



Is My Profession Killing Me? A Medical Professional's Perspective

Yusuf Saleem Khan*

Department of Anatomy and Histology, College of Medicine, Al Farabi Colleges, Riyadh, Kingdom of Saudi Arabia

**Corresponding e-mail: dryusufkhan@gmail.com*

ABSTRACT

This study has tried to focus on the gravity of burnout in medical professionals, its lack of awareness among the medical fraternity and the importance of its knowledge and awareness worldwide. This study represents a fundamental conceptual understanding of burnout among the medical fraternity, create awareness of health hazard in conjecture to their profession and hope to create an interest in developing diagnostic tools, to monitor and manage burnout in medical schools and hospitals. Besides it also stress upon developing laws to compensate those who are suffering from burnout and study their prevalence in developing countries. It also highlights the effect of burnout on the economy of any country with some examples and stressed the importance of its awareness not only in the interest of the medical fraternity but also in the best interest of the country itself.

Keywords: Burnout, Medical profession, Depression, Mental exhaust, Depersonalization

INTRODUCTION

The medical profession is a very noble profession and there is no other better way of serving humanity. It gives immense joy to the medical fraternity in serving and contributing in the least, in relieving the pains and suffering of humanity. But in this pursuit, are we putting ourselves in a greater health risk. Are we as doctors suffering from any specific disease or syndrome as a consequence of our profession? The answer is in the affirmative.

If you are a medical doctor, student, nurse, and technician or belong to any medical-related field then you might be most probably suffering from it. This is called as burnout disease or syndrome. It is called a syndrome because it has 3 characteristic features by which it is identified as:

- Severe mental and psychological exhaust
- Diminished personal achievement
- Depersonalization

It is so real and grave, that it was forced to be included in the 10th revision of the International Classification of disease as State of the vital exhaust. In 2010, the World Health Organization in its list of occupational diseases in chapter 2.6 has included it under the mental and behavioral disorders [1]. The European Union has started seriously debating about it and most of them have included it in their National Occupational disease list. Some of the countries like Denmark, France, Portugal, Sweden, and Latvia has started compensating the individuals suffering from it. It is estimated that Netherland itself has suffered huge losses due to sickness absence from individuals suffering from it and has almost come to the exchequer of around 1.7 billion Euros in 2005 alone [2]. Germany has estimated that it is suffering from a loss of 2 billion per annum because of the absenteeism of medical professionals suffering from it [3].

Some have tried in vain to downplay it by attributing it to be nothing but depression or a subset of it. But it has been well clarified by Chirico, et al., in their article, "Burnout and depression are not the same things" [4]. The bigger problem is that, as it has not been fully understood or not seriously studied till recently, no proper etiology has been identified nor there is a definitive remedy or preventive measure taken.

Even though burnout is not confined to medical fraternity alone, it is definitely having the most severe assault on this field. This can be easily proved beyond doubt by looking into some of the latest findings which are published.

A recent study shows that the suicide rate is 1.4-2.2 times higher in a medical fraternity than any other profession [5]. The drug (substance) abuse, a smoking, broken relationship, etc., are highest among the medical professionals. This can be attributed to severe burnout among medical professionals as demands and expectations are higher and growing ever since. As health providers, they are under severe stress because of multiple and complex reasons. First and foremost is they are closely working with pain, sufferings and extreme emotional condition of patients. Now they are looked up to relieve these sufferings at the earliest. They are also expected to work round the clock sometimes in shifts of 24-36 hours straight which not only leads to mental but physical exhaust too, over and above the sleep deprivation. Other causes like increased workload, increase computerization, understaff, no or very less personal time and family time, no proper rest, changing regulations, new demands and high expectations. Also, additional works apart from the regular patient care are administrative work, leading and training the juniors, guiding the nurses and technicians, teaching load and ever-growing research demands. Even the students studying medicine or medical-related fields are not spared. Studies suggest that they are under extreme pressure, as medical subjects are exhaustive subjects with vast developments and new advances most frequently. Students suffer from keeping up to date knowledge of the new changes and always have a fear of being left behind in the race.

Burnout among medical fraternity has led to several adverse effects and frequent medical errors. But one of the most fundamental things is the loss of empathy towards the patients. This has been realized since long and observed conclusively by some of the studies done recently [6]. Empathy is one of the core pillars of medicine and if this virtue is lost towards the patients then nothing else is left behind but just materialistic gains and goals. As said by Socrates, knowledge when separated from justice and virtue, what remains is nothing but cunningness and not wisdom.

But the greatest concern is that even though so much has been published since long, very few of the medical fraternity are actually aware of this syndrome, especially in the developing and underdeveloped countries. Even though most of them might be suffering from it, no proper identification procedure or uniform legislative rules of proper compensation have been put forward. So in my perspective burnout can be called as a silent killer of medical professionals.

CONCLUSION

Thus everyone in this field should question themselves, "Is my profession killing me?" if the answer is in the affirmative for a majority of professionals in the medical field, then we should take serious note of it and develop all possible mechanisms to change this scenario immediately. Secondly, we should conduct frequent awareness programs to bring to the attention the magnitude of the problem, spread literacy about signs/symptoms, precautionary measures, and proper treatment. Finally, try to force the authorities to develop appropriate legislative rules and compensate adequately those who are suffering from burnout in the medical profession. Thus we can "Save the Savers."

DECLARATIONS

Conflict of Interest

The authors declared no potential conflicts of interest with respect to the research, authorship, and/or publication of this article.

REFERENCES

- [1] Yoo, Hyo H., and Sang Y. Lee. "Assessment of pediatric residents burnout in a tertiary academic center." *Saudi Medical Journal*, Vol. 39, No. 6, 2018, p. 633.
- [2] Lastovkova, Andrea, et al. "Burnout syndrome as an occupational disease in the European Union: an exploratory study." *Industrial Health*, Vol. 56, No. 2, 2018, pp. 160-65.
- [3] Martin, Lily, et al. "Creative arts interventions for stress management and prevention-a systematic review." *Behavioral Sciences*, Vol. 8, No. 2, 2018, p. 28.
- [4] Chirico, F. "Burnout and depression are not the same thing." *British Journal of Psychiatry*, 2017, pp. 2005-15.
- [5] Panagioti, Maria, Keith Geraghty, and Judith Johnson. "How to prevent burnout in cardiologists? A review of the current evidence, gaps, and future directions." *Trends in Cardiovascular Medicine*, Vol. 28, No. 1, 2018, pp. 1-7.
- [6] Elayyan, Muntaha, Janet Rankin, and M. W. Chaarani. "Factors affecting empathetic patient care behavior among medical doctors and nurses: an integrative literature review." *EMHJ*, Vol. 24, No. 3, 2018.