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Burnout Among Doctors Is A Public Health Crisis, Report Says

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January 17, 2019 Updated Jan 17, 2019 12:04 PM

By [Khari Thompson](#)



Increasing burnout among physicians is a dire public health crisis, new [research](#) out of Harvard says.

The paper cites [research](#) that nearly half of American doctors experience symptoms of professional burnout. And a 2018 survey [found](#) that 78 percent of over 8,000 physicians polled reported feeling burned out at least sometimes.

“At some point, you can't go much higher, or you're going to hit 100,” said Dr. Ashish Jha, dean of global strategy at Harvard T.H. Chan School of Public Health and an author on the new study. “We've got to start addressing this.”

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But according to Dr. Elisabeth Poorman, a primary care physician in Everett, part of the problem with treating symptoms of burnout is that there's no exact definition for what burnout is.

Jha and his fellow authors say “professional burnout” is typically manifested by three main symptoms: emotional exhaustion; a sense of depersonalization and disconnection from work; and feeling a lack of efficiency at work.

Poorman, who has written [for WBUR](#) about her experience with clinical depression as an intern, agrees. But she also says that the lack of consensus on what constitutes burnout leads to a mischaracterization of the problem.

Specifically, she says it lets the medical education system off the hook as the main culprit in making such issues the norm.

“I feel that it recasts a systemic problem as an individual one,” Poorman said. “Starting in medical school and continuing throughout our lives, we [physicians] are discouraged from seeking mental health care. And I think that it's what allowed this toxic and dysfunctional culture to proliferate without any real pushback.”

Furthermore, Poorman suggested affected doctors often misdiagnose serious mental health disorders as simply being “burned out.”

“We're supposed to be invulnerable,” she said.

Jha echoed Poorman's assertion about the medical community's culpability in perpetuating stigmas about doctors' mental well-being. He says a cultural change is needed.

“It’s really important to separate out somebody who’s so dysfunctional and incapable of taking care of patients that they are a danger to patients,” Jha said, “and having a mechanism where people can just come forward and talk about these feelings and issues and symptoms and get them addressed. Right now we conflate these things. And I think it’s made the problem much worse.”

Improvements to mental health treatment are prominent among the Harvard paper’s suggestions for solutions to the growing problem.

For starters, the authors challenge medical institutions and officials to “facilitate appropriate treatment and support without stigma or unnecessary constraints on physicians’ ability to practice.” And they suggest that health care organizations add a chief wellness officer charged with studying and seeking to reduce burnout.

Also, the authors point out a need for improving the electronic health records system. The paper asserts that the computer-based system used by many health providers requires physicians to spend two hours doing computer work for every one hour spent in face-to-face interaction with a patient. That also often means many late-night hours in the office.

Jha and his co-authors highlight that patients are less likely to be satisfied with care from doctors who are experiencing symptoms of burnout. Furthermore, research implicates symptoms of burnout with increases in physician error.

If these burnout factors are not meaningfully addressed, the issue could have drastic long-term ramifications for health care throughout the country, the paper says. The authors say physicians experiencing burnout are more at risk for ending their practices or leaving medicine altogether.

The U.S. Department of Health and Human Services has predicted a nationwide shortage of up to 90,000 physicians by 2025. In addition to the lack of health care access that would create, recruiting new physicians or replacing departed ones can cost employers anywhere between \$500,000 and \$1 million.

Jha's own experience with burnout has left him at times feeling "thwarted" rather than aided by the medical system in his quest to help patients. That toll, he says, is a challenge for any physician to bear.

"You get home and you say, 'Am I doing good here? Am I actually doing what the patient needs?' " Jha said. "It is distressing. It is at times incredibly demoralizing. I think all of us feel those kinds of dysfunctions."

Click on the audio player next to this story's headline to hear Drs. Jha and Poorman speak with Morning Edition host Bob Oakes about the research.

This segment aired on January 17, 2019.

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Khari Thompson joined WBUR as a radio production fellow at On Point in July 2018.

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