The tale of passion turning into a nightmare. Can you feel the burn?
Methods to detect and overcome burnout syndrome among healthcare professionals

Introduction

Being a healthcare provider is perceived as one of the most noble jobs in the world. Physicians, pharmacists and nurses all reduce patient suffering and contribute to peoples' general wellbeing and health. Historically, pharmacy was separated from medicine by Muslim Scholars in the 7th century and since then, pharmacists made continuous and grand historic entries which continue to this day. Unlike other healthcare providers, the pharmacist is the patient's favorite healthcare provider and friend. Globally, pharmacists can be the first line of help and may be the only available healthcare provider who continues to save lives in their community on a daily basis.

One of the most reported motives to pursue a profession in pharmacy is intellectual satisfaction. Other motives include professional satisfaction and inspiration from other pharmacists in work experience. Nowadays, it is an exciting time to become a pharmacist. As a drug information and medication safety specialist, the pharmacist is provided a broad range of career opportunities such as: directly providing patient care, pharmacy informatics, academia, sports pharmacy, primary and community care, poison control, pharmaco-economics and more.

However, being a pharmacist is a demanding profession. According to the International Pharmacy Federation, good pharmacy practice requires that a pharmacist be aware of essential medical and pharmaceutical information for all medications in various fields which is increasing by the hour. The pharmacist is probably the last, and sometimes the only, patient safety net before starting therapy which can exert an emotional and psychological burden on practitioners.

What is Burnout?

Burnout is defined by the dictionary as: to fail, wear out, or become exhausted by making excessive demands on energy, strengths or resources. Staff burn out was first described by the psychologist Dr. Herbert Freudenberger in 1974. Compassion fatigue (CF) is a term often utilized concomitantly with burn out syndrome. CF describes the caregiver cost of caring for patients with chronic illness.

Medical definition

According to the International Classification of Disease (ICD-11), burn out syndrome is conceptualized as a result from chronic workplace stress that has not been successfully managed. It is an occupational phenomenon, not a mental health illness, which is characterized by: feelings of energy depletion or exhaustion, increased mental distance from one’s job, feelings of negativism or cynicism related to their job and reduced professional efficacy. Reports show that often times, burnout may be mistaken for depression for which they share common features.

How to detect burnout:

Burn out has three main elements: feelings of exhaustion, mental detachment from one’s job which leads to poor productivity as seen in Figure1. Other signs include increasing anger, frustration, suspicion, excessive inflexibility and finally, signs and symptoms of depression. Other identifiable traits of burn out syndrome are the presence of autistic like symptoms i.e. having difficulty socializing and communicating. The second is attention deficit hyperactivity disorder.

The Malasch Burnout Inventory Human Services Survey (MBI-HSS) is a validated 22 self-assessment questionnaire utilized to detect the presence of burnout syndrome.
How Common is burn out syndrome?

Burn out syndrome turns out to be more common than you may think. A recent analysis by Durham et al showed that 53% of health system pharmacists reported high rates of emotional exhaustion on the MBI-HHS scale. A review article in 2018 reported that burnout has increased by 25% in the past 4 years among healthcare professionals in the United States.

Who is at high risk?

With the cultural revolution in the 1960s, the professional authority of healthcare providers has weakened making their journey an earned tussle rather than a granted prestige. Globalization, privatization and liberalization caused an increased pressure to maximize productivity at lower cost. This has increased the risk of burnout among all professionals. Figure 2 represents some of the most reported triggers for burnout.

In general, the highly dedicated and compassionate are at highest risk of burnout. Jones et al explored risk factors of being a burnt-out pharmacist. Results show that: younger age, financial constraints, having children, spending more than 50 hours per week at the workplace, having too many students or residents, being less satisfied with their career growth, having too many non-clinical duties, being involved in a longitudinal training program, difficult coworkers, being intellectually challenged or spending less time in professional growth are all associated with significantly higher risk of burn out.

Organizational top-rated stressors are increased workload, non-clinical duties, time constrains and inability to meet deadlines, being misaligned with job expectation, inability to seek professional development and lack of recognition.

Figure 1: The vicious cycle of burnout syndrome

Figure 2: Reported triggers of burnout
**Burden/complications**

Burnout should not be taken lightly as it may have severe consequences. Individuals on the verge of burn out are more likely to develop depression, insomnia, obesity, increased risk of motor vehicle crash, cardiovascular diseases and other health problems. Patient care will be directly affected since medical/medication errors will increase leading to lower quality of care. A healthcare system with high burnout prevalence will observe a high rate of staff turnover. In addition, reducing burn out is directly correlated with reducing medical errors and overall cost.

