Mental Health of Physicians: Challenges and Opportunities

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Professor of Pediatrics
Saint Louis University School of Medicine
Disclosures

I have no financial disclosures to make.
The Health Care Setting
A somewhat grim picture
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Medical students
  Depression rate 27%
  Anxiety and burnout rates greater than 50%
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Residents
  Burnout rates- 60-75% and higher
The Health Care Setting
A somewhat grim picture

Medical students
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Residents
  Burnout rates- 60-75% and higher

Practicing Physicians
  Depression and suicide
  Burnout
  Would not recommend the field to their kids- 60-90%
So what’s being done to address this?
So what’s being done to address this?

Not enough.
Saint Louis University Medical Student Mental Health
Saint Louis University Medical Student Mental Health

Moderate- Severe Depression Symptoms (Percent of Class) at end of year

<table>
<thead>
<tr>
<th>Year</th>
<th>MS1</th>
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Saint Louis University Medical Student Mental Health

Moderate- Severe Anxiety Symptoms (Percent of Class) at end of year

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The SLU SOM Medical Student Mental Health Initiative
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Designed to reduce unnecessary stressors, help students find meaning in their work, and increase students’ ability to deal with stress

Interventions implemented over the past seven years were guided by students’ perceptions of stressors and were evidence-based whenever possible
The SLU SOM Medical Student Mental Health Initiative

Designed to reduce unnecessary stressors, help students find meaning in their work, and increase students’ ability to deal with stress

Interventions implemented over the past seven years
- 2009- Pass/Fail grading in the first two years, cut curriculum by 10%, instituted longitudinal electives and theme-based learning communities
- 2010- Resilience and Mindfulness curriculum for first-year students
- 2011- Changes to the Human Anatomy course
- 2012- Change to “true” pass/ fail in first two years
- 2013- Restructured 4-year curriculum, included shortened pre-clinical curriculum
- 2014- Confidential tracking of depression and anxiety
- 2015- Focused support of 2nd year students in the run-up to Step 1
# Impact of Curricular Changes in Years 1 and 2

Moderate- Severe Depression Symptoms (Percent of Class) at end of year

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<td>19%</td>
<td>17%</td>
</tr>
<tr>
<td>2011 Post-change</td>
<td>18%</td>
<td>18%</td>
</tr>
<tr>
<td>2012 Post-change</td>
<td>11%</td>
<td>16%</td>
</tr>
<tr>
<td>2013 Post-change</td>
<td>14%</td>
<td>17%</td>
</tr>
<tr>
<td>2014 Post-change</td>
<td>8%</td>
<td>21%</td>
</tr>
<tr>
<td>2015 Post-change</td>
<td>4%</td>
<td>20%</td>
</tr>
<tr>
<td>2016 Post-change</td>
<td>6%</td>
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# Impact of Curricular Changes in Years 1 and 2

## Moderate- Severe Anxiety Symptoms (Percent of Class) at end of year

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<tr>
<td>2010 Post-change</td>
<td>44%</td>
<td>61%</td>
</tr>
<tr>
<td>2011 Post-change</td>
<td>30%</td>
<td>39%</td>
</tr>
<tr>
<td>2012 Post-change</td>
<td>31%</td>
<td>46%</td>
</tr>
<tr>
<td>2013 Post-change</td>
<td>43%</td>
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</tr>
<tr>
<td>2014 Post-change</td>
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<td>47%</td>
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<td>2016 Post-change</td>
<td>14%</td>
<td>32% (20%)</td>
</tr>
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External Bench-marking
Association of American Medical Colleges
Year 2 Questionnaire
### AAMC Year 2 Questionnaire Results

