



**Burnout! Recognize Symptoms,
Enhance Resilience, and Improve Quality of Life**

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Disclosures

- Consultant/Independent Contractor
 - Johnson & Johnson

- Advisory Board
 - Bicycle Health
 - Lumina Analytics (Mission LISA)

- Stockholder
 - Bicycle Health



Learning Objectives

- Recognize factors that contribute to burnout

- Describe self-care activities that can promote personal wellness



Healthcare System: The Good

- Significant advances in medical science
- New treatments developed every day
- Promising future



Healthcare System: The Not So Good

- Efforts to improve quality while decreasing costs
- Aging population with high comorbidities
- EMRs
- Patient access
- Patient satisfaction



Healthcare System: Implications

- Burnout
 - Emotional exhaustion
 - Cynicism
 - Low satisfaction/self-efficacy
 - Pervasive



Burnout: Contributing Factors

- Low control
- Mismatched person-role
- Low support
- Poor balance
- Life stressors

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Burnout: Implications

- Declines in physical and mental health
 - Increased risk for physical and psychiatric health issues, SUD
- Predictor of medical error (Shanafelt, et al., 2010)
- Patient satisfaction
- Clinician satisfaction
- Turnover

PainWeek Shanafelt TD, Beach CM, Bechamps G, et al. Burnout and medical errors among American surgeons. *Ann Surg* 2010;251:985-1000.

Burnout: Implications

- Higher rate in US physicians compared to general working population
- Prevalence of depression among physicians: 39%
- Prevalence of emotional exhaustion among primary care nurses: 23% to 31%
- 24% ICU nurses experienced PTSD sx
- Suicide rate among MDs 2x the general population

PainWeek National Academy of Medicine: Action Collaborative on Clinician Well-Being and Resilience. <https://www.nam.edu/clinical/collaborative-on-clinician-well-being>

Burnout in US Pain Medicine Physicians

- Survey data: n = 207
- High emotional exhaustion: 60.4%
 - Predictors: Greater psychological job demands and job dissatisfaction
- High depersonalization: 35.7%
 - Predictors: Younger age and greater job dissatisfaction
- Low personal accomplishment: 19.3%
 - Predictors: Lower coworker support and greater job dissatisfaction
- Limitations: low response rate, selection bias

PainWeek Kroll, H, Macduffy, T, Jesse, M. A preliminary survey examining predictors of burnout in pain medicine physicians in the United States. Pain Physician 2016; 19(5):E689-E696.

Burnout: What Can Be Done?

- System-level
 - Environmental factors
 - Structure
 - Culture

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Burnout: What Can Be Done? (cont'd)

- Personal Level: Wellness initiatives
 - Resilience
 - Coping skills development
 - Breathing and relaxation exercises
 - Mindfulness approaches
 - Cognitive behavioral strategies for stress management

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Burnout: What Can Be Done? (cont'd)

▪ Most effective intervention:

System Level
+
Personal Level



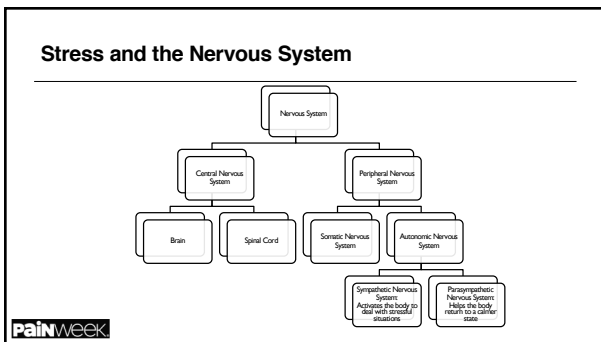
Burnout: What Can Be Done? (cont'd)

▪ Personal Level: Wellness initiatives

- Resilience
- Coping skills development
 - Breathing and relaxation exercises
 - Mindfulness approaches
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Stress and the Nervous System (cont'd)

Sympathetic Activation

- Increased heart rate
- Increased blood pressure
- Increased muscle tension
- Constriction of blood vessels
- Release of cortisol
- Pupil dilation
- Change in breathing patterns
- Additional systemic changes

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Stress and the Nervous System (cont'd)

Parasympathetic Activation

- Decreased heart rate
- Decreased blood pressure
- Decreased muscle tension
- Expansion of blood vessels
- Discontinuation of cortisol release
- Pupil constriction
- Change in breathing patterns
- Additional systemic changes

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Stress Arousal

- Impacts cognitive capacity (Giuliano et al, 2017)
- Affects task performance



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Relaxation Training

- Breathing exercises
 - Deep
 - Slow 5-1-5-1
 - Mind control

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Relaxation Training (cont'd)

- Breathing exercises: mechanism of action
 - Parasympathetic activity
 - Distraction
- Not the same thing as mindfulness!

