

Chapter 12

Medical Burnout: Is Mindfulness an Effective Coping Strategy?

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ABSTRACT

The WHO defines burnout as an inadequate response to chronic workplace stress, with emotional exhaustion, depersonalization, and reduced professional efficacy. Its growing incidence among physicians may adversely affect their personal and professional lives. Mindfulness aims to reach a state of consciousness in which one's attention is purposefully focused on the present. This chapter uses a narrative review of articles published between 2015 and 2019, with the MeSH terms "Burnout," "Professional," "Mindfulness," and "Health Personnel." Sixty-six articles were obtained, of which one meta-analysis, two systematic reviews, and two randomized clinical trials (RCT) met the inclusion criteria. All studies showed some degree of burnout improvement, more statistically significant as regards emotional exhaustion. One RCT also showed a reduction in heart rate. Available evidence suggests that mindfulness may improve physicians' well-being, mental health, and resilience, asserting itself as a possible coping strategy for burnout, namely regarding emotional exhaustion.

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INTRODUCTION

According to the definition updated in 2019 by the World Health Organization (WHO) and included in the 11th Review of the *International Classification of Diseases* (ICD-11), burnout syndrome is characterized by an inadequate and maladaptive response to chronic stress in the workplace, encompassing three dimensions: emotional exhaustion, depersonalization/cynicism and decreased efficacy or professional achievement (WHO, 2019). There has been an increase in the incidence of burnout in jobs associated with high levels of stress, including among physicians. According to the *2018 Survey of America's Physicians: Practice Patterns and Perspectives* (The Physicians Foundation, 2018), 78% of American physicians experienced burnout symptoms. In the United Kingdom, and according to a survey conducted in 2019 by the British Medical Association (BMA, 2019), 80% of doctors were at high or very high risk of burnout, with medical residents being at greatest risk, followed by general practitioners. The panorama in Portugal has also been the subject of research. A joint report of the Portuguese Medical Association and the Institute of Social Sciences of the University of Lisbon (Vala *et al.*, 2017), which studied the prevalence of the three major burnout dimensions in a sample of 9167 physicians, found that 66% had a high level of emotional exhaustion, 39% a high level of depersonalization, and 30% a high level of reduced professional efficacy, with Family Medicine occupying a top position in the latter dimension. Additionally, as stated in an article published in *Acta Médica Portuguesa* [Portuguese Medical Association's Scientific Journal] (Marôco *et al.*, 2016), burnout has been systematically associated with multiple unfavorable outcomes, such as: higher probability of medical error, higher rates of absenteeism and sick leave, increased interpersonal conflicts with managers, coworkers and family, alcohol and other psychotropic abuse, adoption of more sedentary lifestyles and harmful effects on mental health (such as sleep disorders, emotional lability, irritability and anxiety). In fact, burnout in doctors is increasingly recognized as a public health issue in many developed countries, not only because it affects their personal lives and job satisfaction, but also because it creates great pressure on health systems, with an impact on the safety and care provided to patients.

Mindfulness is a concept with Buddhist roots which has been coming into prominence in Western societies. It can be defined as a state of consciousness resulting from attention purposely focused on the experience of the events and emotions of the present, accepting them as they emerge, with compassion and without value judgments (Luken & Sammons, 2016; Kabat-Zinn, 2003). The practice of mindfulness encompasses several different types of exercises, such as conscious eating, meditation, body scanning and yoga, and can be done informally - through reading books, online research and conversation with other people - or more formally - by enrolling in mindfulness courses, participating in group spiritual practices or enrolling in structured programs. Most of the formal programs currently available follow a mindfulness-based stress reduction (MBSR) perspective, standardized by Jon Kabat-Zinn in the late 1970s (Kabat-Zinn, 1982), through which participants become familiar with that practice in an educational way and through peer discussion, typically over eight to ten weekly group sessions and a full-day retreat. Several studies have suggested mindfulness as a possible strategy for preventing and controlling burnout symptoms, with health professionals being one of the most frequently studied groups in recent years. In this context, the aim of this study was to review the evidence regarding the efficacy of mindfulness in the management of burnout in physicians.

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