

Burnout and surgeons

Erin Dean discusses the widespread issue of psychological and emotional exhaustion among those who work in the surgical setting.

Transplantation surgeon John O'Callaghan has spoken to too many fellow surgeons who are emotionally burnt out and struggling. The specialty registrar at Oxford University Hospitals NHS Foundation Trust and president of the Herrick Society for UK transplant trainees says: 'I don't want to lose good colleagues to another specialty, country or even out of medicine completely but unfortunately, we regularly have these discussions.'

It is no wonder that surgeons are having these conversations with colleagues when a review suggested that up to 54% of doctors in the UK are emotionally exhausted.¹

Emotional exhaustion is a key element of burnout, a prolonged psychological response to chronic emotional and interpersonal stresses related to work that also includes symptoms of depersonalisation and reduced personal accomplishment.

With the general population having rates of burnout of around 10–15%, it is clear that medicine has a problem. As NHS demands continue to grow, with mounting waiting lists and over-stretched hospitals, it is easy to see how surgeons end up feeling the impact of extreme pressure.

One major study published in 2018 described doctor burnout as an 'epidemic' that affects patient safety, quality of care and patient satisfaction.² This international systematic review of 47 studies, which included more than 42,000 doctors, found that a doctor who is burnt out has almost double the risk of being involved in a patient safety incident and is three times more likely to receive low satisfaction ratings from patients.



Symptoms of burnout include feeling emotionally drained, fatigued and frustrated at work, feeling unable to accomplish much and not enjoying working with patients anymore. Surgeons who are burnt out can begin to treat others as if they were impersonal objects, not really caring about colleagues or work, becoming callous and blaming others.

Vimal Gokani, a specialty registrar in plastic surgery at Queen Victoria Hospital NHS Foundation Trust in East Grinstead, believes that some elements of burnout are part of the day-to-day work for many surgeons. 'I think we all feel it at times,' he says. 'It is not only work but it plays a really big part. For example, a few days of rather intense work, when it is difficult to take breaks for the toilet or to drink water, an on-call, a run in with an unhappy patient, a flat tyre, and pressure to get your MOT and car tax sorted. It is not uncommon. Then you go to work feeling a bit run down, tired, thinking "I really don't want to be here".'

Medical burnout expert Kevin Teoh, lecturer in organisational psychology at Birkbeck, University of London, says some specialties are more at risk than others and surgery scores relatively highly. 'There are some groups that have particularly high rates, including GPs, psychiatry, juniors and foundation years. Surgery, although not at the very top, is in the top few.'

A study published in 2018 in the *British Medical Journal*, which looked just at NHS hospital consultants, found that about 40% scored highly for emotional exhaustion, depressive symptoms and anxiety symptoms.³ Worryingly, this study suggested that surgeons had the highest rate of depersonalisation among the eight specialties identified. More than a quarter (27.8%) scored highly in this area. They were second only to consultants from pathology and microbiology for depressive symptoms, and fourth highest for emotional burnout.

Despite this, surgeons may be struggling on without adequate support. A blog post in March 2019 for The Royal College of Surgeons of England (RCS) revealed that low numbers of surgeons are seeking help from the NHS Practitioner Health Programme (PHP), a service set up in London to provide mental health support to doctors and dentists.⁴ Clare Gerada, former chair of the Royal College of General Practitioners and the PHP medical director, remarks that the specialty is underrepresented in the 6,500 people who have so far sought help.

'Patients see surgeons when they are at their most vulnerable, and patients have to trust their surgeons, totally,' Dr Gerada wrote. 'This is not an easy ask for any doctor. The very qualities which help surgeons to succeed, such as commitment, self-sacrifice and perfectionism, may also put them at increased risk of mental health problems or burnout, partly because they may feel they are invincible and will go the extra mile.'

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Dr Gerada says that acknowledging doctors with mental health problems is the 'last taboo' in the NHS. Health secretary Matt Hancock pledged to overhaul mental health services for NHS staff following a report on the issue from Health Education England in February 2019.⁵

According to a review of the evidence on doctors' mental health published by the Society of Occupational Medicine in 2018, common factors that cause doctor burnout include high perceived workload as well as the growing intensity and complexity of the work.¹ It also cited rapid change within healthcare, low control and support, and personal experiences of bullying and harassment as important causes.

Surgeons have to deal with life and death decisions, and it could be argued that this is a major contributor to any burnout they experience, but Mr O'Callaghan strongly believes that surgeons generally find working closely with their patients the most rewarding aspect of their work. He posits that the key difficulties are actually the extreme pressures surgeons work under. 'Surgeons are particularly at risk of burnout and this can be at any stage of their careers. Undoubtedly, the prime reason for this is the system in which they work and train,' he says.

