

Work-Related Stress: Impact on Medical Consultants and the Resident Doctors.

Causes & Effects

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Introduction

- Every human being, given the genetic and the environmental factors, are predisposed to having mental illness as long as the individual has a brain.
 - It is difficult to predict accurately who will or will not have a mental health condition
 - Promoting optimum mental health, prevention, early identification and treatment of stress and other mental health conditions are key
- ❖ Appreciate the Training coordinator and the TOT committee for making this mental health promotional lecture available.

What we know

- Globally, a third of doctors have some form of mental disorders (Sue Learner, 2011)
- In Nigeria – Psychiatric morbidity is about 15% and strongly related to being married, not participating in social activities and perception of work as being heavy (Issa, et al 2013).
- 82% of doctors feel stressed-out and 76.3% had anxiety issues (India Medical Assoc. Survey)- Hindustantimes, July 1st 2017
- To many doctors, it is a shameful secret to be diagnosed Mentally ill! This is due to the deep prejudice towards mental illness that still exist in the medical profession (Sue Learner, 2011).

What we know2

- Rates are greater among Resident doctors (Abdullah 2006)
- Alcohol use is high, particularly among Radiologists and least prevalent amongst Ophthalmologist (Juntunen et al, 1988) .
- Associated with Poor mental health indicators e.g. career dissatisfaction, stress, burnt out, suicidal thoughts and use/ abuse of medications like benzodiazepines.
- Up to 7% of doctors are reported to have a substance abuse problem in their lifetime (Gadit, 2009)

What we know3

- Though, less likely to smoke cigarettes, they are far more likely to use tranquilizers, sedatives and stimulants.
- Tend to use drugs more regularly, usually self prescribing for depression and other psychological problems.
- Rates for depression is comparable with the general population but higher in medical students and resident doctors (15-30% higher)
(Bright et al, 2011)
- Not having a hobby and tendency to be anxious strongly associated with depression in doctors (Edor et al, 2006)

Causes.....1

- **Personal characteristics:**

- ✓ Selection into medical school and choice of medical career- high flyer, more likely without other forms of leisure or hobby, “superhuman/superhero”, tendency to be anxious (Edor et al, 2006)

Others

- Pressures from medical training- medical school and residency training- time and resources consuming, highly demanding
- Occupational stress of the medical practice: 24-hour responsibility, poor sleeping and eating pattern, dealing with deaths and difficult patients,

Causes2

- Psychosocial stress in the work place:
 - Unfriendly, overcritical senior colleagues
 - Inter-professional rivalry/ conflicts
 - Toxic, unprotective work environment (violence from patients and relatives)
 - Beefing from JOHESU and ASUU (Ph.D. for promotion and a requirement for VC)
- Stereotyping- doctors are classified as superhuman and not supposed to be sick or lack anything (refusal to accept vulnerability)
- Exposure to communicable disease: Ebola, Covid etc.

Causes.....3

- Inadequate resources to work with (human and materials): expected to improvise or work with little or non-existing resources
- Occupational hazards- Fear of making mistakes and litigations
- Health Challenges
- Indirect- Family problems, financial problems

Causes4

- In summary, doctors are more likely to
 - overwork themselves
 - Continue work while ill
 - Deny or minimize symptoms and consequences of their illness (Chambers and Belcher, 1993)
 - Self-diagnose and self-medicate themselves
 - Avoid treatment because of Stigma and discrimination associated with mental health diagnoses.

Effects

Impact

- Burnout: results from chronic workplace stress characterized by:
 - Feeling of energy depletion or exhaustion
 - Increased mental distance from one's job, negativism or cynicism
 - Reduced professional efficacy
- Emotional/ Psychiatric conditions such as anxiety disorders, depression, suicidal behaviours (doctors have the highest suicide risk among all professionals)
- Drug abuse – sometimes leading to addiction
- Dysfunctional family life with increasing incidence of separation and divorce

Effects2

- Health challenges (mental and physical)
- Low productivity
- Poor outcomes (diagnosis, treatment, increased morbidity & mortality, decreased patient satisfaction)
- Low job satisfaction
- Poor interpersonal relationships.
 - ✓ Impact on family members- career in medicine is seen as a “two person career with significant contribution of the non medical spouse to the doctors career (Durham 1998). Spouses often feel neglected, there is higher divorce rates
 - ✓ Impact on other social relationships

Stressors among Nigerian resident doctors

- Situational- starting a new job, relocation, sleep deprivation
- Personal- family situations, financial situations,
- Professional- complex medical situations, difficult patients, career planning issues, meeting up with PDP (Personal Development Plan)

Barriers to seeking care

- Lack of sympathy/ empathy from colleagues
- Stigma and discrimination of mentally ill
- Lack of adequate knowledge about mental health issues
- Denial of vulnerability
- Culture of fear
- Professional implications

Conclusion

- Self Compassion is quite important in delivering quality health care by the resident doctors and the consultants.
- The new Hippocratic oath reinforces this
- Our mental health is quite important
- The World Mental Health Day is tomorrow (the 10th of October) and the theme is “Make Mental Health for all a global priority”. This TOT couldn’t have come at a better period.

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MENTAL HEALTH

BILL#

A word cloud featuring the phrase "thank you" in numerous languages. The words are arranged in a roughly circular shape and vary in size and color. The most prominent words are "thank you" in red, "gracias" in green, "danke" in blue, and "mercì" in orange. Other visible words include "спасибо", "teşekkür ederim", "dziękuję", "obrigado", "sukriya", "go raibh maith agat", and "merci".

danke 謝謝 ngiyabonga
спасибо teşekkür ederim
thank you gracias
dziękuję mechtakberan
obrigado sukriya krap khun krap go raibh maith agat
merci arigato dakujem
감사합니다