

## A Cure for Burnout?

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In a recently released article in *Pediatrics*, Dr. Abby Rosenberg of Seattle Children's Hospital discusses the importance of cultivating professional resilience as a means of combating physician burnout.

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In a recently released article in *Pediatrics*, Dr. Abby Rosenberg of Seattle Children's Hospital discusses the importance of cultivating professional resilience as a means of combating physician burnout ([10.1542/peds.2017-2388](#)). Her article is extraordinarily timely. Burnout is a rapidly growing issue within all medical specialties, with up to half of all US physicians reporting professional burnout and dissatisfaction with work-life balance (Shanafelt et al *Mayo Clinic Proceedings*.2015). These

staggering statistics have prompted the medical community to evolve, though recent research makes it clear that despite initial attempts, we still have a long way to go in this fight (Hansen et al, *J Am Board Fam Med*. 2018, Imo U. *BJPsych Bull*. 2017).

Prior interventions to reduce burnout have included specialty wellness programs, multi-disciplinary physician support groups, education in mindfulness meditation, relaxation techniques and reflective writing, as well as a variety of other tactics. Though research has demonstrated a statistically significant reduction in overall burnout using these and other methods, the clinical significance of these findings is limited, given that 44% of physicians still reported burnout *after* interventions took place (West et al *The Lancet* 2016).

As Dr. Rosenberg suggests, the key to combating burnout is through the cultivation of resilience, which is composed of three key building blocks: external, internal and extrinsic resources. Components of external resources includes friends, family and professional relationships while internal resources encompass personal characteristics, coping mechanisms and stress management skills. Lastly, extrinsic resources refer to practices such as self-reflection and introspection that allow us to derive meaning from our experiences.

Though the medical community has made changes that better enable physicians to tap into these resources, we have only just scratched the surface. What I believe we need requires a cultural change, much beyond weekly mindfulness meditations or biannual wellness retreats. We must move to a culture that not only encourages but *promotes* our general well-being, mental health and self-care. For instance, psychotherapy has been shown to reduce burnout (Regehr et al *J Nerv Ment Dis*. 2014). Thus, improved access to, and

destigmatization of psychotherapy for physicians has the potential to create a much needed space to better cope with emotional exhaustion and significantly bolster stress management skills, which is a key part of our internal resources. Given that most physicians report long work hours as a major factor leading to burnout, reduction of duty hours and attending hours would likely promote, or at least provide an opportunity for greater life-work balance (Amofo et al *Occu Med.* 2014). Time to foster personal relationships and develop meaningful practices either within or beyond the medical field are important aspects of external and existential resources.

By taking more time to develop our personal lives, characteristics and sense of self, we will grow resilience within ourselves. In doing so, not only will we be better physicians for our patients, but we will be a happier people.

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