Resilience Training and Physician Well-Being

Amit Sood, MD, MSc¹ and Prathibha Varkey, MBBS²

¹Complementary and Integrative Medicine Program, Division of General Internal Medicine, Mayo Clinic, Rochester, MN, USA; ²Division of Preventive, Occupational and Aerospace Medicine, Mayo Clinic, Rochester, MN, USA.

J Gen Intern Med 26(11):1245
DOI: 10.1007/s11606-011-1855-x
© Society of General Internal Medicine 2011

Authors Reply:—We appreciate and agree with the observations made by Drs. Poses and Smith. We, however, respectfully disagree with their conclusion.

Distress among physicians is multi-factorial. Loss of control, workload, specialty choice, experience with suffering, college loans, poor self-care, maladaptive coping strategies and stressful life events all contribute to physician distress.^{1–4} The reasons for stress in our study related to both personal and professional issues across all these domains. While we fully agree with improving health care system and addressing institutional leadership issues, we recognize that those are among the many other factors that need to be addressed to prevent and address burnout. The interventions related to institutional leadership and health care systems would be among the mid-long range solutions to the issue at hand.

Resilience is one's ability to withstand and bounce back from adversity.⁵ Enhancing resilience doesn't mean becoming more accepting of what should not be acceptable. It connotes a better ability to focus on the core issues and addressing them to find productive solutions, instead of catastrophizing.

Resilience also helps with better ability to compartmentalize so an individual can maintain an acceptable quality of personal life while addressing the non-acceptable issues at work. Resiliency training and addressing the underlying issues are complementary not conflicting approaches. A multi-pronged approach to physician burnout, including resiliency training and examination of systems and leadership issues is called for.

Corresponding Author: Amit Sood, MD, MSc; Complementary and Integrative Medicine Program, Division of General Internal Medicine, Mayo Clinic, 201 First St., SW, Rochester, MN 55905, USA (e-mail: Sood.amit@mayo.edu).

REFERENCES

1. Shanafelt TD, Sloan JA, Habermann TM. The well-being of physicians. *Am J Med.* 2003;114(6):513–19.
2. Shanafelt TD, Bradley KA, Wipf JE, Back AL. Burnout and self-reported patient care in an internal medicine residency program. *Ann Intern Med.* 2002;136(5):358–67.
3. Spickard A Jr, Gabbe SG, Christensen JF. Mid-career burnout in generalist and specialist physicians. *JAMA.* 2002;288(12):1447–50.
4. West CP, Huschka MM, Novotny PJ, et al. Association of perceived medical errors with resident distress and empathy: a prospective longitudinal study. *JAMA.* 2006;296(9):1071–78.
5. Sood A, Prasad K, Schroeder D, Varkey P. Stress management and resilience training among Department of Medicine faculty: a pilot randomized clinical trial. *J Gen Intern Med.* 2011;26:858–61.