
Burnout, Depression, Physician Wellbeing in Critical Care



A recent article published in the New England Journal of Medicine outlines the need to address the growing crisis in physician wellbeing and for hospital systems and medical schools to implement evidence-based strategies.

The authors emphasise the fact that this is important for the future of healthcare and for building a healthier workforce moving forward.

The article evaluates the existing research on physician wellbeing and outlines concrete steps healthcare systems can take to enhance physician health and propel ongoing research. The authors and their teams studied the mental and physical health of over 28,000 first-year physicians for nearly two decades through the Intern Health Study. This work has identified workload as the primary factor impacting wellbeing and has pinpointed other key contributors to resident depression, resulting in the development of targeted interventions.

The authors note that the fundamental issue is that too few physicians are being asked to take on too much work. Among residents, reforms over the past 15 years have reduced work hours, and this has improved wellbeing meaningfully. Continued efforts to reduce workload and hours are essential for further improvements.

In addition to workload policies, the authors advocate for timely, confidential, and accessible mental health care for physicians. They also highlight specific stressors affecting underrepresented groups, including women and minorities, who often experience discrimination, harassment, sexism, and racism in medicine. Policy changes that address these unique challenges are vital for creating an inclusive and supportive culture that attracts and retains healthcare professionals.

Many health systems have already begun addressing physician wellbeing by reducing workloads and fostering supportive environments. For instance, MUSC and the University of Michigan have added nonphysician team members to handle certain tasks and appointed chief wellbeing officers to support healthcare workers. While these efforts represent progress, there is still a long way to go.

The authors recommend that all health systems:

- Implement interventions focused on reducing work hours and workload.
- Eliminate policies that deter physicians from seeking mental health or substance abuse treatment.
- Improve parental and caregiving leave policies and access to childcare.
- Establish diversity, equity, and inclusion policies to combat sexism and racism in medicine.

Additionally, physician burnout and wellbeing require more rigorous research to validate effective interventions and develop new strategies.

This research, especially on physicians facing the most stressful year of their careers, can guide broader efforts to support physicians throughout their professional lives.

Source: [Michigan Medicine - University of Michigan](#)

Image Credit: iStock

© For personal and private use only. Reproduction must be permitted by the copyright holder. Email to copyright@mindbyte.eu.

Published on : Mon, 28 Oct 2024