

Over Half of Pediatricians Report Burnout in 5-Year Study

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SAN FRANCISCO — Fifty-eight percent of early- and midcareer pediatricians reported burnout at least once in a 5-year longitudinal study, researchers reported May 7 here at the Pediatric Academic Societies (PAS) 2017 Annual Meeting.

Whereas previous reports have shown burnout rates to be high among physicians at a given point, few studies have followed individual clinicians over time. In the current report, William L. Cull, PhD, director of the division of health services research at the American Academy of Pediatrics in Elk Grove Village, Illinois, and colleagues examined data from the first 5 years of the Pediatrician Life and Career Experience Study (PLACES), which surveys participants twice each year with the main survey occurring in the spring.

The study included 1804 pediatricians from two cohorts: 903 midcareer physicians from the 2002-2004 pediatric residency cohort and 901 early career physicians from the 2009-2011 residency cohort. The average ages in the two groups are 45 and 38 years, respectively.

At the start of the study, in 2012, 20% of respondents reported suffering from burnout, as assessed by a previously validated single-item question. That proportion increased each year, jumping to 28% in 2013, 30% in 2014, 34% in 2015, and 35% in 2016.

Furthermore, burnout increased over time for all demographic groups examined, Dr Cull noted during his presentation. Women appeared to be more affected than men, with 21% reporting burnout in 2012 and 39% in 2016 compared with 18% of men reporting burnout in 2012 and 26% in 2016.

Pediatricians who graduated from US medical schools reported somewhat higher rates of burnout in 2012 compared with international medical school graduates (21% vs 15%). However, the two groups reported similar rates in other years, reaching a high of 36% and 34%, respectively, in 2016.

Subspecialists and nonsubspecialists reported similar rates of burnout throughout the study. The rate was 20% for both groups in 2012. By 2016, the proportion had risen to 34% and 35%, respectively.

When comparing the two residency cohorts, it appears that the later cohort may have started their careers with a higher degree of burnout than those in the earlier cohort. Whereas 21% of midcareer pediatricians reported burnout in 2012, 19% of those in the early career cohort did as well, even though they had been in practice for far fewer years.

Table 1. Percentage of Pediatricians Reporting Burnout, by Year

Cohorts	2012	2013	2014	2015	2016
2009-2011 cohort (%)	19	26	27	33	34
2002-2004 cohort (%)	21	30	33	36	37

When asked about the similarity in burnout rates between the two cohorts, Dr Cull suggested it was important to think beyond individual physicians. "There is a tendency to say this is something that happens across careers; [the older cohort] are further out, so they should be higher up the curve. But a simple explanation is that something is happening between these years, 2012 to 2016, that is impacting both of the cohorts. So it's less about total years in practice, and it's more about what is changing in the world in general or in medicine that is leading to greater exhaustion and burnout."

Work Environment Key

A second analysis supports the notion that external factors are critical. The authors examined the effect of nine lifestyle and work factors on the risk for burnout. Only one variable, decreased work hours (fewer than 50 hours/week), was not associated significantly with burnout.

Organizational changes, such as more flexible work schedules and less busyness at work, were more strongly associated with reduced burnout than were individual factors such as exercise or sleep. The findings suggest a role for employers and institutions to improve pediatrician wellness, Dr Cull noted.

Table 2. Lifestyle and Work Factors Associated With Burnout Risk

Lifestyle/Work Factors	Odds Ratio	95% Confidence Interval
Increased work schedule flexibility	0.28	0.22 - 0.35
Decreased busyness at work	0.29	0.23 - 0.36
Job change	0.44	0.34 - 0.57
Increased time with patients	0.60	0.47 - 0.75
Increased work autonomy	0.61	0.47 - 0.79
More than 7 hours sleep/night	0.63	0.49 - 0.81
Increased colleague support	0.68	0.54 - 0.87
Exercise (150 minutes moderate or 75 minutes vigorous/week)	0.73	0.57 - 0.93
50 or fewer work hours/week	0.75	0.56 - 1.02

As mentioned earlier, over the course of the 5-year study, 58% of participants reported burnout at least once. To put that rate into context, Dr Cull notes that just 17% of respondents reported being dissatisfied with their career at one or more points during the study and 23% reported being frequently sad or depressed.

However, when examined together, the researchers found that a larger proportion of those who reported burnout also reported being dissatisfied with their career compared with those who never reported burnout (26% vs 6%). Similarly, those reporting burnout were more likely to report career dissatisfaction vs those who never reported burnout (34% vs 9%).

"It's important because the group that reported burnout are much more likely to say they are dissatisfied and they are more likely to say they are depressed, but, as a whole, it is still more common for someone to say they are happy and satisfied with their career choice," Dr Cull told *Medscape Medical News*.

In the discussion following Dr Cull's presentation, several audience members asked how factors related to home life were associated with burnout. "One of the things that is striking is the difference in burnout between men and women in pediatrics. Are there any data to look at how the stresses of practice plus raising a family affect burnout? Do you have data to compare those raising a family with those who don't have children at home?" asked Robert Suskind, MD, vice president of medical affairs and professor of pediatrics and international health at California University of Science and Medicine in Colton.

PLACES has gathered information on life events and other nonwork variables, Dr Cull said. However, in this initial longitudinal analysis the team chose to focus on individual factors, such as exercise and sleep, and work-related factors. Future analyses will consider other issues, including life event and time-constant factors like race and ethnicity.

Dr Cull noted several limitations to the study, including use of a simple measure of burnout and self-reported endpoints in which different respondents may interpret burnout differently.

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