

Nearly half of resident physicians report burnout

September 18 2018



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Resident physician burnout in the U.S. is widespread, with the highest rates concentrated in certain specialties, according to research from Mayo Clinic, OHSU and collaborators. The findings appear on Tuesday,

Sept. 18, in the *Journal of the American Medical Association*. Physician burnout is a dangerous mix of exhaustion and depersonalization that contributes to physicians making mistakes while administering health care.

The study found 45 percent of respondents experienced at least one major symptom of burnout, with those in urology, neurology, emergency medicine and general surgery at the highest risk. Regardless of specialty, high levels of anxiety and low levels of empathy reported during [medical school](#) were associated with burnout symptoms during residency.

"Our data show wide variability in the prevalence of burnout by clinical specialty, and that anxiety, social support and empathy during medical school relate to the risk of burnout during residency," says Liselotte Dyrbye, M.D., a Mayo Clinic researcher and first author of the article.

Residents with burnout had more than a threefold increase in odds of regretting their decision to become a physician. When asked, "If you could revisit your career choice, would you choose to become a physician again?" those in pathology and anesthesiology were also most likely to respond "definitely not" or "probably not." Similarly, the higher the level of anxiety reported during medical school, the greater the chance of regretting becoming a physician.

Previous research has shown physician burnout has some relation to gender and ethnicity. Residents who identified as female had a higher risk of burnout symptoms, matching studies of later-career physicians.

Although the problems facing female physicians have been reported, the study illustrated the less-studied plight of residents who self-identified as Latino or Hispanic. These individuals were more likely to regret their specialty choice. While the study did not examine the cause directly, the authors speculate that minority physicians often are pressed into

participating in various institutional diversity initiatives that overtax their schedules compared to nonminority physicians.

Not all of the study's findings were negative. The majority of residents are satisfied with their career choice and specialty. In particular, participants who reported high empathy scores during medical school appeared to be more resilient to burnout during residency. This is counter to the common narrative that physicians need "thick skin" or an emotional aloofness to perform. Similarly, high empathy scores during medical school were associated with a willingness to choose the same specialty again. In addition, participants who reported higher emotional social support during medical school were generally happier with their specialty choice.

Other burnout studies have focused on physicians-in-practice. This was the first national study to longitudinally follow medical trainees from the beginning of medical school into residency to explore predictors of burnout. The study included nearly 3,600 participants who were surveyed in the fourth year of medical school with follow-up in second year of residency. It was derived from a larger study of medical students called the Cognitive Habits and Growth Evaluation Study that has tracked a group of students from their first year of medical school through the last year of residency.

About 50 medical schools were included in the research. Residents were asked to provide information about their specialty, ethnicity, educational debt and other demographic characteristics. They then completed surveys that have previously been developed to measure anxiety, emotional social support, empathy and [burnout](#).

More information: *Journal of the American Medical Association* (2018). [jamanetwork.com/journals/jama/ ... 1001/jama.2018.12615](https://jamanetwork.com/journals/jama/.../1001/jama.2018.12615)

Provided by Mayo Clinic

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