According to Mr O'Callaghan, research suggests that juniors often have the highest levels of burnout and there are difficulties in training throughout the pathway that can expose doctors to pressures. 'After entering core training, there is still an element of "treading water" until moving into higher specialty training, and the difficulty of reconciling the demands of the training programme with the service provision and rota gaps that make this part of the career pathway so stressful,' he says. 'Work previously conducted by the Association of Surgeons in Training showed that surgical trainees move home multiple times in order to follow their chosen career and have difficulty maintaining personal relationships.'

When it comes to tackling the problem, Dr Teoh feels that organisations need to act to protect their staff and patients. 'If there is one thing that managers can do, it is asking staff what they want and

Figure 1 Places to seek support

- NHS Practitioners Health Programme: php.nhs.uk
- Doctors' Support Network: www.dsn.org.uk
- Royal College of Surgeons Confidential Support and Advice Service (including the Surgeon to Surgeon Helpline): www.rcseng.ac.uk/careers-in-surgery/csas

what they need. They often have the solutions and it doesn't have to be very complicated or cost much. In Germany, one of the surgical teams rerouted telephone calls so that every call didn't get directed straight to the surgeon on call.'

While by far the most important aspect in reducing burnout needs to be made by hospitals, individually surgeons also need to be alert to signs of deteriorating mental health. There are a number of organisations that offer mental health support to doctors, including the RCS, the PHP, the British Medical Association and the Doctors' Support Network (Figure 1).

'Be more aware of yourself,' Dr Teoh says. 'Take time to refresh yourself psychologically, using basic self-care to make sure you get sufficient rest, are eating healthily, exercising and noticing when you need a break. When you are struggling, it is noticing that you have reached that point and being aware of what support exists for you. If you don't want to go down the formal route of your GP or occupational health services, reach out informally to your colleagues.'

Jo Minford, consultant paediatric surgeon, and director of clinical effectiveness and service transformation at Alder Hey Children's Hospital NHS Foundation Trust, has helped introduce the reflective practice groups to her department, known as Schwartz Rounds® (Figure 2). She believes they have helped the staff who participated, and also strengthen team bonds and communication, which is an important way to reduce burnout.

'We wanted to recognise the emotional component of our work and recognise that there were not ways we could discuss that sufficiently,' Ms Minford says. 'We debrief ourselves or our colleagues, or take things home, bury our feelings or carry them round on our backs. It is increasingly important that for people we lead and train, we model behaviour to deal with these feelings. People sometimes

Figure 2 Schwartz Rounds®

One approach designed to help healthcare staff avoid burnout are sessions where people can talk about the emotional toll of their job.

Schwartz Rounds® involve groups of staff from any position (including doctors, nurses, clerical staff and porters) talking openly about the impact that a particular experience had on them.

don't see surgeons as people and the effect that our job has on us is not always recognised.'

The groups, which are generally held at lunchtime, focus on a particular patient experience. Developed in the US, this approach is now used in more than 200 healthcare organisations across the UK and Ireland.

Ms Minford points out that introducing them shows staff that the hospital they work for cares about the impact of their difficult work. However, finding time for them remains a challenge. 'We have been doing them for a couple of years and it has been hard to get going as people are so busy. But it is really good to acknowledge the feelings and consider the different perspectives that different members of staff bring. Every single session has been so well received. When we hold them at conferences, they are often the highest rated sessions of the whole event. There is always a moment at the beginning where there is silence and I think: "Will anyone say anything?" Then it all just pours out. There is such a need.'

Find out more about Schwartz Rounds® at: www.pointofcarefoundation.org.uk/our-work/schwartz-rounds.

Useful links

Read Clare Gerada's blog on avoiding burnout: bit.ly/BurnoutBlog.

Find out more about the *Supporting surgeons in and out of theatre* event which will be held in York on Thursday 16 May 2019: bit.ly/YorkEvent. Free for all RCS members.

References

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3. Kahn A, Teoh KR, Islam S, Hassard J. Psychosocial work characteristics, burnout, psychological morbidity symptoms and early retirement intentions: a cross-sectional study of NHS consultants in the UK. *BMJ Open* 2018; **8**: e018720.
4. Gerada C. *How to avoid burnout in the NHS - learning to pull your own oxygen mask down first*. Royal College of Surgeons of England. <https://www.rcseng.ac.uk/news-and-events/blog/avoiding-burnout-in-the-nhs/> (cited April 2019).
5. GOV.UK. *Mental health and wellbeing support for NHS staff: government pledges overhaul*. <https://www.gov.uk/government/news/mental-health-and-wellbeing-support-for-nhs-staff-government-pledges-overhaul> (cited April 2019).