

Few surgeons seek help for suicidal thoughts

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As many as one in 16 surgeons reported having suicidal thoughts in the previous year, but few sought help from a mental health clinician, according to a report in the January issue of *Archives of Surgery*.

Death from suicide is more common among physicians than among the general population or among other professionals, according to background information in the article. "Although suicide is strongly linked to depression, the lifetime risk of depression among physicians is similar to that of the general U.S. population," the authors write. "This observation suggests that other factors may contribute to the increased risk of suicide among physicians. Access to lethal medications and knowledge of how to use them has been suggested as one factor; however, the influence of professional characteristics and forms of distress other than depression (e.g., <u>burnout</u>) are largely unexplored."

Tait D. Shanafelt, M.D., of Mayo Clinic, Rochester, Minn., and colleagues surveyed members of the American College of Surgeons in 2008. The anonymous survey included questions regarding suicidal ideation (thoughts or plans of suicide) and the use of mental health resources, a depression screening tool and assessments of burnout and quality of life.

Of 7,905 participating surgeons (a response rate of 31.7 percent), 501 (6.3 percent) reported thoughts of suicide during the previous year. Older surgeons were more likely to report suicidal thoughts—surgeons age 45 and older had 1.5 to three times the rate of suicidal ideation of the general population. Being married and having children were



associated with a lower likelihood of suicidal thoughts, and the risk was higher among those who had been divorced.

"The perception of having made a major medical error in the previous three months was associated with a three-fold increased risk of suicidal ideation, with 16.2 percent of surgeons who reported a recent major error experiencing suicidal ideation compared with 5.4 percent of surgeons not reporting an error," the authors write. Suicidal thoughts were also strongly associated with distress, depression and with all three domains of burnout: emotional exhaustion, depersonalization and low personal accomplishment.

Of the surgeons with <u>suicidal thoughts</u>, 130 (26 percent) sought help from a psychiatrist or psychologist, whereas 301 (60.1 percent) were reluctant to do so because it might affect their medical license. Among the 461 surgeons (5.8 percent) who had used antidepressant medications within the past year, 41 (8.9 percent) had self-prescribed and 34 (7.4 percent) had received the prescription from a friend who was not formally caring for them as a patient.

Reluctance to seek care is likely reinforced by the fact that 80 percent of state medical boards inquire about mental illness on initial licensure applications and 47 percent do so on renewal applications. However, many focus not on whether a mental health condition is present but whether it is an impairment, the authors note.

"Additional studies are needed to evaluate the unique factors that contribute to the higher rate of suicidal ideation among <u>surgeons</u> in conjunction with efforts to reduce surgeons' distress and eliminate barriers that lead to underuse of <u>mental health</u> resources," they conclude.

More information: Arch Surg. 2011;146[1]:54-62.



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