

Doctors face a dilemma when seeking mental health assistance for themselves

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It's no secret that physicians have stressful jobs. Figuring out how to mitigate and deal with that stress can be a key part of a successful medical career. But while individual physicians seek and find help for their mental health issues privately, the prevailing public perception among physicians is that it just isn't done.

Sourav Sengupta, a University at Buffalo faculty member, knows all about it. An assistant professor of psychiatry and pediatrics in the Jacobs School of Medicine and Biomedical Sciences at UB, who also treats patients, he reached a point a few years back where he knew that escalating professional and personal demands were impacting his effectiveness.

Last month, *JAMA* Network online published his essay, "Rebuilding more of me," about how he worked through his issues with the help of a therapist. He wasn't sure how it would be received, but in the few weeks since its publication, he has received personal email messages from dozens of physicians from across the U.S. who reached out to share perspectives and their experiences.

Since publication, Altmetric rated the essay in the top 5% of publications; it has been viewed more than 6,500 times and downloaded more than 500 times. Sengupta has received emails from physicians at every career stage, who tell him it was a relief to read it, to know that others have also gone through this and have succeeded.

'I am an attending physician in the field from which I seek support'

The essay describes the difficulty Sengupta felt in figuring out how to access the help he needed. "I am an attending [physician](#) in the field from which I need support," he wrote. "Many of the best clinicians and treatment setting are not options. I know them too well."

Once he found a psychotherapist he could work with confidentially, who wasn't a colleague, he began to open up. Sengupta wrote: "His willingness to acknowledge that clinical work is stressful and can become toxic establishes a life raft upon which I can hoist myself, build

new strategies, and shape a different perspective."

That struggle is behind Sengupta now and he was ready to move on. Besides occasionally discussing his experience with others who might be going through something similar, he didn't consider sharing it more widely.

He changed his mind this past winter, when the Jacobs School held an event on National Physician Suicide Awareness Day. Faculty members who direct UB residencies decided to screen a provocative documentary called "Do No Harm: Exposing the Hippocratic Hoax." The movie and a panel discussion that followed took on the issue of physician mental health and suicide. Alarming statistics were discussed, for example, that among physicians ages 25 to 39, suicide accounts for 26% of deaths compared to 11% in the same age group in the general population.

The event struck a chord. More than 200 of UB's 800-plus medical residents and fellows attended. As Sengupta listened to the discussion that followed the screening, he realized he needed to share his story.

"One of the most distressing themes in the discussion afterwards was how scared or resistant or hesitant the trainees were about seeking any therapeutic support," he recalled. "I had the chance to share a little of my experience and a number of residents wondered aloud if it might be helpful for more attendings and medical education leaders to open up a bit more about these kinds of things.

"I wrote the essay for a very particular reason," he said. "There were hundreds of trainees in the room but the vibe around seeking support was quite negative. It wasn't that people thought physicians shouldn't get help, but that there were lots of factors that would probably keep them from seeking help, such as stigma, having enough time, concern for how it might impact their careers.

"I wrote the essay in the hope that I could convey to other physicians what actually happens when you work with a therapist, that it's a collaborative process that can lead to really positive outcomes."

Sengupta, who directs UB's child and adolescent psychiatry fellowship program, also has a close-up view of the difficulties that students and especially medical residents undergo.

"I do see them struggling sometimes," said Sengupta. "Medicine is such a challenging field to be in in this day and age. Trainees are such a critical part of the system and at the same time, they probably need far more support than they are getting. It can be a tough system to work in. You can lose track of what brought you into the field."

Self-stigmatization

Among the factors contributing to physicians' reluctance to seek help are the traits that led them to medicine in the first place, Sengupta said.

"Who is the type of person that ends up wanting to be a physician and then succeeding?" Sengupta asked. "We are pretty intelligent and we're hard-working but we are probably not talking about the struggles we're having. We're internalizers."

At the same time, the nature of medical training itself also contributes. "The training values toughness and grit and perseverance. That shouldn't be to the exclusion of getting help and support but somehow it can be translated into that. Taking care of oneself can seem to represent weakness or incompetence. Sometimes it's the message that is given or sometimes it's a message that trainees perceive.

"Doctors are supposed to be larger than life figures, take in everything, be wise and be helpful," he continued. "We do a really good job of

stigmatizing ourselves. When really, getting support when needed could help us get back on track to finding meaning in helping others."

He knows, however, that the challenges to changing the culture are significant. For one thing, he said, trying to find someone who can help is complicated and sensitive. "How interesting would it be if we created some sort of way for physicians who are struggling to communicate with each other... a support group of sorts?"

In the essay, he describes how he shared his experience with his trainees; it came up in the context of a broader conversation about self-care. Afterward, he noticed a change in the way they interacted with him. "I sense a subtle shift in the way some of them approach me. A bit more willing to discuss challenges and vulnerabilities. More open to reflection and self-improvement. A few clinicians even ask for help in finding therapists for themselves, allowing me to transform my process of seeking help into a way to help others."

More information: Sourav Sengupta. Rebuilding More of Me, *JAMA* (2019). [DOI: 10.1001/jama.2019.2137](https://doi.org/10.1001/jama.2019.2137)

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