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### Battling Burnout: Advice for Healthcare Professionals

Dr. Chapa:

It has been published that more than half of today's practicing physicians and trainees experience burnout and the rates are increasing. Acknowledged as a public health crisis over the past several years, clinician burnout has only intensified in the past year, due to the recurrent COVID-19 pandemic. That's why the healthcare system must now self-reflect, take inventory of its traditional practices and learn to foster a culture that safeguards clinician's mental, as well as physical health. The only question is, "How?"

Welcome to *Clinician's Roundtable* on ReachMD. I'm Dr. Hector Chapa and with me today to discuss this highly relevant and timely topic is Dr. Robert Owens Carpenter, a board-certified bariatric surgeon by clinical training, who now serves as the Texas A&M University College of Medicine's Director of Wellness. Dr. Carpenter, welcome to the program.

Dr. Carpenter:

Well thank you very much for the opportunity to share time with you today.

Dr. Chapa:

So, to start, I know that there are different definitions of burnout in the published literature, but how would you personally define this condition, Dr. Carpenter? And what are some of its hallmark features?

Dr. Carpenter:

Well, I think the most efficient definition of burnout really does come down to a clinical diagnosis, if you will. Burnout really does have a specific set of clinical symptoms, including exhaustion, not just physical exhaustion, which is what we oftentimes think of, especially those of us who are on healthcare teams, but emotional exhaustion, where we just don't have anything left in our psychosocial and emotional tank, so to speak. Additionally, it's a sense of loss of meaning where we no longer really understand exactly what the positive aspects of how we are working to help other individuals, actually affecting not only them, but the world around us; a sense of feeling, ineffective, and not able to really change the environment that we are in for the better.

Dr. Chapa:

Now, Dr. Carpenter, female gender and young age, in the literature, have been consistently cited as risk factors for burnout. I want to get your take on that. Why do you think that's the case and what are other potential risk factors or triggers that we all should be on the lookout for?

Dr. Carpenter:

I think that it's a reality of the disproportionate and unequal treatment that our female healthcare worker colleagues really face. On top of the challenges that everyone faces with regards to a medical career, they also have specific inequities that they're having to overcome. I think that this plays directly into the idea that female physicians are more likely than their male colleagues to actually contemplate, and even attempt suicide, unfortunately all too often, in male healthcare workers, those individuals that do attempt, who are male, do die by suicide. I think that there's a number of other things that actually increase your risk for a very high demand in work-load, which is not just place of employment, but more particularly a conflict between home and work. I think that unfortunately, our female healthcare worker colleagues are often times held to a different standard than their male colleagues do with regards to their childcare responsibilities; having young children to raise, having a life partner that's in healthcare are all things that actually increase risk and, you know, we talk oftentimes about "being young", but the reality of it is that it's mid-life or midway through career that does carry the highest risk for burnout, and progression beyond that to real loss of sense of work-life balance.

Dr. Chapa:

Now, you mentioned the word “suicide” and I think we all had a wakeup call, I believe it was in April of 2020 when a very caring, very capable physician in New York at a very well-known institution committed suicide without a psychological or psychiatric history because of the COVID overwhelming stress and anxiety that she felt caring for her patients. And at the least, you know, burnout may be affecting how we view patients, but at the most, it can rob us of our lives. So, I do appreciate you mentioning that because we’re gonna talk about that a little bit more, in this session. And Dr. Carpenter, in January of 2021, my professional organization, The American College of OB/GYN, actually released a CME article, and I’m very thankful for them for doing this, about OB/GYN physicians and burnout, and I’m very proud that the college actually made this a CME article. But, from your perspective as a bariatric surgeon and as a Director of Wellness, what have you seen other medical specialties do, or put attention to this, for their respective physicians? Is this getting the attention from medical societies that it should?

Dr. Carpenter:

It absolutely is, and, and I do applaud the American College of Gynecology for stepping up and being very proactive in not just putting the word out, but rather having action that goes along with it. The American College of Surgeons and many other specialty, boards, as well as specialty societies, have come forward and not only named the problem, a problem that, quite frankly, plagued the people that trained us and that trained them before, really is something that now has not only a name, but is exposed for what it is. What’s really incredible is to see the American Medical Association, the CDC, and other aspects of the federal government are also stepping up to recognize this, not just as the statewide or regional problem, but the individual problem that suicide and depression and burnout really can carry, because we need every provider that we can within the team; we need every physician that we can, now more than at any point in time. We need to be able to carry that forward and we need to help them be healthy by giving them the tools that are there. Most of all, we have people that are willing to be vulnerable, that are willing to talk about their experience so that it’s no longer people suffering in silence.

Dr. Chapa:

And in that same vein, Dr. Carpenter, because you are closely tied in the administration of a medical school, what can you tell us about how we’re preparing our medical students for their future?

Dr. Carpenter:

Well, I think the first thing that they’re doing, once again, is having individuals at the highest degree of leadership within colleges of medicine, schools of medicine, come out and talk about their own experiences. Additionally, you know, we have to look at the idea that again, national organizations, including the American Academy of Medical Colleges, as well as the ACGME for our residents and trainees, after their experience in medical school, have brought this forward as an absolute necessity. If you’re going to be licensed by the LCME as a medical school, you’re going to have to actually put this as a part of your curriculum, you need to have dedicated individuals who have, not just an interest, but experience and expertise in being able to develop curricula, develop opportunities and to change the environment so that these conversations can be held out in the open without people being lionized or being in any way judged for being human.

