

Mayo Clinic study finds widespread medical resident burnout and debt

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Feelings of burnout persist among internal medicine residents despite significant cutbacks in duty hours for doctors-in-training in recent years, a national study by Mayo Clinic found.

A poor quality of life took a toll on performance: [Stressors](#) affecting well-being such as lack of a work-life balance contributed to lower test scores on a standardized exam. Residents reporting a quality of life "as bad as it could be" and daily [burnout](#) symptoms attained mean scores nearly 3 percent lower than their counterparts with a good quality of life.

Heavy student debts made things even worse. Residents more than \$200,000 in debt had mean scores 5 percent lower than debt-free colleagues, according to the study, published in the Sept. 7 issue of the [Journal of the American Medical Association](#).

Researchers surveyed and tested 16,394 residents in training in the United States in 2008-09, a number representing three-fourths of U.S. internal medicine residents. The study, overseen by Mayo Clinic general internist and biostatistician Colin West, M.D., Ph.D., co-director of the Mayo Department of [Medicine Program](#) on Physician Well-Being, reveals that 51.5 percent of residents reported burnout symptoms, 45.8 percent noted [emotional exhaustion](#) and 28.9 percent had feelings of depersonalization, reflected in cynicism and/or callousness.

Of the responding residents, 14.8 percent rated their quality of life as "bad as it could be" or "somewhat bad." On [work-life balance](#), 32.9

percent reported being somewhat or very dissatisfied.

"Physician well-being is extremely important for the physician, but also for patients," Dr. West says. Physician burnout, depression, job dissatisfaction, and low quality of life can harm patient care by contributing to major medical and medication mistakes, poor care practices and patient dissatisfaction. While the researchers do not have [patient data](#), the study is another building block for the case that physician distress is related to [patient outcomes](#), Dr. West says.

"Our intent in this study was to first document these issues nationally on an unprecedented scale. We then looked at how some of these distress issues might relate to medical knowledge, knowing that there is other evidence that test scores are related to care quality," he says. "We also wondered if debt was a major burden on residents that would manifest itself in poorer quality of life and increased burnout."

The study found markedly lower quality of life and satisfaction with work-life balance, and increased burnout, among those with debt, especially those owing more than \$200,000. Median debt for medical students across the United States is \$160,000, Dr. West says.

Distress remains common despite notable reductions in duty hours for residents since 2003. Burnout was less common among international medical school graduates, who also reported lower debt loads than U.S. medical school graduates. The survey found burnout decreased as the year of training progressed, but depersonalization symptoms increased after the first of three years in training. Women and primary care program [residents](#) reported more symptoms of emotional exhaustion and depersonalization.

The frequency of resident distress and its association with lower-quality patient care may argue in favor of further protections during physician

training against fatigue, lack of resources and support and work overload, he says.

"We hope that now that we have established national numbers for these distress variables, we can perhaps focus less effort on documenting the problem and turn greater attention to how best to improve the situation," Dr. West says.

More information: <http://jama.ama-assn.org/>

Provided by Mayo Clinic

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