Long hours double junior doctors' risk of mental illness and suicide

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More than a quarter of junior doctors (JDs) are working unsafe hours that double their risk of developing mental health problems and suicidal ideation, according to Australian-first research led by the Black Dog Institute and UNSW Sydney.

Published today in *BMJ Open*, the results reveal a link between long working hours and poorer mental health amongst doctors-in-training, highlighting the need for workplace improvements to help protect their health and wellbeing.

The findings come as the issue of junior doctor suicide and burnout remain in the public spotlight, amidst greater scrutiny of their work and training conditions.

"Long working hours have been par for the course in the culture of medical training for decades, and we're now starting to understand the human cost behind these excessive workloads," said co-author Associate Professor Samuel Harvey, Chief Psychiatrist at the Black Dog Institute.

"Pressure on JDs to 'earn their stripes' by taking on long work hours has always been common, but what we now know is that this can have profound mental health impacts, with concerning implications for both the individual doctors and our broader health system."

The study examined the *Beyond Blue National Mental Health Survey (2013)* comprising questionnaire data from more than 12,250 Australian
doctors, the largest and most recent national figures on mental health outcomes in doctors available.

Assessing the survey's responses from 2,706 full-time graduate medical trainees in various specialties, researchers identified the number of JDs who met the criteria for common mental disorder (CMD) – such as depression and anxiety—as well as those who reported experiencing suicidal ideation in the last 12 months.

Once a JD worked more than 55 hours each week, their chance of CMD and suicidal ideation doubled, compared to doctors-in-training who worked fewer hours (between 40-44 hours per week). This association remained regardless of age, gender, level of training, location, marital status and whether the JD was trained overseas or locally.

A quarter (25.3 percent) of JDs in the research sample from 2013 worked more than 55 hours per week, suggesting a considerable proportion of this workforce may be at significant risk of poor mental health and suicidality. The latest Australian Medical Association (AMA) survey of doctors' working hours from 2016 shows that this pattern is ongoing.

Researchers warn that simply restricting JDs' working hours without any changes to staff numbers or work planning may be ineffective, as this could increase workloads within shifts or lead to more unpaid or unrostered overtime.

"Ideally, the optimal solution would include increasing the efficiency of the work environment to reduce the workload of JDs, implementing kinder rostering and work practices as well as ensuring adequate staffing to reduce total hours per JD," the authors note.

"While working hours are a key contributor to JDs' overall wellbeing,
their complex working environments mean this measure shouldn't be considered in isolation," said lead author Katherine Petrie from the Workplace Mental Health Research Program at UNSW and the Black Dog Institute.

"Further research should take account of other factors like fatigue, sleep deprivation, conflicts between work and home life, organizational-level workplace stressors as well as broader regulatory practices."


Provided by University of New South Wales

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