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Mindfulness-Based Stress Reduction

▪ Jon Kabat-Zinn (1979) U. Mass

- Curriculum
 - 8 weeks (2.5 hour sessions)
 - Full day retreat
 - Experiential
 - Didactics
 - Group discussion
 - Daily practice



Mindfulness-Based Stress Reduction (cont'd)

"The awareness that emerges through paying attention on purpose, in the present moment, and non-judgmentally to the unfolding of experience moment to moment"

Kabat-Zinn, J. (2003). Mindfulness-based interventions in context. *Clinical Psychology: Science and Practice* 10(2) pp. 144-156.



Mindfulness-Based Stress Reduction (cont'd)

▪ Application in clinical settings

- Awareness of somatic sensations and thoughts without emotional attachment
- Physiologic implications
- Desensitization: experience of emotionally difficult issues and without negative consequences



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Implications of Mindfulness for Clinicians

- Systematic Review & Meta-analysis (Burton et al, 2017)
 - Effectiveness of mindfulness-based interventions in reducing stress in healthcare professionals
 - High potential for benefit
 - More studies needed, including those looking at longitudinal data

Burton, A., Burgess, C., Dean, S., Koutzopoulou, G. Z., & Hugh-Jones, S. (2017). How effective are mindfulness-based interventions for reducing stress among healthcare professionals? A systematic review and meta-analysis. *Stress and Health, 23*(1), 3-13.

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Implications of Mindfulness for Clinicians (cont'd)

- Mindful clinicians (Beach et al, 2013)
 - Higher ratings on communication
 - Improved patient satisfaction

Beach MC, Roter D, Korhous PT, Epstein RM, Sharp V, Ratanasongsa N, Cohen J, Eggy S, Sarkar A, Moore RD, Saha S. A multicenter study of physician mindfulness and health care quality. *Ann Fam Med.* 2013 Sep-Oct;11(5):421-8.

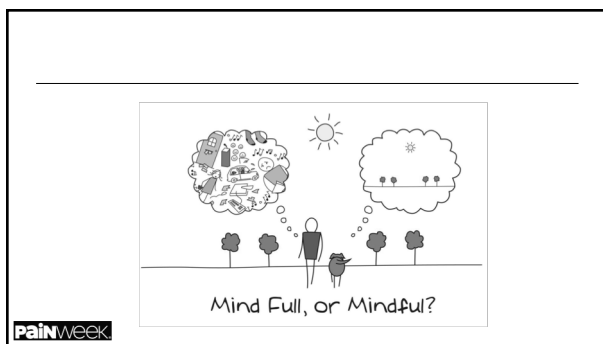
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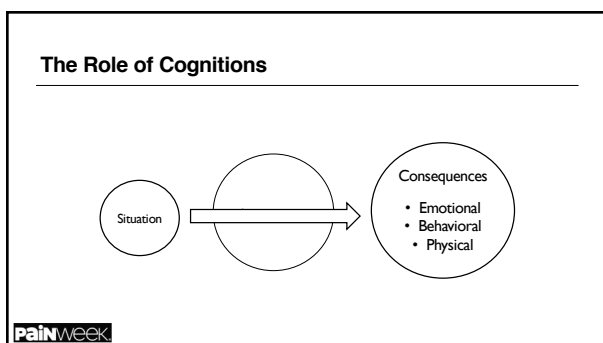
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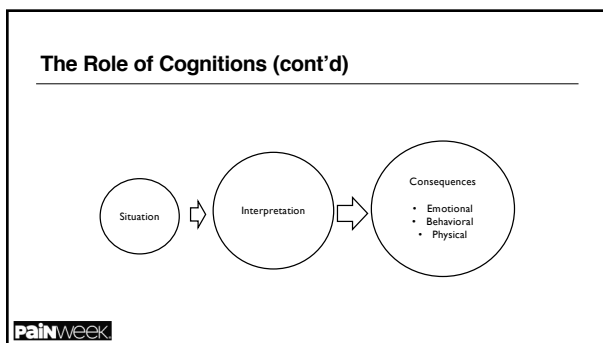
Mindfulness is NOT...

