



BACKGROUND

- Burnout is a common problem confronting physicians in the workforce today. Prior studies have demonstrated a high prevalence of burnout amongst both practicing urologists and residents.¹
- Burnout can have dire consequences for both the practitioner and the patients: prior work has demonstrated worse patient outcomes for those under the care of a burnt-out physician.²
- The characteristics and impact of burnout among a contemporary cohort of urology residents have yet to be elucidated.
- This investigation sought to determine the true prevalence of burnout and its affect on resident performance within a cohort of high-volume, academic urology training programs.

METHODS

- An IRB questionnaire utilizing the Stanford Professional Fulfillment Index (PFI) and background questionnaire was distributed to 31 urology residents at 5 high-volume academic urology programs. De-identified in-service scores were also collected from all participating programs
- Burnout was defined as a PFI Burnout Score >1.33.
- Multivariable logistic regression assessed the relationship between social factors and burnout.
- A student's t-test and a Mann-Whitney test were both employed to examine for a relationship between burnout and in-service scores.

FIGURE 1

Survey Responses
(Out of 31 responding residents)

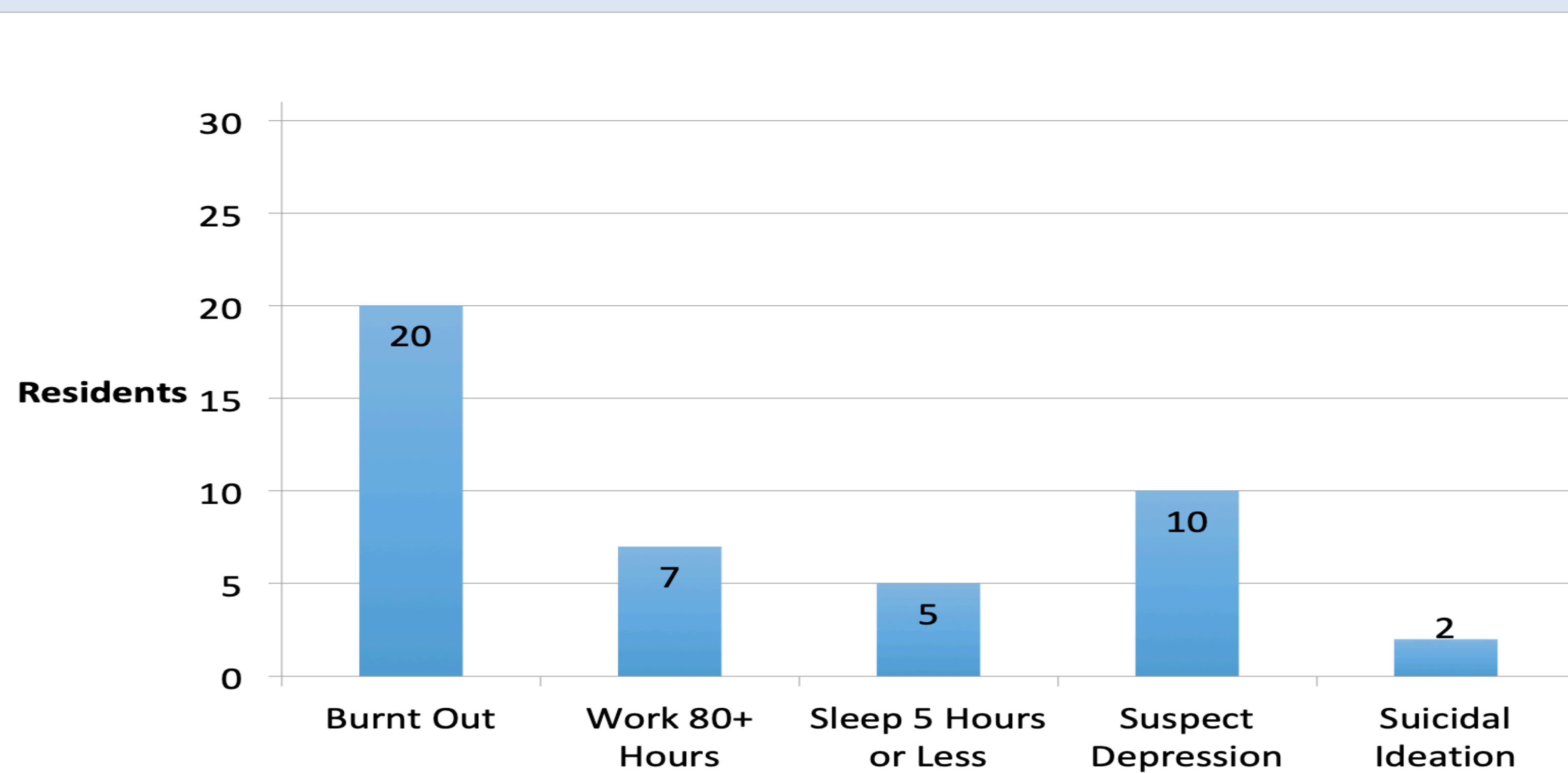


TABLE 1

Multivariable logistic regression analysis examining for a relationship with burnout

Parameter	OR	95%CI	p-value
Presence of a mentor	0.66	.09-5.10	0.69
Presence of family	4.78	0.58-39	0.14
Grit Score	0.64	0.08-5.44	0.68
Single	0.39	0.02-6.99	0.52
In a relationship	0.54	0.03-9.88	0.67
Work Hours	3.2	1.10-9.31	0.03

RESULTS

- 20 of the 31 (65%) residents surveyed qualified for burnout as defined by the PFI
- On multivariable analysis, only hours worked demonstrated a significant association with burnout (OR 3.2, 95%CI 1.10-9.31, p = 0.033).
- No association was noted between burnout and in-service scores (p=0.571)

CONCLUSIONS

- There was a palpable rate of burn-out amongst the small cohort of residents surveyed in the pre-COVID era.
- Lifestyle factors, particularly work hours, may be contributory to this sensation of exhaustion and detachment.
- Further research is required, particularly as it pertains to surveying residents during the peri-pandemic environment.
- Additional steps should be undertaken to address a burgeoning epidemic of burnout in the medical community.

REFERENCES / FURTHER INFORMATION

- Berg, S. 2019. Physician burnout: Which medical specialties feel the most stress? American Medical Association. <https://www.ama-assn.org/practice-management/physician-health/physician-burnout-which-medical-specialties-feel-most-stress>. Accessed December 5, 2019.
- Panagioti, M., Geraghty, K., Johnson, J., et al. 2018. Association Between Physician Burnout and Patient Safety, Professionalism, and Patient Satisfaction: A Systematic Review and Meta-analysis. *JAMA Internal Medicine* 178(10), pp. 1317-1330.

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