<table>
<thead>
<tr>
<th>Category</th>
<th>National</th>
<th>SLU</th>
</tr>
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<tbody>
<tr>
<td>Emotional Climate</td>
<td>9.2</td>
<td>10.7</td>
</tr>
<tr>
<td>Student-fac. Interaction</td>
<td>14.8</td>
<td>15.6</td>
</tr>
<tr>
<td>Quality of life</td>
<td>40.6</td>
<td>44.8</td>
</tr>
<tr>
<td>Perceived stress</td>
<td>5.7</td>
<td>4.8</td>
</tr>
<tr>
<td>Disengagement</td>
<td>9.7</td>
<td>8.1</td>
</tr>
<tr>
<td>Exhaustion</td>
<td>11.7</td>
<td>9.1</td>
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</tbody>
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Impact of Curricular Changes in Years 1 and 2

But what happened to academic performance???
Impact of Curricular Changes in Years 1 and 2

Performance in Years 1 and 2

No decrease in mean exam scores. Failure rate in courses has dropped significantly.

Mean Step 1 scores have shown significant increase. Failure rate is half the national average.
Mindfulness, Metacognition, and Resilience
Mindfulness

Paying attention in a particular way: on purpose, in the present moment, and nonjudgmentally.
Mindfulness

How to cultivate
   Formal practice
   Informal practice
Metacognition
Resilience
Resilience

Cognitive restructuring
Cognitive Restructuring

Adverse event = Outcome
Cognitive Restructuring

Adverse event = Outcome

False!!!

Adverse event + your cognitive/ emotional reaction = outcome
Cognitive Restructuring

Cognitive behavioral therapy

• Thoughts trigger emotions and actions

• When you’re feeling sad or depressed, your thoughts are likely to be distorted and exaggerated

• You can change the way you feel by changing the way you think
Dysfunctional (and predictable) cognitive/emotional distortions

- Magnifying or catastrophizing
- All or nothing thinking
- Overgeneralization
- Tunnel vision
- Fortune-telling
- Personalization and blame
- Mind reading
- Perfectionistic thinking
Cognitive Restructuring

Need to notice and label distortions and then try to dispute.
Resilience

Cognitive restructuring
Negativity bias
Optimistic versus pessimistic explanatory styles
Positive emotions
Emotional self-regulation
Resilience

Cognitive restructuring
Negativity bias
Optimistic versus pessimistic explanatory styles
Positive emotions
Emotional self-regulation
Avoiding learned helplessness
Future Directions
Future Directions

Need to focus more on enhancing the clinical learning and work environments.
Improving the Clinical Work Environment

Drivers of burnout (from Maslach and Leiter)
- Workload
- Rewards
- Control
- Community
- Fairness
- Values
Clients do not come first. Employees come first. If you take care of your employees, they’ll take care of the clients.

Richard Branson
What Else Needs to be Done?

We need enlightened leadership in our medical schools, residency programs, medical practices, and hospitals.
AAMC Graduation Questionnaire 2017

Students were asked to rate their satisfaction with the Dean for Curriculum on accessibility, awareness of student concerns, and responsiveness to student problems.

Nationally- 32.8% very satisfied
SLU- 76.1% very satisfied
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AAMC Graduation Questionnaire 2017

Satisfaction with programs/activities that promote effective stress management, a balanced lifestyle, and overall well-being

Nationally- 33.3% very satisfied
SLU- 81.2% very satisfied
AAMC Graduation Questionnaire 2017

Agreement with statement “Overall, I am satisfied with the quality of my medical education.”

Nationally- 30.4% strongly agree
SLU- 54.3% strongly agree
AAMC Graduation Questionnaire 2017

Agreement with statement “My medical school has done a good job of fostering and nurturing my development as a *person*.”

Nationally- 33.8% strongly agree  
SLU- 65.0% strongly agree
What Else Needs to be Done?

We need enlightened leadership in our medical schools, residency programs, medical practices, and hospitals.

We need to help students, residents, and physicians find meaning in their lives.
Viktor Frankl
“There is nothing in the world, I venture to say, that would so effectively help one to survive even the worst conditions as the knowledge that there is a meaning in one's life. There is much wisdom in the words of Nietzsche: “He who has a why to live for can bear almost any how.”