# **Burnout in Healthcare**

Symptoms and Self-care Strategies

#### **Content of the Unit**

This unit focuses on work-related burnout among healthcare providers, particularly physicians and dentists.

#### **Content of the unit**

- Burnout in healthcare:
   Definition and primary causes
- The immediate and long-term consequences of unaddressed burnout
- Symptoms and diagnostic approaches of burnout
- Approaches to deal with work related burnout
- Self-care techniques to reduce burnout

#### What is Burnout?

The term "burnout" was first established by psychologist Herbert Freudenberger in the 1970s to describe the physical and emotional exhaustion experienced by professionals in high-stress occupations and especially those require social interaction and full engagement with people

### **Key Dimensions of Burnout**

### **Emotional Exhaustion**

Feeling drained, overwhelmed, and unable to cope with work demands.

Example: A surgeon feeling physically and mentally depleted after consecutive 24-hour shifts.

# Depersonalization (Cynicism)

Developing a detached, impersonal attitude toward patients.

Example: A dintiest referring to patients by implanted tooth type rather than names.

# Reduced Personal Accomplishment

Feeling ineffective, incompetent, or unappreciated in one's role.

Example: A physician questioning whether their work makes a difference despite years of service.

#### **Primary Causes of Burnout in healthcare field**

**Excessive Workload and Long Hours** 

Administrative Burden and Electronic Health Records (EHRs)

Lack of Autonomy and Control

**Emotional exhaustion from Patient Suffering** 

Poor Work-Life Balance

**Inadequate Support Systems** 

Moral Injury and Ethical Dilemmas

Organizational Culture of Silence

#### Consequences of unaddressed burnout

## Immediate consequences of burnout

- Increased medical errors and reduced patient safety
- Poor patient-provider communication
- Rise in unprofessional conduct
- Short-Term Physical and Mental Health Crises

# Long-term consequences of burnout

- Workplace dysfunction
- Chronic health conditions among doctors
- Psychological consequences on doctors
- Systemic breakdowns in care delivery

### Early symptoms of burnout

1	Constant	<b>Exhaustion</b> an	d Fatione
	Constant	LAHAUSUUH AH	iu i augue

• Healthcare workers feel physically and emotionally drained, even after adequate rest.

2. Increased Risk-Taking Behavior

• Impulsive decisions, such as skipping safety protocols or self-medicating.

3. Anger and Self-Criticism

• Frustration toward colleagues, patients, or oneself

4. Increased Doubt and Uncertainty

· Second-guessing clinical decisions, leading to anxiety

5. Feeling Unable to Help

• A sense of helplessness despite professional competence.

6. Increased Irritability, Negativity, and Cynicism

• Pessimism about work and detachment from patients.

7. Feeling Overwhelmed by Demands

• Inability to cope with routine tasks.

#### Approaches to deal with work related burnout

**Organizational interventions** 

Individual interventions

#### First: Organizational interventions

Reducing excessive workloads

Increasing autonomy

Increasing recognition

Resolving dysfunctional workplace dynamics

Minimizing procedural injustice

Resolving ethical misalignment issues

#### Second: Individual interventions

- Self-care strategies are individual intentional, proactive practices that individuals adopt to maintain and enhance their physical, emotional, and psychological well-being
- Self-care is far from being selfish—it's an essential practice that renews our capacity to care for others effectively.

### **Self Care Strategies**



#### Physical Strategies

 Sleep hygiene, nutritional optimization, and exercise regimens



#### Psychological Strategies

 Cognitivebehavioral techniques and mindfulness practices



#### **Emotional Strategies**

 Therapeutic interventions and social support networks



#### Spiritual Strategies

 Meaningmaking activities and valuerealignment exercises



#### **Functional Strategies**

Time
 management
 systems and
 boundary setting
 strategies

### **Physical Self-Care Strategies**

Prioritizing 7–8 hours of sleep (e.g., an ER doctor enforcing a "no late-night charting" rule)

Short movement breaks between patients (e.g., a dentist doing 2-minute stretches after each procedure)

Meal prepping to avoid skipping meals during shifts

### Psychological Self-Care strategies

Mindfulness meditation (e.g., a surgeon practicing 10-minute breathing exercises pre-operatively)

Cognitive reframing (e.g., a pediatrician replacing "I must save everyone" with "I provide my best care within limits")

Learning to say "no" to non-essential tasks

### **Emotional Self-Care strategies**

Debriefing with peers after traumatic cases (e.g., ICU nurses holding weekly support circles)

Journaling to unpack difficult patient interactions

Setting boundaries
(e.g., a family
physician not
checking EHRs after 7
PM)

### **Spiritual Self-Care strategies**

Reflective practices (e.g., an oncologist writing "meaning memos" about impactful patient stories)

Volunteering in low-stress clinical settings to rediscover joy in medicine

### **Functional Self-Care strategies**

Time-blocking for charting (e.g., a dentist reserving 30-minute slots for notes)

Delegating tasks when possible (e.g., a senior resident training interns to handle discharge summaries)

Self-care programs don't have to be expensive or involve high expenditures. They should be something the person enjoys and that gives them a positive sense of self.

Toxic self-care programs, which provide a temporary sense of happiness but lead to future harm, should be avoided, especially those related to addiction, food, or expensive shopping.

Self-care programs are pre-planned actions, meaning the person must have planned the program in advance and not be a coincidence.

Programs should be scheduled periodically—weekly, monthly, semi-annually, or annually—and should not be abandoned based on the changing circumstances.

Self-care programs should be routine, consistent, and repetitive according to a known, pre-determined pattern.

The program must be implemented, adhered to, and explained to those around the person, as the surrounding environment may discourage a person from implementing it for financial, social, or familial reasons.

#### Exercise

Practice relaxation regularly





Set boundaries and preferable ways of interacting with colleagues,

Get a good night's sleep for 6-8 hours daily





Strengthen your religious and spiritual side and practice religious rituals regularly

Enjoy positive, supportive social relationships and avoid negative people





Watch your favorite movies regularly

Practice shopping, but break it up into regular intervals, not all at once, provided it doesn't negatively impact your budget





Regular social interaction with friends

Strengthening social relationships with family and close friends





Taking annual or semiannual vacations on a regular basis

# Consulting a psychologist





#### **Course Ended!**

Hope that you got valuable information during this course