- ...based on a particular religion
- ...simply clearing your mind
- ...a panacea

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The Role of Cognitions (cont'd)

- Thought processes are often rooted in our core perception of ourselves and our roles in this world
- Usually shaped by early experiences
- Much of our maladaptive behaviors are rooted in dysfunctional thought patterns
- Can take a significant amount of time and work to alter our automatic thought processes

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The Role of Cognitions (cont'd)

```
graph LR; A((Error)) --> B((I'm an idiot  
People will think I don't belong  
I can't do this)); B --> C((Sadness  
Anxiety  
Frustration  
Snap at others  
NS activation  
Performance ↓)); C --> B;
```

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Cognitive Restructuring

Thoughts	Evaluation
<ul style="list-style-type: none">▪ I'm an idiot▪ People will think I don't belong▪ I can't do this	<ul style="list-style-type: none">▪ Are these statements helpful?▪ Are these statements accurate?

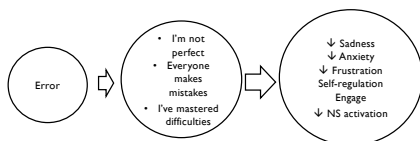
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Cognitive Restructuring (cont'd)

Previous Thoughts	Modified Thoughts
▪ I'm an idiot	▪ I'm not perfect [best friend analysis]
▪ People will think I don't belong	▪ I'm more than this one issue and everyone makes mistakes
▪ I can't do this	▪ I've mastered difficulties in the past and can get through this as well

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The Role of Cognitions



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Pathways to Changing Perspectives

- Three Good Things
- Gratitude Journal
- Golden Rule

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Peer Support and Resiliency In Medicine [PRIME]

- Established in 2010
- Co-founders: Emily Ratner, MD & Tara Cornaby, MD
- Primary goal:
create a program to maximize the emotional wellness of our trainees

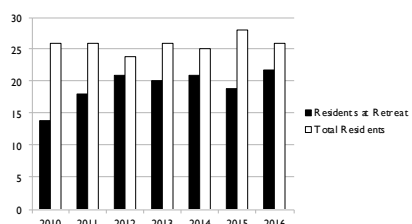


PRIME Program Components

- Retreat
 - Held at Chaminade Resort at the start of CA-1 year
 - Based on Jon Kabat-Zinn's MBSR
 - Residents divided into 2 group led by trained facilitators (all department faculty members)
 - Facilitates gaining insight, developing social support, community



Retreat Attendance



PRIME Program Components

- Wellness sessions
 - Participants remain in the same groups as retreat with same facilitator
 - Held consistently throughout all 3 years of training
 - Sessions provide a space for support, development of wellness skills
 - Experiential + didactic sessions

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PRIME Program Components (cont'd)

- PRIME symposium
 - Promotes the importance of wellness-related issues across departments
 - Reinforces messages delivered to residents
 - Taking Leaps of Faith Together:
A Symposium Led by Rachel Thomas (LeanIn.org co-founder)

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PRIME Program Components (cont'd)

- PRIME scholarship program
 - Up to \$1500 to promote trainee wellness and resiliency
 - Attendance at national or international meeting/program focusing on the promotion of physician resiliency/wellness
 - Implement a program that focuses on the promotion of physician health
 - Perform a research project or participate in an ongoing research project that promotes physician/trainee health/resilience

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PRIME Program Components

- Ongoing data collection
- Expanded to fellowship programs
- Exploring faculty options



What can YOU do?

- Incorporate mindfulness
- Become aware of maladaptive self-talk
- Establish community/support network
- Actively engage in activities to shift perspective
- Breathe
- Show appreciation



What can YOU do?

Knowing ≠ Doing!



Questions?

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