Dr. Chapa:

For those of you just tuning in, you’re listening to *Clinicians Roundtable* on ReachMD and I’m Dr. Hector Chapa and I’m speaking with Dr. Robert Carpenter, who’s the Director of Wellness at Texas A&M University College of Medicine, hitting a very important, very relevant issue, physician burnout. Now, as we both know, Dr. Carpenter, burnout is a very real threat in the healthcare space. And the Institution for Healthcare Improvement talked about a triple aim in medicine. The first aim was improving the patient experience, that’s why we all get reviewed by, you know, patient metrics. And improving population health. And then the third issue was reducing overall healthcare cost, that’s the triple aim. However, the Institute of Healthcare Improvement, Dr. Carpenter, has now proposed a quadruple aim, adding a fourth issue. Please tell us what that quadruple aim is and how that is directly tied to our topic here.

Dr. Carpenter:

Absolutely. Back in the late 1990s, early 2000s, the aim of that triple aim was to improve the health and safety of our patients, which is of paramount importance. But what’s happened over the second decade of this new century and the early 2010s was that we realized you can’t have safe healthcare if you have no one to deliver healthcare who is safe and healthy themselves. And if you look, there’s a wonderful article from 2014 in the *Annals of Family Medicine* by Bodenheimer & Sinsky that really does bring this concept of the quadruple aim out, that we need to fireproof our workplaces. We need to change the environment and the overall direction that our medical healthcare facilities and delivery systems are set forth; where that fourth arm of the quadruple aim is improving the work-life of healthcare clinicians and staff, and that’s incredibly important. You can’t solve this problem by simply throwing a bunch of words or improving the quality of food in the doctor’s lounge; we have to approach this as a team. We need to take care of our providers, both nurses, APPs, our physicians, as well as their staff because we are truly interdependent. And the thing that really, to this day, still honestly brings a tear to my eye, is the fact that the public came to understand this, through the COVID pandemic; in March and April of

2020, the American public and individuals around the world came to truly appreciate the whole delivery team and system for healthcare and that's what's so incredibly important.

Dr. Chapa:

Absolutely. And I'm glad this is getting the attention that it's getting. As we wrap this up, Dr. Carpenter, please give us some useful, practical tips, I mean, I'm a practicing physician, I'm busy, I've got patients to see. What can I do to keep me mentally fit, and, and healthy to protect myself?

Dr. Carpenter:

I think, all too often, what we unfortunately have learned to do as providers, and especially as physicians, is that we're always living with our eyes down the road; we're always looking for that horizon and what the impact is going to be five years from now, ten years from now, twenty years from now and we fail to live in the present. You know, mindfulness is another word, sort of like burnout, that becomes overused and overapplied, but it is incredibly important to appreciate the moments that we have, and I hope that a positive outcome from what we are all experiencing is the concept that everything is so precious. These experiences and the times that we have with our family, with other people, are really incredibly important. But at the same time, to actually take a moment, walk outside, breath the air, enjoy the wonderful world that we are actually in. Pick up a hobby that you haven't, perhaps, looked at in many years or something you've always wanted to do. I can tell you that as the Director of Wellness, I'm supposed to be a smileyperson, but quite frankly, the last couple of months have been particularly difficult for me and my family. And I will tell you that the greatest joy that I've had in the last eight weeks was the fact that my son and I were cleaning out our garage and he found my old golf clubs and asked me whose they were, and I passed them onto him, and he asked me how to swing a golf club, and for the first time since that 12 year old was born, I actually hit a golf ball. And I know that may sound cliché, but I haven't played the entire time that I've been an attending surgeon, and going out and learning to do that once again, it is absolutely phenomenal to feel that joy. So, finding what it is that gives you a positive reinforcement, something that is not maladaptive but rather adaptive and builds that resilience within you is so incredibly important, because if you don't do that, if you don't give yourself that opportunity, all too often, what you are going to be faced with is a degradation of your sense of self, your loss of enjoyment and fulfillment within your job and that's just one step after another towards burnout.

Dr. Chapa:

So, it all boils down to "life is worth living and appreciate every moment". Considering the very high risk of burnout affecting all of us in healthcare, I really want to thank you, Dr. Carpenter, for joining me to share your insights and being transparent on how we can protect ourselves, our mental health, in this very trying time, now and in the future, not only from an individual standpoint, but at organizational levels. This was very powerful for me, so thank you. It was great having you on the program.

Dr. Carpenter:

It's my pleasure and honor to join you. Everyone out there, please stay safe, stay well and continue the great work you're doing, caring for our fellow human beings.

Dr. Chapa:

I'm Dr. Hector Chapa. To access this and other episodes in our series, please visit [ReachMD.com/CliniciansRoundtable](https://ReachMD.com/CliniciansRoundtable) where you can Be Part of the Knowledge. Thanks for listening.