**The solution**

**Employees: Open communication, seek support and exercise!**

Wise men always said that within each problem lies the solution. As mentioned earlier, burn out is just the result of unhandled stress. Dr. Kelly Lee, faculty at the university of Colorado, labeled perfectionism, need for control, inability to say 'no', being unable to ask for help and absence of social support are some of the main characteristics that may increase the risk for burnout. Experts at Mayo clinic advise an open conversation with supervisors in which you evaluate your options and seek support from supervisor and peers. Professional development and acquiring adequate skills for your job is essential to fulfill your sense of accomplishment. Exercise and mindfulness programs are also efficient methods to relieve stress. An interventional study by Gerber et al showed that aerobic exercise reduced emotional exhaustion, depersonalization, perceived stress and depressive symptoms in burnt out employees.

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<tr>
<th>Category</th>
<th>Reported causes</th>
<th>Suggested solutions</th>
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<tr>
<td>Personal</td>
<td>Lack of social support</td>
<td>Create meaningful relationships with peers/friends with same interests</td>
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<td>Lack of exercise</td>
<td>Seek resources to increase resilience**</td>
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<td>Lack of work life balance</td>
<td>Create work-life balance</td>
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<td>Be engaged in exercise and mindfulness programs</td>
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<td>Perfectionism/Efficiency</td>
<td>Lack of skills/knowledge to fulfill your job</td>
<td>Sharpen your skills to fulfill sense of achievement</td>
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<td>Feeling that “I must know everything”</td>
<td>Create realistic professional development plan</td>
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<td>Comparison with others</td>
<td>Ask for feedback</td>
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<td>Ask for help from peers or supervisor</td>
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<td>Control and flexibility</td>
<td>Role conflict</td>
<td>Do not suppress/Ignore feelings of stress</td>
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<td>Absence of direction</td>
<td>Communicate with peers about daily challenges</td>
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<td>Community</td>
<td>Difficult coworkers</td>
<td>Eliminate feeling of over responsibility</td>
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<td>Sense of not belonging</td>
<td>Clearly define roles and expectations from organization</td>
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<td>Strategies for team building</td>
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<td>Open communication</td>
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<td>Join professional/social events</td>
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<td>Join professional organizations</td>
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**More resources on resilience are found here:** [https://wellbeing.ashp.org/Resources](https://wellbeing.ashp.org/Resources), [https://www.pharmacist.com/well-being](https://www.pharmacist.com/well-being)
A message to leaders:

Leadership is the most capable entity of preventing burnout in the workplace. On day one, new employees should be assessed for their expectations and values. This will help place the right person in their field of interest where they will excel. Time should be provided for employees to seek professional development and discuss job expectations vs personal goals. This will avoid a job-person mismatch where the job’s requirements may exceed the capacity of employees to cope effectively or be overwhelmed with job tasks they do not enjoy. On the long run, it is important to detect poor job performance, low organizational commitment, absenteeism, staff turnover, low morale and anxiety among employees. It is essential to have an open channel for communication, encourage teamwork and encourage self-care. This will eliminate perceived unfairness in the workplace.

Shanafelt et al reported the following leadership qualities that prevent burn out: holding career development conversations, empowers employees to do their job, encourages employees to suggest ideas for improvement, treats staff with respect, provide constructive feedback and coach for better performance, recognizes and rewards good work and informs about organizational changes.

The director of physician wellbeing at Mayo clinic suggested nine organizational strategies to promote engagement:

1- **Acknowledge and assess the problem of burn out**: Create measures to assess employee satisfaction and indicators for poor performance
2- **Harness the power of leadership**: Selecting leaders that are developed, prepared and equipped for their leadership role*. It has been shown that every 1 point increase in leadership score (60 point scale) led to 4% increase in employee satisfaction.
3- **Develop and Implement targeted interventions**: Some specialties and positions hold higher risk of burn out. Therefore, targeted focus and specialized interventions with those individuals may be necessary.
4- **Cultivate community at work**: encourage peer support through challenging experiences and sharing ideas on how to improve practice. Creating a common space/environment where healthcare providers can spend time informally and adding protected time to meet and discuss topics related to their profession and daily challenges was helpful. A study showed that meeting for 60 minutes every other week in small groups improved satisfaction. Technology can be used to improve in-team communication.
5- **Use Rewards and incentives wisely**: there are several dimensions to rewards which could be monetized incentives, greater flexibility or protected time to pursue meaningful aspects of work (quality improvement or education) can be considered
6- **Align Values and strengthen culture**: periodic assessment with leaders and peers if the organization is meeting its vision and values
7- **Promote flexibility and work-life integration**: Evidence shows that working more than 50 hours per week may increase risk of burn out. Adjusting work effort and hours to meet personal and professional needs should be considered. Reducing hours for burnt out professionals will be helpful for their recovery.
8- **Provide resources to promote resilience and selfcare**: In addition to optimizing practice environment and creating a healthy culture, employees should be provided with resources to implement individual strategies to prevent burnout and promote wellbeing. Training against burn out can be offered in addition to providing facilities such as gym in hospital.
9- **Facilitate and fund organizational science**: either to dedicate a focus group on assessment of burn out and or create teams to facilitate conducting research and publications as an institution for example assign research project managers etc.

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