## **Editorial**

## OCCUPATIONAL STRESS AND BURN OUT AMONG DOCTORS

Iram Manzoor<sup>1</sup>

doi: https://doi.org/10.51127/JAMDCV06I02editorial

## How to cite this:

Manzoor I. Occupational Stress and Burn Out Among Doctors. JAMDC. 2024; 6(2):45-47 doi: https://doi.org/10.51127/JAMDCV06I02editorial

Burnout is a common presentation of emotional exhaustion affecting physicians worldwide. It has three dimensions. First dimension is "emotional exhaustion" that leads to decreased emotional energy to meet work-related demands. Second dimension is "depersonalization", which results in emotional distance from one's job and third is low personal accomplishment at work<sup>1</sup>.

millions of doctors report Worldwide, occupational stress as a major factor of their burn out. In United Kingdom only, 80% of the physicians have reported emotional exhaustion<sup>2</sup>, While in United States of America, 46% of the physicians have reported symptoms of burnout3. In Sweden, 42% of the general practioners have reported high burn out rate<sup>4</sup>. A national study was conducted in Netherland which showed that 21% of the resident doctors working there were showing sign and symptoms of moderate to severe burnout and women reported more emotional exhaustion than men<sup>5</sup>. A meta-analysis in UK doctors have shown that high burn out rate among doctors is associated with Psychiatric illnesses among them which has ranged from 17 to 52%<sup>6</sup>.

A study conducted in Karachi among surgeons showed high mean score of emotional fatigue with mean of 57.15 where female residents were suffering more as compared to their male counterparts. Marital status, working long hours, sleep deprivation and financial

<sup>1</sup>Prof. & HOD Com. Med. Dept., AMDC, Lahore

instability were the reported factors for high burn out rates<sup>7</sup>.

A study conducted in Peshawar showed that 25.4% of the doctors were suffering from high burnout rates and an additional 33% were found to be at highest risk of developing this burnout syndrome. This study has also shown highest burn out rates in Orthopedic surgeons (80.14%) followed by Gynecologists (75.35%)<sup>8</sup>.

A multicenter cross sectional study in Pakistan showed that competitive working environment, long working hours, psychological pressures and unrealistic expectations are major reasons of burn out in doctors which are resulting in anxiety and depressive disorders among young Pakistani doctors<sup>9</sup>.

Negative predictors for development of high burn out rates are younger age, female gender, excessive workload, long working hours, negative marital status, and poor satisfaction with job<sup>10</sup>. Positive predictors to reduce burnout among doctors include competent leadership, Organizational functionality, Satisfaction with work, work life balance and opportunities of personal and professional growth<sup>11</sup>.

been observed It has that modifying organizational structure with competent leadership, application of principles ergonomics, and promoting wellbeing of workers with psychological counseling and coping strategies, brings positive change and can reduce work related stress and burnout among health care providers. Results of a randomized control study showed that regular training programs which include identification

of stress and how to cope with it can significantly reduce burn out among doctors<sup>12</sup>. Reducing workload, conflict resolution at work place, improving clinical skills, availability of skilled supervision, debriefing session after each counter with difficult patient and availability of time to resolve personal affairs can produce better effect in reducing burn out among young doctors<sup>13</sup>.

With increasing societal demands from doctors in Pakistan, with increasing political and economic turmoil, high burn out rates are being observed in Pakistani doctors as well. It is the responsibility of higher authorities to find out factors which are causing job dissatisfaction and high burnout at organization level and to find out remedies for better outcome. Regular Psychological assessments and promotion of organizational policies in best interest of health workforce will substantially change the outcome. Regular training of demanding subspecialties like surgery and ICU residents for coping strategies with stress should be mandatory. Change of leave policies. application of ergonomics and better working environment will positively affect the rates of burnout in Pakistan.

