

FEATURE



WELLNESS: A PROFESSIONAL OBLIGATION

Anaesthetists make critical decisions when patients are at some of the most vulnerable times in their lives, writes Dr Marion Andrew (FANZCA).

This is a huge part of the anaesthetist's role and patients, professional bodies and medical indemnity companies expect that we do this and expect us to be fit to make those decisions. But do we take this responsibility as seriously as we should?

The ASA and the Medical Board of Australia (MBA) endorse wellness as a professional goal. In the MBA's *Good Medical Practice: A Code of Conduct for Doctors in Australia* there is "the requirement for self-reflection and self-awareness of our relationships with patients and colleagues, and our own health and wellbeing"¹. This clearly implies a professional duty to effective self-management and personal wellness.

In 2006, the World Health Organization defined wellness as "an optimal state of health of individuals and groups with two focal concerns—the realization of the fullest potential of an individual physically, psychologically, socially, spiritually and economically and the fulfillment of roles and expectations—in family, community, place of worship, workplace and other settings"².

WHAT IS THE REALITY?

There is an expectation that doctors are a group with specialist healthcare knowledge, therefore will be more than capable of looking after their own health needs. However, current evidence suggests that doctors engage in skillful denial, deflection and minimisation of symptoms³. With themselves as the expert, many self-investigate, diagnose and medicate.

A Doctors' Health Advisory Service

study found that one in four doctors neglected a condition warranting medical attention. A 2007 survey of South Australian doctors, triggered by a series of suicides, unexpected departures from clinical practice and the appearance of "ill doctors" before the South Australian Medical Board for unprofessional conduct, found that 40% lacked their own general practitioner and 25% identified multiple barriers to seeing a doctor⁴. Major barriers included confidentiality and fear of notification; many admitted to self-investigation, diagnosis and treatment.

Mental health issues are frequently accompanied by a fear of admitting such vulnerability. Doctors accessing the Doctors' Health Advisory Service⁵ do so mostly in relation to stress, mental illness, drug and alcohol problems and personal and financial difficulties.

When individuals become isolated or marginalised in their peer groups or experience interpersonal conflict in private or personal life, significant stress and distress can emerge and manifest in the workplace as loss of motivation, disengagement, disruptive behaviour and self-harm.

Sadly, doctors have the highest rates of suicide of any profession, with female doctors 146% more likely to commit suicide than other females⁶. Suicide in anaesthetists is higher than other specialties. Less extreme solutions to mental distress and depression include abuse of alcohol and drugs.

The practice of anaesthesia inevitably contains periods of stress due to high workload, exposure to acute events and death and pressure to perform. McDonnells' Mental Health of Anaesthetists survey 2012 found that 25% consulted their general practitioner for mental health issues; 50% of those were diagnosed with mental illness and 15% reported suicidal ideation⁷.

FINDING SOLUTIONS

The extent of the problem has highlighted the need for welfare support and resources and for education in personal wellness and self-management.

In recognition of the problems of maintaining wellness in doctors, external doctors' health programs began in 1982, when the Doctors' Health Advisory Service was launched, providing a 24-hour helpline in Australia and New Zealand. In 2011, South Australia launched a doctors' health program (Doctors' Health SA) which operates dedicated weeknight and weekend general practitioner clinics and pursues research in doctors' health.

The Welfare of Anaesthetists Special Interest Group (SIG) works to educate anaesthetists in wellness, encouraging care of personal and psychological health, fostering openness and providing valuable guidelines and resources⁸.

The recent evidence of the vulnerability of trainees to stress, illness and suicide has initiated the establishment of state-based trainee welfare support systems in Western Australia, South Australia and New

Zealand. The system offers an 'open door' to finding confidential, unbiased support in seeking solutions and healthcare resources.

Much of our social interaction and friendships develop at work and evidence of the significance of good social interaction in improving performance is emerging⁹. Negative behaviours in a social or work context often flag colleagues in need of non-judgemental support and guidance. Listening and looking out for colleagues is the frontline of peer support.

SELF-AWARENESS AND SELF-REFLECTION ON RELATIONSHIPS WITH PATIENTS AND COLLEAGUES

The Welfare of Anaesthetists SIG strongly endorses wellness by providing continuing medical education activities, which allow anaesthetists to focus on lifestyle, mental health, relationships, stress management and personal development. Such education harnesses input from life and leadership coaches, pilots, psychologists and financial planners. Mindfulness training offers skills in focusing attention purposefully, and accepting the present moment as a worthwhile place to be¹⁰. A stressful, busy life often results in sacrificing good diet, exercise, sleep and personal interests. Awareness of the importance of these simple measures is worthwhile, as they underpin optimal functioning, lift our spirits and motivate us.

In complaints about doctors, poor communication is frequently a major component (indeed, it is often the cause of the complaint itself). Learning new communication skills raises self-awareness and encourages self-reflection in our dealings with others. Language is a powerful tool that we can hone to help us cooperate with others and motivate them. Skills in breaking bad news, debriefing and open disclosure can be learnt; these skills ease distress and can protect us from litigation. Operating theatres are stressful environments with high workload, time pressures, conflicting priorities and goals. How we interact with others and function under pressure is a fundamental issue in human factors training¹¹. The

Process Communication Model workshops and stress management sessions offer new frameworks for understanding and managing teamwork. Self-management in stressful situations is of paramount importance in a safety-critical industry.

With the impending launch of the ASA's continuing professional development system, it could be time to consider a continuing professional health system. Such a system would support self-directed, regular health checks, enhance skills in communication and self management, set personal priorities, monitor motivation and promote recreational activities.

Wellness is one of the foundation stones of our professionalism—it is the patient's right and our obligation.

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