of wimpy about saying you're burned out
- C. Then there's the boomerang effect – talking about burn-out will just make it worse

VII. Busting Burn-Out Myths

- A. Selfishness: The heart beats to itself first
 - Rachel Naomi Remen: You should give from a place of abundance
 - Overflowing, rather than scraping the bottom of the barrel
- B. Wimpishness: Actually takes courage to admit burn-out
- C. Acknowledging burn-out is the only way to begin to solve burn-out

VIII. Burn-Out is Widespread in Medicine

- A. 30-60% of specialists and general practitioners report burn-out
- B. 55-67% of physicians in private practice report burn-out
- C. Younger physicians have twice the burn-out incidence of older colleagues
- D. At any given time, approximately 1 of every 3 physicians is experiencing burnout

IX. Sources of Burn-Out in Medicine (and Pre-Med)

A. Medicine	B. PreMed
Time pressures and intense professional commitment (workload)	Bio-sci major
Bureaucratic burden (paperwork)	Pointless, time-consuming work
Worry about specialty choice	Worry about pre-med choice
Practice setting/lack of control over practice environment	University environment
Sleep deprivation	Sleep deprivation
Problematic relationships with peers	Competitive pre-med atmosphere
Questions about professional competence	Questions about whether you are good enough to go to medical school
Dealing with death and dying	
Dealing with medical mistakes	
Lack of motivated, grateful patients	Lack of appreciation, understanding from families, friends
Problems with work-life balance	Problems with work-life balance

X. Professional Consequences of Burn-Out

- A. Burnout alters both physician-patient relationship and quality of patient care
- B. Burnout/professional satisfaction related to suboptimal patient care
 - physicians who are burned-out express less empathy and compassion,
 - they tend to prescribe more unnecessary drugs,
 - they tend to make inappropriate referrals,
 - their overall professionalism is lower
 - and their likelihood of making medical errors is greater
 - One study, residents who were burned-out reported more medical mistakes

C. Burnout also related to

- patient adherence to recommended therapy (pts of burned-out physicians are less likely to comply with medical regimens)
- have less trust/confidence in physician,
- less satisfaction with medical care

XI. Personal Consequences of Burn-Out

- A. Depression, anxiety**
- B. Divorce, broken relationships, and disillusionment**
- C. 55% of physicians reported their family and personal life had suffered as a result of their profession**
 - And these were **CANADIAN** physicians!
- D. Substance abuse, intent to leave medical practice, and suicide**

XII. Are You at Risk For Burn-Out?

- A. The more questions you answer yes to, the greater your risk.**
- B. When I read these questions, at least some of them sound like a lot of people – a lot of doctors and residents, and even some medical students – I know**
- C. So stand in line behind Jesus Christ Superstar.**

XIII. Warning Signs of Burn-Out

- A. If you begin to see these signs, you know you are in trouble.**
- B. Especially pay attention to the last one, “Workaholism.” This is my favorite response to burn-out – just work harder, sleep less – and believe me, in the end it doesn’t work.**

XIV. Responses to Burn-Out

- A. When people are burned out, we see them do the following**
 - begin to compromise their work
 - blame the system or their patients (or other people – teachers);
 - abandon their humanistic ideals;
 - whine and complain;
 - become detached from patients (or those they are trying to help), and increasingly isolated and withdrawn from everyone else
- B. Being burned-out is not a happy place. Being burned-out sucks.**

XV. Waiting Out Burn-Out?

- A. Belief that “things will get better” when the training period is over is a dangerous myth**
- B. “Physicians who sacrifice their personal lives during training believe they will reap the rewards of a balanced life after graduation. Unfortunately, without skills to clarify and prioritize values or to develop a personal philosophy that integrates professional, personal, and spiritual domains, such balance does not easily occur” - T.E. Quill and P.R. Williamson, Healthy approaches to physician stress. Arch Intern Med**

XVI. Don't panic – not completely! There are ways of hanging on to who you are

XVII. Is Detachment the Answer to Burn-Out?

- A. When we feel emotionally overwhelmed, it seems commonsensical to detach ourselves, withdraw emotional investment**
- B. Move from an I-Thou relationship to an I-It- relationship (look at pts as objects, as tasks to be completed)**
- C. No evidence that emotional detachment improves either**
 - Patient clinical outcomes or**
 - Physician wellbeing**
- D. Emotional detachment is a symptom of burn-out, not a solution**

XVII. Can *You* Avoid/Cope with Burn-Out?

- A. Turn to person on your left**
- B. Exchange ideas about how to protect yourself against burn-out; what you've done to cope with burn-out or how you imagine you would cope with burn-out**
- C. Share best ideas**

XVIII. Wellness Strategies Used by Physicians

A. Relationships

- Reducing isolation personally and professionally**
- Be open with family and friends**
- Share stories with colleagues/peers – don't neglect emotional, existential aspects of being a physician (student/pre-med)**
- Pay attention to relational aspect of your work (relationships with patients, colleagues/fellow students, professors)**

B. Religious Beliefs/Spiritual Practice

- Religious observances**
- Prayer, meditation**
- Reading inspirational texts**
- Renewal through nature**
- Reconnecting with what provides joy and meaning**
- Focusing on gratitude**
- Self- and other-forgiveness**
- Personal reflection**

C. Positive involvement with everyday practice/activities

- Looked at from a different perspective, what's killing you can also heal you**
- Finding meaning in work (schoolwork)**
- Empowering self to make choices (control what you can control)**
 - Look for ways to express creativity and involvement (so you are personally engaged with what you do, you make it unique and your own)**
 - Managing time/schedule**

- Discontinuing unfulfilling aspects of work/school (drop a class that's unfulfilling)
- Practice being fully present with patients/others (focus on the patient/other, not on self)
- Accept "gifts" patients/colleagues/supervisors/teachers give
- Rediscover medicine/work/studies as a "calling"
- Look for awe and wonder in medicine/work/studies

D. Self-care

- a. Exercise, diet, sleep
- b. Breathing and relaxation techniques
- c. Cultivate personal interests
- d. Practice self-awareness (journaling, reflecting on the day – what can you learn?)
- e. Practice self-compassion – be kind to yourself
- f. Do something fun

E. Life philosophy

- Positive outlook
- Identify and be able to act on your values
- Balance between personal and professional

E. Remember you have options

- g. Take time off
- h. Reach out for help – family, friends, professionals

XIX. Final quote – the way to counteract burn-out is not to close down your heart, but to open your heart, to have the courage to let it break occasionally and not be disheartened by this

Being openhearted, maintaining an attitude of compassion toward yourself and toward others, is ultimately the best antidote to burn-out