

Overview:

Burnout is a commonly used term that in general refers to the negative impact of continued stress of job/training demands upon the person. Maslach's model (see: <http://maslach.socialpsychology.org>) includes three key components of burnout: emotional exhaustion; depersonalization; and, reduced personal accomplishment.

Emotional exhaustion is often viewed as a key element and may be a precursor to worsening of the other 2 features. Emotional exhaustion is the result of working/training at an extremely demanding level resulting in becoming emotionally over-extended, depleted and fatigued. As Dr. Krall of the Marshfield Clinic's Physician Health Committee describes, "It comes from the need to be continually present. A person has nothing left to give." Depersonalization is the experience of becoming more negative, cynical, impersonal or cold in one's interactions with family, patients, colleagues and staff. Dr. Krall notes, "Work has hardened the individual and he or she has lost their compassion. It may be a defence against further emotional exhaustion." Patient dissatisfaction, complaints and medical errors emerge from this. Decreased personal accomplishment is the reduced sense of competence and efficacy often associated with an increasing negative view of one's abilities. As Dr. Krall explains, "Not only has one lost his or her compassion, but one starts to doubt the worth of what he or she does. Does it really make any difference?" Questioning whether to drop out of training can emerge from this.

Thomas' (2004) review of the literature on burnout in residency concludes "burnout levels are high among residents and may be associated with depression and problematic patient care." Burnout, if not addressed, may render a resident more vulnerable for the emergence of depression. This results in patient care risks as recent literature (Fahrenkopf et al 2008) identifies a 6-fold increase in medication errors by depressed residents.

Wonder if you're burning out? Here are some suggestions:

- Do a self assessment via a link provided below.
- Talk with someone you trust about your concerns. Don't wait, don't just think you need to quietly tough it out to prove "I've got what it takes to be a physician."
- Review ways to manage and reduce burnout. Links are provided below.
- Regain your balance. Burnout is often associated with a reduction in time spent in social activities, exercise, sleep, obtaining good nutrition. Make a deliberate effort to put more of these back into your life.
- Check out these websites for detailed suggestions on [managing burnout](#) and [preventing burnout](#)

Additional Information:

- Self-test: Try this link for a [quick assessment](#) for burnout and for detailed information on burnout and its management
- Ontario Medical Review's series on physician burnout: [Part 1](#), [Part 2](#), and [Part 3](#)

References:

- [Niku K. Thomas, Resident Burnout, JAMA. 2004;292:2880-2889.](#)
- [Fahrenkopf AM, Sectish TC, Barger LK, et al. Rates of medication errors among depressed and burnt out residents: prospective cohort study, BMJ 2008, 336:448-491.](#)