

PHYSICIAN WELLNESS

A Public Health Perspective

Take Home Messages

- ▣ Physician health should be a high priority
- ▣ Physicians are surprisingly unhealthy
- ▣ Public health interventions can work

Physician Health: a High Priority

- ▣ Individual Impacts (morbidity and mortality)
- ▣ Patient Impacts (capacity, attitude, modeling)
- ▣ Physician satisfaction with life correlates highly with patient satisfaction with service and with following recommendations
- ▣ Colleague Impacts (teamwork)
- ▣ Community Impacts (resources, leadership)

Current Health Status

- ▣ Smoking – Our best index, but still not zero
- ▣ Preventive Interventions – Needs Work
- ▣ Obesity/Nutrition – Not so good
- ▣ Exercise – even worse
- ▣ Mood Disorders – worse yet
- ▣ Substance Use – Who knows, but likely bad

Smoking

- ▣ Current research on smoking habits of American physicians is not available
- ▣ A study of Norwegian physicians indicated a smoking rate for male physicians of 14% and females 8%, certainly both are well below the current US national rate of about 20%
- ▣ Nurses' Study showed smoking rates of about 8% in the US in 2003
- ▣ Physicians live longer than the average American, this is likely a big contributor

Prevention Interventions

- ▣ Once again data on most interventions is not available on American physicians
- ▣ But we do know that the health care worker rate of vaccination for seasonal flu has been abysmal until very recently, with rates dropping into the 30-40% range. What does this say about other interventions — mammograms, pap smears, colonoscopies, update on tetanus ????

Obesity and Nutrition

- ▣ A 2004 study of male physicians demonstrated that 44% of male physicians were overweight and 6% obese
- ▣ Nurses Study demonstrated 28% overweight and 11% obese

Exercise

- ▣ Again, no data for the US
- ▣ But a 2011 study published in the British Journal of Sports Medicine found only 21% of those physicians surveyed got 30 minutes of moderate exercise 5 days a week – in other words 8/10 physicians failed this modest test of good health in Great Britain
- ▣ American physicians work 30 hours/week more than British physicians

Physician survey 2006

- ▣ 1200 practicing physicians surveyed
 - ▣ 6 in 10 doctors have considered leaving medicine
 - ▣ 77% experience fatigue
 - ▣ 67% experience burnout
 - ▣ 33% depression & family discord
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What is Wrong?

- ▣ High Stress work environment – long hours, important decisions, limited support, constantly changing rules, lack of control
- ▣ Trying to find balance between family and work
- ▣ High expectations of self and Type A Personality
- ▣ Denial
- ▣ Difficulty accessing health care (no time, embarrassment, self-care)

Canaries in a Coal Mine

- ▣ Physicians with vulnerabilities will be unable to maintain healthy habits or seek care
- ▣ This may manifest as smoking, obesity, lack of exercise, use of alcohol or drugs, disruptive behavior in the workplace or early death

Public Health Interventions Can Work

- ▣ More Screening and Follow-up for interventions before practice begins (pap smear model).
- ▣ Education about the risks of the profession, and tools for protection (noisy environment model)
- ▣ Development of Evaluation and Treatment Plan when needed (MPHP model)
- ▣ On-going Careful Follow-up Contract when needed (MPHP model)