## REFERENCES

- 1. Amoafo E, Hanbali N, Patel A, Singh P. What are the significant factors associated with burnout in doctors? Occup. Med. 2015 Mar 1;65(2):117-21. https://doi.org/10.1093/occmed/kqu144.
- 2. Soler JK, Yaman H, Esteva M, Dobbs F, Asenova RS, Katić M, Ožvačić Z, Desgranges JP, Moreau A, Lionis C, Kotányi P. Burnout in European family doctors: the EGPRN study. Fam Pract. 2008 Aug 1;25(4):245-65. https://doi.org/10.1093/fampra/cmn038
- 3. Shanafelt TD, Hasan O, Dyrbye LN, Sinsky C, Satele D, Sloan J, West CP. Changes in burnout and satisfaction with work-life balance in physicians and the general US working population between 2011 and 2014.

- In Mayo clinic proceedings 2015 Dec 1 (Vol. 90, No. 12, pp. 1600-1613). Elsevier. https://doi.org/10.1016/j.mayocp.2015.08.0 23
- **4.** Arigoni F, Bovier PA, Sappino AP. Trend in burnout among Swiss doctors. Swiss Med Wkly. 2010 Aug 2;140(3132):w13070-. https://doi.org/10.4414/smw.2010.13070.
- 5. Prins JT, Hoekstra-Weebers JE, Gazendam-Donofrio SM, Dillingh GS, Bakker AB, Huisman M, Jacobs B, Van Der Heijden FM. Burnout and engagement among resident doctors in the Netherlands: a national study. Med Edu. 2010 Mar;44(3):236-47.
- **6.** Imo UO. Burnout and psychiatric morbidity among doctors in the UK: a systematic literature review of prevalence and associated factors. BJPsych bulletin. 2017 Aug;41(4):197-204. doi:10.1192/pb.bp.116.054247
- Zaheer F, Aziz I, Arif S, Khan MO, Khan AA, Osama M, Naseer S, Sheikh MY. Predicament Of Doctors; Discerning Burnout Level Amongst Surgical Residents of Karachi, Pakistan. JAMC Abbottabad-Pakistan. 2020 Jul 1;32(3).
- 8. Hussain SS, Qazi Q, Bawar S. BURNOUT IN DOCTORS WORKING IN TERTIARY CARE HOSPITAL IN PESHAWAR, PAKISTAN. J. Postgrad. Med. Inst. 2022 Dec 31;36(4):253-8. https://doi.org/10.54079/jpmi.36.4.3031.
- 9. Mufarrih SH, Naseer A, Qureshi NQ, Anwar Z, Zahid N, Lakdawala RH, Noordin S. Burnout, job dissatisfaction, and mental health outcomes among medical students and health care professionals at a tertiary care hospital in Pakistan: protocol for a multi-center cross-sectional study. Front. psycho. 2019 Nov 26;10:2552. https://doi.org/10.3389/fpsyg.2019.02552.
- **10.** Lee RT, Seo B, Hladkyj S, Lovell BL, Schwartzmann L. Correlates of physician burnout across regions and specialties: a meta-analysis, Hum Resour Health. 2013 Dec;11:1-6. https://doi.org/10.1186/1478-4491-11-48

- **11.** Kumar S. Burnout and doctors: prevalence, prevention and intervention. In Healthcare 2016 Jun 30 4, (3), 37-45. https://doi.org/10.1186/1478-4491-11-48
- **12.** Medisauskaite A, Kamau C. Reducing burnout and anxiety among doctors: Randomized controlled trial. Psychiatry Res. 2019 Apr 1;274:383-90. https://doi.org/10.1016/j.psychres.2019.02. 075.
- 13. Gunasingam N, Burns K, Edwards J, Dinh M, Walton M. Reducing stress and burnout in junior doctors: the impact of debriefing sessions. Postgrad Med J 2015

  Apr;91(1074):182https://doi.org/10.1136/postgradmedj-2014-13284

JAMDC April – June 2024 Volume 06 Issue 02 amdc.edu.pk 47