

# Unveiling the Silent Epidemic: Burnout Among Urologists

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## Abstract

Burnout among urologists is a self-reported and job-related syndrome like entity that is getting recognition as an important factor affecting urologists. The term burnout was coined in 1980 by Dr Herbert J. Freudenberger. The term implicates poor work-life balance and increasing dis-satisfaction among the urologists. It is taking a big toll over the physical and mental health. We here try to highlight factors leading to burnout and the necessary steps to reduce it.

**Keywords:** Epidemic; Burnout; Urologist; Urology; Genitourinary Surgery; Urosurgeon.

## INTRODUCTION

In the high-stakes world of medicine, where the pursuit of patient well-being intersects with the demanding nature of the profession, burnout has emerged as a pervasive issue affecting healthcare providers across various specialties. Urology, despite its critical role in managing conditions related to the urinary tract and male reproductive system, is not immune to the challenges that contribute to burnout.

Burn out is defined as a state of physical, emotional, mental, and personal exhaustion caused

by excessive, prolonged, and overwhelmed stress to meet the unmet constant demand.

In context to urologist, it was better defined by Dr Herbert J. Freudenberger in his book as the extinction of motivation or incentive, especially where one's devotion to a cause or relationship fails to produce the desired results.<sup>1</sup>

Urologists, often overlooked in discussions about physician burnout, face unique stressors that can compromise their mental and emotional well-being. The demanding nature of surgeries, long working hours, and the emotional strain of dealing with sensitive health issues are just a few factors contributing to the burnout epidemic among urologists. A study by Johnson *et al.* found that urologists reported burnout rates higher than the national average for physicians.<sup>2</sup> The rates go upto 63.3% in some studies.<sup>3</sup>

## Factors Contributing to Burnout

Burn out starts during the training when the trainee surgeons do not get satisfaction and when these trainees don't recommend the same to their

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colleagues.<sup>4</sup>

Another factor for burnout is the long working hours and working more during the weekends.<sup>4,5</sup>

When it comes to gender, males are less prone to burnout than the females.<sup>6</sup>

One significant contributor to burnout is the administrative burden placed on urologists. The shift towards electronic health record has introduced additional paper work and documentation, diverting precious time away from patient care. The Journal of Urology published a study by Smith *et al.*, highlighting the negative impact of administrative tasks on urologists' job satisfaction and mental well-being.<sup>7</sup>

Furthermore, the intense and competitive nature of the field, coupled with the pressure to stay current with rapidly advancing medical technologies, can lead to feelings of inadequacy and heightened stress among urologists. A survey by the American Urological Association revealed that 68% of urologists felt overwhelmed by the pace of technological advancements in their field.

Though, financially urologists earn more than the physicians and other surgical specialties, the above factors take a toll on the physical and mental health of the urologist. They are more prone to mental health disorders, poor physical quality of life, low level of personal and professional satisfaction and tendency of suicide, medical errors, substance abuse, marital disharmony, premature retirement from work, etc.

### **Ways to Reduce the Burnout**

Firstly, the urologist should recognize his/her symptoms if he/she getting irritated frequently or there looks imbalance between the professional and personal life or experiences too many seizures in daily life.

Secondly, after recognition urologist should seek professional advice to build resilience, improve feelings, take a control over bads and try to reduce the chaos going on.

Addressing burnout among urologists requires a multifaceted approach. Hospitals and healthcare institutions must recognize the unique challenges faced by urologists and implement strategies to mitigate burnout. These may include streamlining administrative processes, providing mental health

support services, and fostering a culture that prioritizes work-life balance.

Urologists themselves can take proactive steps to manage stress and prevent burnout. Peer support networks, regular self-assessment, and seeking professional help when needed are essential components of a urologist's well-being toolkit.

## **CONCLUSION**

Acknowledging and addressing burn out among urologists is vital for ensuring the continued delivery of high-quality patient care. By fostering a supportive environment and implementing targeted interventions, the medical community can empower urologists to thrive in their demanding profession. At the end we should remember that prevention is always the key to success for any disease.

## **REFERENCES**

1. Richelson HF. Burnout: The High Cost of High Achievement: Doubleday. 1980. [Google Scholar].
2. Johnson, J., Al-Ghunaim, T.A., Biyani, C.S. *et al.* Burnout in Surgical Trainees: a Narrative Review of Trends, Contributors, Consequences and Possible Interventions. *Indian J Surg* 84 (Suppl 1), 35-44 (2022).
3. Shanafelt TD, Hasan O, Dyrbye LN, *et al.* Changes in burnout and satisfaction with work-life balance in physicians and the general U.S. working population between 2011 and 2014. *Mayo Clin Proc.* 2015;90:1600-13.
4. Coombs DM, Lanni MA, Fosnot J, Patel A, Korentager R, Lin IC *et al.* (2020) Professional burnout in United States plastic surgery residents: is it a legitimate concern? *Aesthetic Surg J* 40:802-810.
5. Smeds MR, Janko MR, Allen S, Amankwah K, Arnell T, Ansari P *et al.* (2020) Burnout and its relationship with perceived stress, self-efficacy, depression, social support, and programmatic factors in general surgery residents. *Am J Surg* 219:907-912.
6. Erdur B, Ergin A, Turkcuier I, Parlak I, Ergin N, Boz B (2006) A study of depression and anxiety among doctors working in emergency units in Denizli, Turkey. *Emerg Med J* 23:759-763.
7. Smith C *et al.*. (2020). Impact of administrative tasks on urologists' job satisfaction. *Journal of Urology*, 205(3), 782-789.

