Review of *The Mindful MD* – A Path to Autonomy and Burnout Relief (Part 2 of 2)

Welcome back to Brennan Dempsey's review of *The Mindful MD* by Gail Gazelle. In Part 1, Brennan examined how Gazelle identifies the root causes of burnout among physicians and the foundational mindfulness techniques she offers to help distance oneself from negative thoughts and self-criticism. Now, Brennan continues his review by exploring Gazelle's insights on reducing emotional reactivity, cultivating compassion, and rediscovering purpose in the medical profession.

Building on the strategies we covered in Part 1 of my review, Gazelle's next injunction is to "step out of mental stories." Long, exhausting work days can lead to mental narratives about inefficacy, regret, and frustration. Some physicians ruminate or worry about mistakes and their impact. As one cardiologist told Gazelle, those worries are "like a drug with a terrible side effect profile." Gazelle tells us that we should not try to banish these stories entirely, for, as she says, "what you resist, persists." Instead, mindfulness requires seeing these stories for what they are and recognizing where they depart from reality. Even recognizing that we are caught up in a story of our own making can help us focus on what is true.

Gazelle goes on to explain that mindfulness is also about reducing our mental and emotional reactivity. Frustration over electronic medical systems and paperwork, charting, impositions from above, and dysfunction can lead to an emotional storm that is difficult to escape. In Gazelle's experience, physicians share common triggers that drive their emotions: being told they are not doing a good job, a sense of being treated unfairly, and feeling like they are not being respected. Like negative thoughts, these triggers by themselves are often transitory; the problem is that we get caught in a feedback cycle of emotions we struggle to escape. She suggests that we can reduce this reactivity by taking purposeful pauses as short as three breaths to create a gap between ourselves and our emotions. We can also become observers of our own inner state: rather than standing under the waterfall of our feelings, we can watch it cascade from a more distant vantage point. Finally, Gazelle recommends a meditation practice to reduce emotional reactivity, which is empirically proven to have a positive effect on burnout.

The fourth tool Gazelle suggests is leaning into compassion, connection, and purpose. Although these values are what lead many people to practice medicine, at times they feel scarce. Moreover, Gazelle suggests that compassion is actually undervalued in medical training in favour of knowledge, certainty, detachment, a focus on problems, and a fear of mistakes. In addition to compassion for others, it's important to have compassion for ourselves, which helps quiet our inner critic and enhances all mindfulness techniques. Gazelle argues that physicians should see **themselves** as their most important patient, despite training that teaches them to put others first. Although some of the physicians Gazelle coached found self-compassion artificial at first, she firmly believes doctors with this skill experience more positivity at work, less exhaustion, and more satisfaction with their professional lives.

One of the most difficult things to do in trying times is to "work with what is." Healthcare is never easy, and it grows ever more difficult and complex, leading to what Gazelle calls the "I'll Be Happy When" disease. This diagnosis links personal happiness to things outside a physician's control, such as EMS

systems, time with patients, or even retirement, which, in turn, can lead to learned helplessness and burnout. Mindfulness in this context is not about ignoring problems or learning to love them, but rather seeing the difficulty for what it truly is. With the power of self-mastery, we can develop inner peace, stability, and calm, which also helps restore internal autonomy. Although mindfulness is not easy, as Gazelle notes, neither is med school or living life burned out.

Lastly, Gazelle recommends drawing mindfulness practices together to "**cultivate upward spirals**." With inner autonomy, physicians can choose to take a mindful pause between an annoying interaction and a visit with a patient. With self-compassion, we can treat ourselves as we do our friends, and avoid excessive self-criticism. Meditative practice can bring insight and reduce reactivity, and focusing on what we can control prevents our frustrations with the system from boiling over or morphing into feelings of victimhood. There might even be time left over to spend with family and loved ones, enjoy restorative activities, and get a good night's sleep! Days like this, strung together, build momentum, generate energy, and create an upward spiral that Gazelle argues is "**the complete antithesis of burnout**."

Gazelle shares that she experienced childhood abuse, and that for much of her life she was prone to downward spirals. Mindfulness, however, is what she says helped her reclaim and enjoy her life and work. She sums up her mindfulness tools with the acronym SMILE: **See** what is truly there, **Meet** it with curiosity and compassion, **Investigate** with openness and kindness, **Learn** new ways of being, and **Engage** with wisdom and equanimity. Facing difficulties with a smile instead of a scowl means "we don't have to give over our contentment to a healthcare system gone awry."

The Mindful MD contains many more tools and suggestions, as well as interviews with physicians at all stages of their careers. It is short, informative, and timely, and I heartily recommend it to all who are interested in reducing burnout and increasing autonomy.