

## **FM REVIEW 2018 22 COMMENTS**

**COMMENTS TO EDITOR:** This is a fairly good piece by an author who has submitted many essays to us, of which we have published more than a few. The essay addresses the well-worn yet timely topic of compassion fatigue. The most interesting part of the essay for me is the parallel she draws between a patient suffering from compassion fatigue and her own situation. I like this recognition of mutuality between patient and doctor. The essay goes on to make a point about the importance of self-care, but does so in a rather unnuanced way that almost makes the patient sound like the enemy. With some thoughtful revision, this should be a worthwhile essay for the journal.

**COMMENTS TO AUTHOR:** This essay grapples with the much-addressed but still vitally important topic of compassion fatigue. I like your approaching this topic through a patient's perspective - creative and original - then transitioning to your own situation. This parallel between patient and physician is very perceptive, and acknowledges the commonality of struggles between the two, which I find refreshing. The main concern of reviewer 2 and myself is that your call for self-care sounds almost as though you are casting aside altruism, which seems a rather unnuanced position to take. Please consider Reviewer 2's point that in medicine, sometimes physicians DO prioritize patients' needs over their own; sometimes the reverse is true. It's a complex issue, and deserves a somewhat more thoughtful discussion. I think it would also help if you could acknowledge the paradox that by caring for yourself you are actually BETTER able to care for your patients (if this is the case); and perhaps add a concluding sentence that illustrates this synergy.

Finally please do some careful editing of the paper to correct typos and ensure clarity.

**COMMENTS TO EDITOR II:** The author has done a careful job of revising this submission. She wrestled with the concerns of reviewer 2 and assistant editor that her discussion of the altruistic requirements of medicine vs. the needs of the physician was not sufficiently nuanced. In the end, she changed the word "interests" to "needs" in several places, to emphasize that self-care is not merely a desire on the part of the physician, but rather a response to compelling need. Since the essay is meant to reflect the personal experience of the author, rather than the beliefs of reviewers and editors, I would recommend that we accept these changes as sufficient.

Before accepting the essay, I would like the author to approve a handful of fairly minor edits I recommend below.

**COMMENTS TO AUTHOR II:** Thank you for your meticulous edits, which have made the essay flow much more smoothly. Thank you also for your careful consideration of concerns regarding balancing patient and provider needs. I agree that the word change to "needs" suggests that you are not talking about self-indulgent desires or wants on the physician's part, but fundamental human needs that must be acknowledged and addressed.

Before we can accept your essay for publication, we would like you to approve a few fairly minor suggested changes in the attached; or rewrite these sections.

1) Did you mean to delete the title "I've Had Enough!" I think this reflects the content of the essay very well and hope you decide to retain it.

2) I recommend on p. 2 top of page deleting the conversation about metformin and HgA1C. I don't think this information is really relevant to your essay. Also, my recommendation is that you conclude that paragraph with the line that ends "...Mrs. Palmer wasn't irrevocably lost or broken." This is a really strong line, and you step on it somewhat by what follows.

3) Two other changes (pg. 1, final two lines; pg. 2, last paragraph, line 4) are purely stylistic recommendations.

I particularly appreciated that you could "diagnose" compassion fatigue and burn-out in your patient and then relate it to your own professional experience. This parallelism should be illuminating to the journal readers.

**COMMENTS TO EDITOR:** The author has graciously made all recommended changes which by and large were quite minor and merely stylistic. She has removed a rather extraneous discussion of the patient's HA1c levels and deciding not to resume medication; she also revised a related paragraph to emphasize the central message that there was hope for the patient's compassion fatigue.

This essay is an interesting reflection on the parallelism between patient and physician burn-out. It raises a thought-provoking issue about how both should be addressed. The essay now reads well, is coherent and focused, and is ready to be accepted for publication.

**COMMENTS TO AUTHOR:** Thank you for accepting the recommended very minor edits. The essay reads very well and is focused on what I have always found to be an interesting theme, i.e., the parallelism between patient and physician burn-out. It should stimulate valuable introspection and awareness in readers.