

Physician burnout tied to ability to address social needs

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(adjusted OR, 1.73) on their care team and were additionally more likely to be part of a patient-centered medical home (adjusted OR, 1.65).

"Efforts to reduce primary care physician burnout may be furthered by addressing structural issues, such as improving capacity to respond to patients' social needs in addition to targeting other modifiable burnout risks," the authors write.

More information: [Abstract/Full Text](#)

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(HealthDay)—Improving clinic capacity to respond to patients' social needs may reduce primary care physician burnout, according to a study published in the January-February issue of the *Journal of the American Board of Family Medicine*.

Emilia De Marchis, M.D., from University of California San Francisco, and colleagues surveyed 1,298 family physicians in ambulatory primary care settings who applied to continue certification with the American Board of Family Medicine in 2016. The [survey](#) sought to investigate the association between clinic capacity to address social needs and physician burnout.

The researchers found that 27 percent of [family physicians](#) reported burnout. Burnout was less likely to be reported among physicians with a high perception of their clinic's ability to meet patients' social needs (adjusted odds ratio [OR], 0.66). Clinics with high capacity to address patients' social needs were more likely to have a [social worker](#) (adjusted OR, 2.16) or pharmacist

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