



2007 International Doctors' Health Conference

Thursday 25th October, 2007



Burnout and Emotional Intelligence in Surgeons

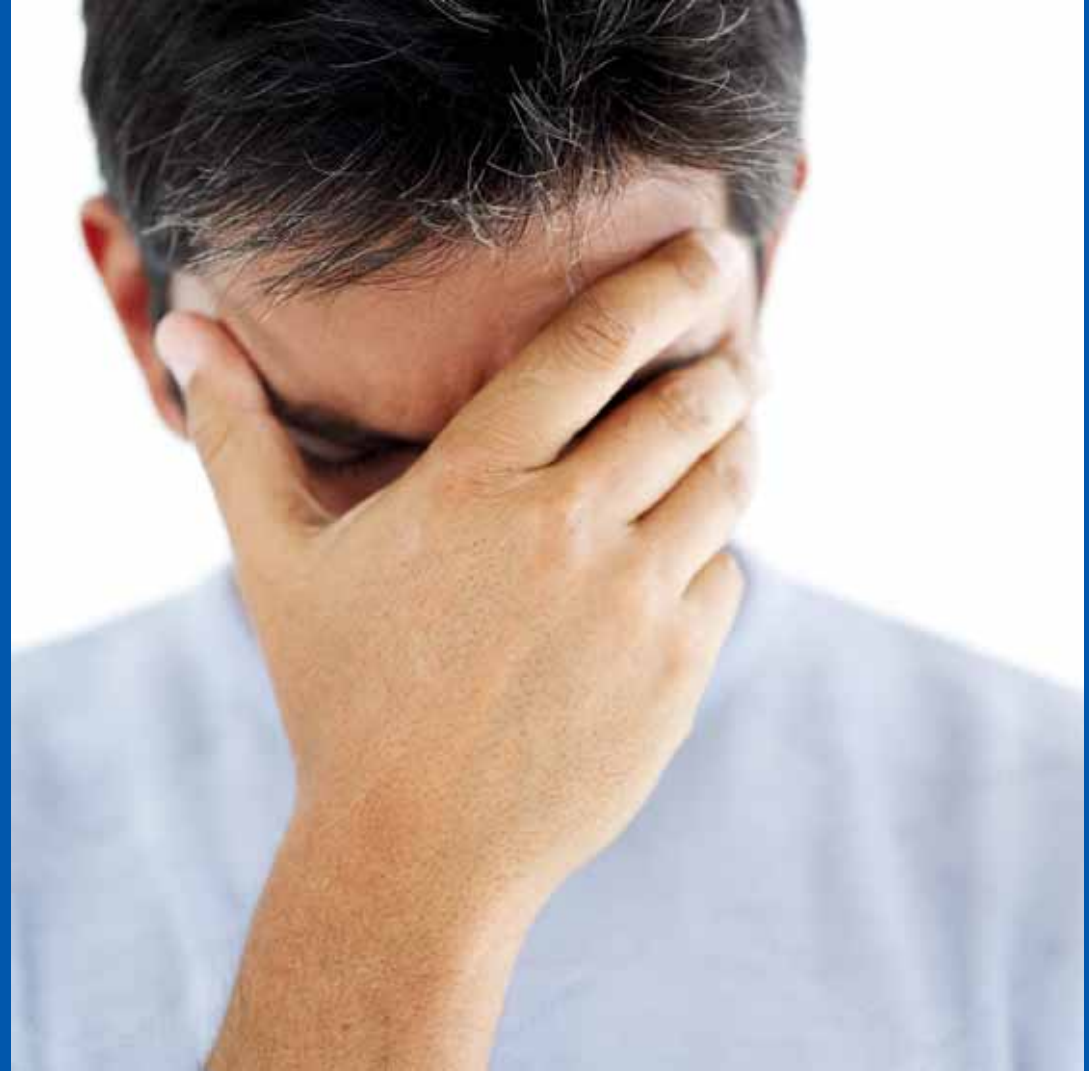
Miss Sarah Benson BA (Hons) (Psych) Assoc MAPS

Dr Bruce Findlay PhD

General Surgeons Australia

Swinburne University of Technology

What is burnout?



