Physician Stress and Burnout: Prevalence, Cause, and Effect

Alan H. Rosenstein, MD

A nationwide, multispecialty survey of more than 2,000 physicians conducted by Physician Wellness Services and Cejka Search in late 2011 found that almost 87 percent of respondents felt moderately to severely stressed and burned out on an average day, and almost 63 percent admitted feeling more stressed and burned out now than they did 3 years ago.

More than just defining prevalence, however, the survey delved into the causes and effects of stress and burnout in almost every area of physicians’ lives—including external, work, and personal, life-related factors. The results are thought-provoking, and the implications are enormous for both individuals and healthcare organizations.

Because of their stress and burnout, physicians reported the following:

- Decreasing job satisfaction
- Decreasing productivity
- Insufficient work/life balance
- Conflict at work and at home
- Feelings of irritability, moodiness, anger, and hostility
- General tiredness, lack of sleep, and difficulty sleeping
- Negative impacts on physical health
- Negative impacts on mental health, such as depression and anxiety or symptoms such as apathy, cynicism, and less interest in engaging with others or in normal activities
- Patient safety–related concerns such as difficulty making decisions, communicating effectively with others, and increased risk of medical errors

Often, these effects are interrelated, blurring the line between cause and effect. As one respondent pointed out, tiredness and lack of sleep can result in medical errors. Decreasing job satisfaction can tie to depression, as well as to an insufficient work/life balance, which can tie to problems with family and coworkers.
Healthcare organizations that fail to deal with stress and burnout in their physician population can experience unfortunate consequences, including increased retention and turnover challenges, reduced productivity and lower morale, and issues with patient safety and physicians’ mental and physical health.

Physicians experience similar consequences and more. Job and career dissatisfaction and lower morale create what may seem like a never-ending downward spiral of stress, as do concerns about patient safety impacts, potential medical liability suits, and the effects on one’s own mental and physical health. Over time, this cycle of stress can become debilitating and strike at the core of one’s sense of wellbeing.

**Stressors for physicians**

External factors causing physicians to feel stressed and burned out largely centered on three things: the overall state of the U.S. economy (52 percent of respondents), healthcare reform (46 percent), and policies being implemented by the Centers for Medicare & Medicaid Services (CMS) (41 percent). Although several other factors were mentioned, these three were clearly the most important. They are also factors over which physicians and healthcare organizations have little or no control.

The leading causes of work-related stress and/or burnout are shown in Fig. 1; the leading causes of personal life-related stress and/or burnout are shown in Fig. 2.

Unlike external stress factors, work and personal life stressors are areas that physicians and healthcare organizations can address.

**Effects of stress**

The top three effects of stress and or burnout on work overwhelmingly centered on lowered job satisfaction (51 percent) and the desire to change jobs, practices, or careers, or to retire (a combined total of 95 percent, although these responses are not additive and reflect some overlap). In fact, 14 percent of respondents said that they had already made a job or career switch as a result of stress and/or burnout, and 85 percent of them reported that the change had helped address their stress and burnout.

Other effects include the desire to work fewer hours; conflict with administrators, peers, and/or nonphysician coworkers; issues with communicating effectively and making decisions; and work-related errors and other patient safety concerns.

Stress also affects personal lives, resulting in general feelings of tiredness, less sleep or problems sleeping, and general feelings of irritability and moodiness. Other often-cited effects include conflicts with a spouse, partner, friends, and family, as well as physical and mental health issues.

These results tell of tired, overworked, and discouraged physicians for whom conflict at home and work, fear of malpractice, and not enough sleep are daily facts of life. Indeed, for some
physicians, it’s a vicious circle: Their stress due to work and home concerns causes them to act or perform in ways that most of them recognize are suboptimal and may even affect patient safety, which, in turn, causes more stress.

**Helping stressed-out physicians**
The survey asked what physicians were doing on their own to try and address stress and burnout in their lives. The top two choices were exercise and spending time with family and friends. Other popular responses included the following:

- Taking vacation or time off
- Watching movies or listening to music
- Reading
- Getting more sleep

More traditional self-help activities—taking part in coaching or mentoring, yoga, meditation or collegial support—were not as prevalent. Many physicians noted that finding the time and, in some cases, the money to do something to relieve stress was a challenge.

About 16 percent of respondents said their organizations were doing something to help physicians deal more effectively with stress and/or burnout. When asked what was offered, the most common responses were wellness initiatives, workshops and education, onsite exercise facilities or classes, and Employee Assistance Programs, counseling, or other behavioral health services.

The problem, however, seemed to be finding time to use such services, especially during normal clinical hours. Interestingly, almost 5 percent of these respondents said that they were aware of options, but didn’t know any specifics.

When asked what organization-sponsored offerings might be most helpful in reducing stress, nearly two thirds of respondents suggested more ancillary support or staff support, such as physician aides, to deal with things like paperwork and charting. Other options included onsite exercise facilities or classes, wellness initiatives, workshops and education on managing and coping with stress and burnout, concierge-type services, and coaching and mentoring resources.

**What can be done?**
In the end, the following three primary areas were repeatedly identified as ways to help physicians’ address stress and burnout:

- More time—and more control over their time—for the things that are most important to them at work as well as for their personal lives and interests.
- More opportunities for self-care, such as exercise and other wellness activities. This is what most physicians are currently trying to pursue on their own and was cited at almost
equivalent levels to more time.
• More support in helping them more effectively deal with the stress and burnout in their lives. This thread ran through several responses—not only coaching, mentoring and collegial support, educational opportunities, and wellness initiatives, but also support, respect, and recognition from administration for their efforts and contributions.

*Alan H. Rosenstein, MD, is medical director for Physician Wellness Services, Minneapolis.*

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