

# PHYSICIAN HEALTH

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IMPAIRMENT, BURNOUT & WELLNESS

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# Physician Impairment



# Physician Impairment (AMA)

‘One who is unable to practice medicine with reasonable skill and safety to patients because of physical or mental illness, including deterioration through the aging process or loss of motor skills, or excessive use or abuse of drugs including alcohol.’

# Physician Impairment (Cont.)

- ▶ Physician impairment is a public health issue that affects not just the physician but their families, colleagues, and patients.
- ▶ Licensure or renewal of License (TMB): Are you currently suffering from any condition for which you are not being appropriately treated that impairs your judgment or that would otherwise adversely affect your ability to practice medicine in a competent, ethical and professional manner?...Self-regulation\*\*

# Causes of Physician Impairment

**10-15% of physicians become impaired at some point in their careers.**

- ▶ Substance Use Disorders (SUD)
- ▶ Psychiatric Disorders (Mood and Anxiety Disorders, Personality Disorders, Psychotic Disorders)
- ▶ Cognitive Disorders (NCD-Delirium, ALZ, CVA, TBI, PD...attention, learning and memory, language, social cognition...)
- ▶ Medical Conditions/Physical Impairment (CMC/CA, injury/pain, loss of vision, tremors, treatments/meds)

# Substance Use Disorders (SUD)

- ▶ **Alcohol is the most common problem.**
  - ▶ 8-10% of physicians abuse alcohol at some point in their careers (same rate as general population)
  - ▶ Combine anxiety of living with a deadly pandemic, the loneliness of social isolation, longer work hours, gravely sick and dying patients, you end up with physicians drinking more alcohol

# Substance Use Disorders (SUD)

- ▶ Alcohol sales spiked, increasing 55% for the week ending March 2020 from previous year and online sales were up 243% (Nielsen)



# SUD (Cont.)

- ▶ Prescription drug abuse: higher rates than general population
  - ▶ Narcotics (2%)
  - ▶ Benzo's, sedatives and stimulants
  - ▶ Ease of access, self-treatment
- ▶ Cocaine and THC less common
- ▶ Effects show up in the home first and the workplace last





# Risks Factors for SUD

- ▶ Family history/genetic factors
- ▶ Personal history (onset at an early age, extended period, trauma)
- ▶ Gender (M>F)
- ▶ Personality traits (anxious, impulsivity, negative self-image/low self-esteem/individual frailty)
- ▶ Maladaptive response to stress
- ▶ Occupational demands
- ▶ Ease of access
- ▶ Self-treatment

# Signs of Physician Impairment

- ▶ Deteriorating personal hygiene
- ▶ Increased absence from professional functions and duties
- ▶ Emotional lability
- ▶ Appearing sleep deprived
- ▶ Increased professional errors (ie. prescriptions, dictations, clinical judgment)

# Signs of Physician Impairment (Cont.)

- ▶ Not responding to telephone calls
- ▶ Decreased concern for patient well-being
- ▶ Citing unexplained ‘personal problems’ to mask deficits in concentration or patient care
- ▶ Increased patient complaints about quality of care and bedside manner
- ▶ Many “accidental” injuries (possibly contrived to obtain narcotic prescriptions)

Source: Current Psychiatry

# Should you report?

- ▶ Case example: Physician colleague has been arriving late for work. He seemed drunk a couple of times. He's been making some careless minor mistakes. (Longtime friend, uncomfortable with reporting, emotionally conflicted, concern for negative consequences...what would you do?)

Nothing or get involved?

# Understand the Duty to Report

- ▶ We hold ourselves to ethical guidelines and standards of conduct.
- ▶ Responsibility of practicing medicine includes professional self-regulation (failure to monitor ourselves and each other puts the reputation and integrity of the medical profession at risk-not to mention the safety of our patients)
- ▶ ‘Physicians have an ethical obligation to report impaired, incompetent, and unethical colleagues.’ (AMA)

# Options for Reporting

- ▶ Hospital-based physicians may be reported to an in-house program (PHC), hospital's chief of staff, peer review committee or another appropriate supervisor
- ▶ Physicians with office-based practices may be reported to hospital if they have privileges, local medical society or state's PHP
- ▶ Colleagues who continue to practice despite offers of assistance and referrals should be reported to TMB