What is burnout?

- Unique form of prolonged exhaustion
 - physical, emotional, and psychological components
 - general, work-related, patient-related
- Emotional strain of health care roles
 - frequency and intensity of patient contact
 - younger surgeons report higher levels of burnout
- Consequences?
- Relationship with other psychological factors
 - emotional intelligence

What is emotional intelligence (EI)?

- Particular form of social intelligence
 - monitoring, understanding, and managing emotions
 - processing emotional information of self and others
- Why is EI relevant to surgeons?
 - academic intelligence is not enough
 - develop EI competencies to manage emotional stress and pressure of patient demands
- Previous Research
 - inverse relationship between emotional management and occupational stress
 - relationship between EI and burnout less clear

Background of current study

- Surgery in crisis?
 - workforce issues, medical indemnity
 - media interest, ACCC, AMWAC
- Previous Research
 - burnout in American surgeons
 - significant inverse relationship between burnout and age
 - significant relationship between burnout and intention to retire early and/or retrain in another medical area
 - emotional intelligence & burnout in surgical populations
 - no previous studies

Aims & Hypotheses

- Aims:
 - to explore prevalence rates of burnout in Australian surgeons and surgical trainees
 - to explore the relationship between burnout and EI
- Hypotheses:
 - inverse relationship between age and burnout
 - positive relationship between intention to retire early/retrain and burnout
 - inverse relationship between total EI and burnout

Sample, Method & Materials

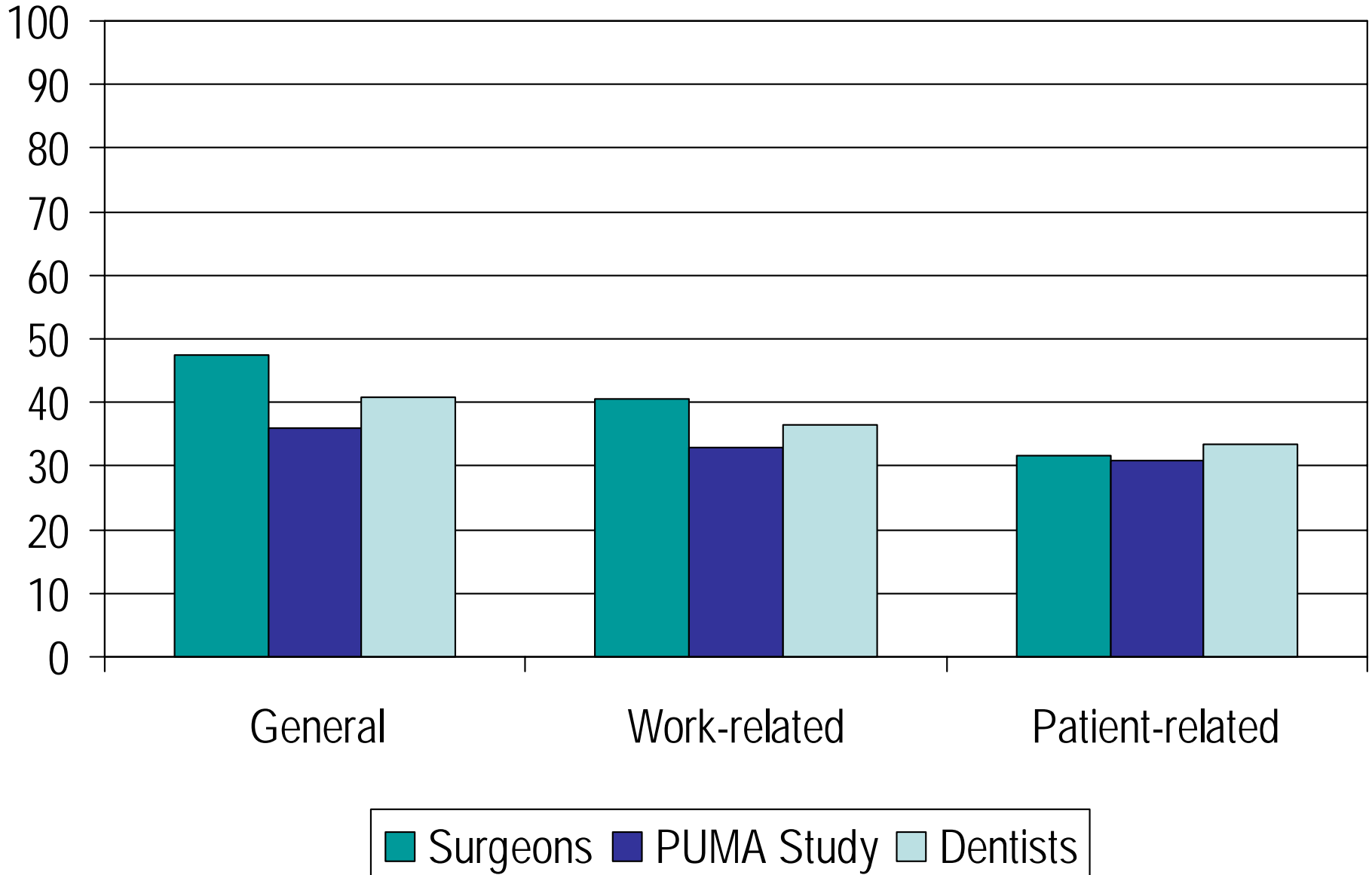
- Australian General Surgeons & Surgical Trainees
 - 126 participants (GSA members and SSTs)
 - 93 males, 33 females; 73 surgeons, 53 surgical trainees
 - age: M = 44.03, SD = 13.29 yrs
- Anonymous online questionnaire
 - 24 demographic questions
 - Copenhagen Burnout Inventory (CBI)
 - Swinburne University Emotional Intelligence Test (SUEIT)
 - Marlowe-Crowne Social Desirability Scale (SDS)
 - reliability coefficients between .68 and .89

