

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

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- Consultant/Independent Contracter

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- -Bicycle Health -Lumina Analytics
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Learning Objectives

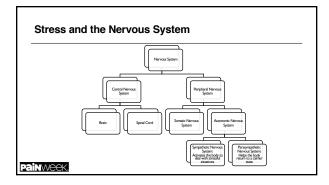
- Recognize factors that contribute to burnout
- Describe self-care activities that can promote personal wellness

Healthcare System: The Good	
Significant advances in medical science	
- Significant advances in medical science	
New treatments developed every day	-
■ Promising future	
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Healthcare System: The Not So Good	
■ Efforts to improve quality while decreasing costs	
Aging population with high comorbidities	
	-
■EMRs	
■ Patient access	
■ Patient satisfaction	-
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Healthcare System: Implications	
	-
■Burnout	
-Emotional exhaustion	
-Cynicism	
-Low satisfaction/self-efficacy	
-Pervasive	
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Burnout: Contributing Factors	
■Low control	
■ Mismatched person-role	_
■Low support	
■Poor balance	
• Life stressors Painweek	
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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 Shandid Th Birth CM Bethreng G of all Brand and material array spaces American numbers Arm Sun	
PainWeek Sharefelt TD, Bish CM, Bechamps G, et al. Burnoul and medical errors among American surgeons. Am Surg 2010;251:965-1000.	
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	
National Associators of Medicine, Action Collaboration on Citicism Medical Barins and Barillanon	
National Academy of Medicine. Action Collaborative on Circican Well-Being and Resilience. https://nam.edu/initiativestclinician-resilience-and-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: 25 79/	
 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 Krol, H. Mezalásy T. Jesse, M. A preliminary survey examining predictors of burnout in pain medicine physicians in the United States. Pain Physician 2016; 19(5):E889-E886.	
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Burnout: What Can Be Done?	
■System-level	
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-Environmental factors	
• Structure	-
• Culture	
Painweek.	
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Burnout: What Can Be Done? (cont'd)	
■ Personal Level: Wellness initiatives	
-Resilience	
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 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	-
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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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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)

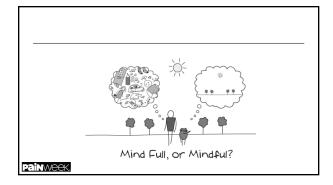
Parasympathetic Activation

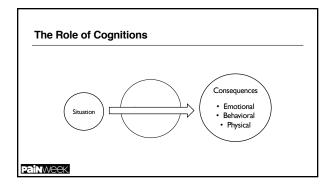
- Decreased heart rate
- Decreased blood pressure
- Decreased muscle tension
- Expansion of blood vessels
- Discontinuation of cortisol release
- Pupil constriction
- Change in breathing patterns
- Additional systemic changes

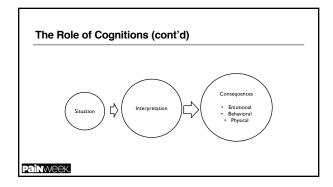
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Stress Arousal	
Impacts cognitive capacity (Giuliano et al, 2017) Affects task performance	
* Affects task performance The Verkes-Dodson Law Howardsystets performance.	
Optimal arousal and optimal of optimal of optimal of optimal of optimal optimators	
PERFORMANCE Impaired profession of the professio	
attention and interests. (In ADDITAL 166)	
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Relaxation Training	
- Departure everying	
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	
- raidsympament 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	
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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"	
unioling of experience moment to moment	
Kabal-Zen, J. (2003). Mindfulness-based interventions in content. Clinical Psychology: Science and Practice 10(2): pp. 144-195.	
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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, Bargens, C., Dean, S, Kodstopoulou, G. Z., 8 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, 30(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 M.C, Roter D, Korthulis PT, Epstein FMk, Sherp V, Ratznawongsa N, Cohn J, Eggly S, Sankar A, Moore RD, Saha S. A mulliconter study of physician minduliness and health care quality. Ann Fam Med. 26/13 Sep Oct. 11(5):421-8.	
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Mindfulness is NOT	
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) Sadness Anxiety Frustration Snap at others NS activation Performance ↓

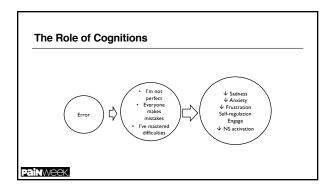
Cognitive Restructuring

Thoughts

Evaluation

- I'm an idiot
 People will think I don't belong
 I can't do this
 Are these statements helpful?
 Are these statements accurate?

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



Pathways to Changing Perspectives

Three Good Things
Gratitude Journal
Golden Rule

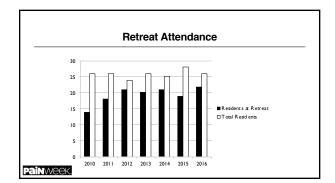
$\underline{\textbf{P}} \textbf{eer Support and } \underline{\textbf{R}} \textbf{esiliency } \underline{\textbf{In}} \ \underline{\textbf{Me}} \textbf{dicine } \textbf{[PRIME]}$

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

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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



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 	
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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	
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What can YOU do?	
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Knowing ≠ Doing!	
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Questions?	
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