Burnout: Recognize and Reverse
Samantha Anne

Otolaryngology -- Head and Neck Surgery 2014 151: 4 originally published online 13 May 2014
DOI: 10.1177/0194599814534592

The online version of this article can be found at:
http://oto.sagepub.com/content/151/1/4

Published by:
SAGE
http://www.sagepublications.com

On behalf of:
AMERICAN ACADEMY OF
OTOLARYNGOLOGY--
HEAD AND NECK SURGERY

American Academy of Otolaryngology- Head and Neck Surgery

Additional services and information for Otolaryngology -- Head and Neck Surgery can be found at:

Email Alerts: http://oto.sagepub.com/cgi/alerts
Subscriptions: http://oto.sagepub.com/subscriptions
Reprints: http://www.sagepub.com/journalsReprints.nav
Permissions: http://www.sagepub.com/journalsPermissions.nav

>> Version of Record - Jun 23, 2014
OnlineFirst Version of Record - May 13, 2014

What is This?
Burnout: Recognize and Reverse

Samantha Anne, MD

No sponsorships or competing interests have been disclosed for this article.

Abstract
Physician burnout may be underrecognized and can cause significant detrimental effects on personal health and job satisfaction. Burnout has been associated with medical errors, alcohol and drug abuse, and neglect and abandonment of career goals. With self-awareness, development of coping mechanisms, and the adoption of a strong social and professional support network, burnout can be combated. This article focuses on recognizing characteristics of burnout and providing strategies to cope to avoid reaching a high degree of burnout.

Keywords
physician burnout, work life balance

Received March 13, 2014; accepted April 16, 2014.

Loan repayment, transition to parenthood, starting a new practice—the list goes on of the challenges that young physicians face as training concludes and responsibilities as a staff physician begin. Reflecting on this reality, it is no wonder that many young physicians feel the effects of burnout early in their careers. The prevalence of burnout among physicians is astounding. In a recent survey of young physicians, nearly half of all respondents reported at least 1 symptom of burnout, with otolaryngologists ranking fifth among all specialties surveyed. Another study focusing solely on otolaryngologists performing microvascular free flap reconstruction found a 75% incidence of either high or moderate burnout. The Maslach Burnout Inventory is the leading measure of burnout and mainly queries 3 specific aspects: emotional exhaustion, depersonalization, and personal accomplishment. Burnout is characterized by loss of desire to go to work, feeling of poor self-worth, and chronic pessimism and cynicism. The work-related effects of burnout are staggering with increased medical errors, impaired performance, and poorer display of professional empathy. Personal effects of burnout include depression, drug and alcohol abuse, and even suicidal ideation.

Not too recently, after the birth of my third child (a year after the birth of my twin daughters), I also felt the effects of burnout. I was overwhelmed, frustrated, and pressured for time, and I questioned why I was struggling personally and professionally. I felt I could do everything a little bit effectively but nothing completely successfully. As I started to feel more and more disenchanted, I was lucky to have stumbled into the “Avoiding Career Burn Out” course at the American Academy of Otolaryngology—Head and Neck Surgery annual meeting, taught by Drs Julie Wei, Douglas Girod, and Robert Ossoff. After the meeting, with a bit of self-reflection, I recognized the problem that I was facing: I needed to establish better work-life balance. Being a mother and wife is by far the most important aspect of my life, but work provided the much-needed intellectual outlet and challenge.

Self-awareness is crucial to reversing and fighting the effects that ensue from burnout. The most commonly identified causes of burnout among academic otolaryngology faculty are inadequate administrative and/or research time, low billing/collections, and departmental and chairman-related issues. Among otolaryngology residents, causes identified were prolonged work hours, inadequate personal time, low salary, and poor sleep. Being mindful of these factors is the first step toward recognizing the risk of facing burnout. Another important fact about “burnout” is that it is not dichotomous but rather a continuum that requires self-awareness and active self-care to ensure early symptoms of excessive stress do not progress into manifestations of severe burnout.

Strategies for coping as proposed in the Bulletin of the American College of Surgeons include maintaining healthy personal relationships and spiritual practices, seeking health care when needed, maintaining appropriate nutrition and physical fitness, and establishing work-life balance. Support networks are also important and can include family members, colleagues, and/or mentors. In my case, I sought out Dr Wei as a mentor after attending her miniseminar. Through my discussion with her, I found solace in the fact that my struggles are not much different than most young physicians. I continue my correspondence with her as I choose among the professional and career opportunities I am offered to avoid cluttering my schedule and

1Department of Otolaryngology, Cleveland Clinic, Cleveland, Ohio, USA

Corresponding Author:
Samantha Anne, MD, Cleveland Clinic, Head and Neck Institute, 9500 Euclid Ave A71, Cleveland, OH 44195, USA.
Email: annes@ccf.org
making overreaching commitments. Maintenance of personal health involves developing a regimen of exercise, proper nutrition, and adequate sleep. Stress relievers, be they sports, social activities, travel, or humanitarian work, are also important to incorporate into daily life to nurture good mental health. Establishing work-life balance is perhaps the most important aspect of battling burnout, but it is also the most difficult to attain. Some suggestions are to strictly separate work from home, delegate work when able to, and, if possible, attempt to create regular, reasonable work hours.

Self-awareness and battling burnout is a personal challenge. With the consequences of burnout affecting patient care and personal physician health, it also behooves institutions to provide a nurturing environment for its faculty. Organizations are encouraged to train management staff on recognizing at-risk faculty, provide opportunities for stress management training, offer counseling services, address contributors to burnout, and establish mentorship relationships. Education about burnout needs to start early in residency and continue on for faculty, as each stage of career development poses its own threats for causing burnout. Lastly, the stigma surrounding burnout and other stress/anxiety-related conditions needs to be eradicated so that young doctors can feel more comfortable seeking help when they need it.

In conclusion, burnout is a tangible and immense problem facing physicians today. It is crucial for physicians to routinely self-reflect on signs and symptoms of excessive professional and personal stress. It is equally important for organizational management to be well versed in recognition of burnout among their staff and to create an open and consequence-free setting to which physicians can turn when facing burnout. Together, with establishment of proper coping strategies, developing a work-life balance, and conflict resolution, burnout can be recognized and reversed. Personally, when I get home after a fulfilling day at work to 3 smiling, eager faces and declarations of “I love you mama,” I realize I must be doing something right.

Author Contributions
Samantha Anne, conception and design, writing and revision of final paper.

Disclosures
Competing interests: None.
Sponsorships: None.
Funding source: None.

References