# Recovery Options and Resources

## Local Resources

- ▶ **County Medical Society (~110 in Texas)**
  - ▶ Physician Health and Rehabilitation Committee (TMA)
- ▶ **Hospital Physician Health Committee (PHC)**

## Texas Physician Health Program (TXPHP)

- ▶ State Program
- ▶ Part of TMB but confidential from TMB
- ▶ Confidential alternative to discipline

# TXPHP

- ▶ Mission statement: To protect the health of Texans and to promote medical excellence by serving participants affected by substance use disorders (SUD), physical illnesses and impairment, and/or psychiatric conditions. TXPHP fulfills this mission by providing education, recognition, and assistance in diagnosis and treatment through a recovery program adapted and monitored according to participant's specific needs.
- ▶ Self-referral, TMB referral (initial licensure, license renewal, disciplinary investigation), third party referrals (Hospital, clinic, staff, colleague, family, friend...)
- ▶ Outcomes are better with early intervention, self-motivation and monitoring



# Texas Physician Health Program

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Texas Physician Health Program  
Helping Medical Professionals Reach Their Best

# Summary

- ▶ Physician impairment is common.
- ▶ Most common cause of impairment is alcohol.
- ▶ Get involved, identify and support your colleagues.

# Physician Burnout



# Definition of Burnout

Long-term, unresolved, job-related stress leading to exhaustion, cynicism, detachment from job responsibilities, and lacking a sense of personal accomplishment

Source: Medscape

# Physician Burnout

- ▶ Burnout is an occupational syndrome NOT pathological.
- ▶ Normal reaction to a chaotic and stressful work environment.
- ▶ The problem is the workplace, not the worker.
- ▶ It originates in health systems.
- ▶ Majority of people who experience burnout don't have depression; however, burnout can contribute to depression.
- ▶ Prevalence of burnout is greater than 54% and increasing, even after controlling for hours worked (Mayo Clinic)
- ▶ Critical Care #1, Rheum, Infxn, Uro, Pulm, Neuro, Family, Internal Medicine

# Factors Contributing to Burnout

- 1) High volume of nonclinical tasks
- 2) Long work hours
- 3) Computerization of practice
- 4) Income not high enough
- 5) Lack of respect



Source: Medscape

# Physician Burnout (Cont.)

- ▶ Studies by Mayo Clinic found increased medical error and medical malpractice litigation, decreased productivity and effort, increased turnover, suicidal ideation, alcohol abuse and dependence
- ▶ Decrease in professionalism when communicating with patients (JAMA)
- ▶ Twice as likely to be involved in patient safety incidents (JAMA)
- ▶ Lower patient satisfaction (JAMA)
- ▶ Total cost of burnout is greater than \$3.4 billion annually to the US health care system (Mayo)

# Prevention/Reduction of Burnout

- ▶ Connection with colleagues
- ▶ Improving the workflow in the practice setting by offering flexible work arrangements
- ▶ Leaders can change the culture within an organization
- ▶ Reduce the technological burden
- ▶ Reduce the burden of non-clinical activities/”too many bureaucratic tasks” (Value-based payment models/care coordination)
- ▶ Provide tools for individual intervention (healthy ways to cope with stress and prioritize wellness)



# Physician Wellness

# What is Wellness?

- ▶ **Wellness is the act of practicing healthy habits on a daily basis to attain better physical and mental health outcomes, so that instead of just surviving, you're thriving**



## **The 8 Dimensions of Wellness**

# Physical Wellness

Physical Activity

Nutrition

Sleep

Alcohol, Tobacco, Drugs

Medication Safety

Preventative Medicine

# Intellectual Wellness

Personal Interest

Education

Brain Exercise

Conversation

# Financial Wellness

Work

Checking/Savings Account

Debt

Retirement

Investment

Other Accounts

# Environmental Wellness

Green Living

Change of Scenery

Home and Work Environment

# Spiritual Wellness

Beliefs

Involvement

Time



# Social Wellness

Community

New People

Social Time

# Occupational Wellness

Work Relationships

Balance

Accomplishment

# Emotional Wellness

Feelings/Emotions

Self-Care

Stress

Family

# SAMSHA Workbook

Creating A Healthier Life, A Step-By-Step  
Guide To Wellness

# Coping Skills

# Sleep Hygiene

## Set your sleep schedule:

- Have a fixed wake up time
- Prioritize sleep
- Make gradual adjustments
- Don't overdo it with naps