Results

- Independent samples t-tests - burnout prevalence
 - comparison of current study with PUMA study (human service worker) norms
 - surgeons significantly higher in general and work-related burnout
 - no difference in patient-related burnout
 - comparison of current study with Dentist study norms
 - surgeons significantly higher in general burnout
 - no difference in work-related or patient-related burnout

47.6% of the surgical sample reported high general burnout levels

Average Burnout Levels



Results

- Pearson correlation coefficients
 - significant *inverse* relationship found between age and both general and work-related burnout levels
 - significant relationship between considering early retirement and all forms of burnout
 - significant relationship between considering retraining and all forms of burnout
 - significant *inverse* relationship between total emotional intelligence levels and all forms of burnout

Other Results

- Regression Analyses
 - significant predictors of burnout:
 - Emotional Recognition and Expression
 - Emotional Control
 - Understanding of Emotions (positive predictor)
- MANOVAs and MANCOVAs
 - females reported slightly higher levels of general burnout than males
 - differences in burnout levels between surgeons and trainees were a function of age, not career stage

Limitations

- Gender imbalance of sample
 - over-representation of male participants
- Transparency of scales
 - significant, *inverse* relationship between burnout and social desirability
 - burnout levels may be under-reported
 - significant relationship between EI and social desirability
 - EI levels may be over-reported

Potential Implications

- Surgeons and trainees with higher EI levels reported lower levels of burnout
 - possible implications for surgical training programs
- Increased awareness and training
 - may help reduce attrition rates from surgical training
 - may help reduce early retirement rates
 - increased patient satisfaction, decreased malpractice claims, improved health and well-being

Where to from here?

- Beating Burnout!
 - workshops now available through RACS Department of Professional Development
- Other initiatives
 - “Keeping the doctor alive” (RACGP)
 - Professional Peer Support Program (RACGP)
 - Support for Surgeons Group (New Zealand)
- Emotional intelligence training
 - include EI training in surgical training curriculum
 - continuing professional development





Thank you