

High levels of burnout among UK family doctors, especially in group practice

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Levels of burnout in UK general practice are high, suggests a study of general practitioners (GPs) in one area of South East England, published in *BMJ Open*.

Male doctors, those who work in group practices, and those who repeatedly see the same patients seem to be at significantly greater risk, the research shows, prompting the authors to declare that "a significant group of doctors is in trouble."

The researchers base their findings on a survey of 564 out of 789 eligible GPs working in the county of Essex, who were assessed for burnout, using a validated measure (the Maslach Burnout Inventory, or MBI).

The MBI assesses burnout by measuring emotional exhaustion; depersonalisation, expressed as <u>negativity</u> and cynicism; and a reduced sense of personal accomplishment.

The results showed that almost one in two of the <u>respondents</u> (46%) fitted the criteria for <u>emotional exhaustion</u>, while more than four out of 10 (42%) were depersonalised. And one in three (34%) felt they were not achieving a great deal.

A high score for one of the components was linked to high scores in the other two.

Male doctors were significantly more likely to be depersonalised than



women doctors, as were those who had been qualified under 20 years ago compared with those who had been qualified for longer.

The authors suggest that the <u>gender differences</u> may be explained by a larger number of women doctors working part time or that women doctors are more patient centred than their male colleagues, which may boost professional satisfaction.

Depersonalised doctors were significantly more likely to work in group practices, rather than as single-handers, a finding the authors describe as "disappointing," given that, in theory, group practice should offer more support.

"The finding could be the result of group practice creating extra demands on practitioners while raising the possibility of interpersonal tensions and conflicts," suggest the authors: "Regardless of cause, these findings are worrying as group practices are increasing in size and number," they add.

Depersonalised doctors were also significantly more likely to repeatedly see the same patients.

Burnout, however, did not seem to interfere with doctors' professionalism. The results of a validated rating survey (DISQ) of 38 doctors, involving almost 1900 patients and 760 consultations, indicated no detrimental impact on their interpersonal skills or patient centredness.

The authors emphasise that their findings relate to doctors in one area of England, so may not be applicable across the UK, but confirm that this is the largest number of GPs ever to complete an MBI.

"Whatever the reasons [for depersonalisation], a significant group of doctors is in trouble," conclude the authors, citing previous research



indicating that GPs who distance themselves as a coping mechanism, evoke, over time, more demanding patients.

The results warrant attention from doctors themselves, their professional bodies, and the NHS, say the authors, warning: "The NHS nationally and locally needs to review its policies, especially when generating increased pressures for this, the largest group of NHS doctors."

Provided by British Medical Journal

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