## Follow a Nightly Routine

- Consistent Routine
- 30 minutes for winding down
- Dim the lights
- Unplug from Electronics (WHAT)
- Test methods of relaxation
- Don't toss and turn

# Sleep Hygiene

## Cultivate Healthy Daily Habits

- Get daylight exposure

- Be physically active

- Reduce alcohol consumption

- Cut down on caffeine in afternoon and evening

- Don't dine late

## Optimize your Bedroom

- Comfortable mattress and pillow

- Excellent bedding (sheets and blankets)

- Cool yet comfortable temperature

- Block out light

- Drown out noise

- Calming scents, Lavender

# Managing Stress





# Managing Stress

Guided Imagery

Meditation

Progressive Muscle Relaxation

Focus On Your Breathing

Take a Walk

Get a Hug

Aromatherapy

Artwork

Reading

Listening to Music

Leisure Activities

# Managing Stress



# Mindfulness

*Mindfulness is the basic human ability to be fully present, aware of where we are and what we're doing, and not overly reactive or overwhelmed by what's going on around us.*

# Mindfulness

## The 5 Senses Exercise

- Notice 5 Things that you can see
- Notice 4 things that you can feel
- Notice 3 things that you can hear
- Notice 2 things you can smell
- Notice 1 thing you can taste

# Cognitive Behavioral Therapy

**Cognitive behavioral therapy (CBT) is a type of psychotherapeutic treatment that helps people learn how to identify and change destructive or disturbing thought patterns that have a negative influence on behavior and emotions.**

# Cognitive Behavioral Therapy



# Cognitive Behavioral Therapy

CBT can help with a range of things, including the following mental health conditions:

[depression](#)

[eating disorders](#)

[post-traumatic stress disorder \(PTSD\)](#)

[anxiety disorders](#), including [panic disorder](#) and [phobia](#)

[obsessive-compulsive disorder \(OCD\)](#)

[schizophrenia](#)

[bipolar disorder](#)

[substance misuse](#)

# Cognitive Behavioral Therapy

But you don't need to have a specific mental health condition to benefit from CBT. It can also help with:

relationship difficulties

[breakup](#) or divorce

a serious health diagnosis, such as [cancer](#)

[grief](#) or loss

[chronic pain](#)

low self-esteem

[insomnia](#)

general life [stress](#)



# Cognitive Behavioral Therapy

Cognitive Restructuring or Reframing

Guided Discovery

Journaling and Thought Records

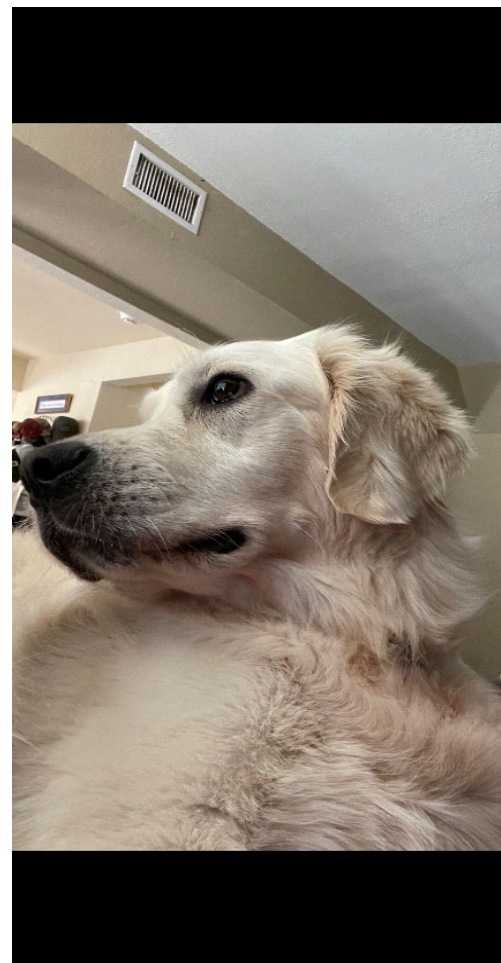
Relaxation and Stress Reducing Techniques

Affirmations

Role Play

Goal Setting

# Pet Therapy



“Life is like riding a bicycle. To keep your BALANCE, you must keep moving.”

Albert Einstein

Final Thoughts.....

The background features abstract, overlapping geometric shapes in various shades of blue, ranging from light sky blue to deep navy blue. These shapes are primarily located on the right side of the slide, creating a modern, layered effect.

Thank you...

