

Measuring Burnout in Primary Care Staff

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To the Editor: Dolan et al.¹ use a single-item measure to find a 33 % prevalence of burnout (BO) among primary care providers (PCP) and registered nurses. Residents and hospital physicians across all specialties are also often affected by BO that can adversely influence patient care as well as their own productivity and personal health.² The ability to identify BO using a single item is certainly important, but the real focus should shift to prevention rather than detection.

Curiosity in the practice of medicine translates into a pleasurable patient-directed learning experience, and each patient seen presents such an opportunity. At the same time, curiosity about the patient's personal aspects acknowledges the patient's unique identity and emotions. This patient-centered attitude is sensed by the patient and family, leading to both patient *and* physician satisfaction and bonding.³ When curiosity is self-directed, it implies mindfulness and reflection. All these facets of curiosity ensure daily *renewal* in practice⁴ and may constitute an effective antidote to BO.

Surprisingly, curiosity remains one of the least explored areas in medicine. However, solid evidence already supports the positive long-term effects of interventions promoting mindfulness and reflection on BO of both PCP and hospital physicians,² and highly humanistic clinicians are not only mindful but also curious.⁵ An inherently curious provider may find enjoyment in every patient encounter and may be considerably less susceptible to burnout and depression.

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