

## Medical school burnout: How to take care of yourself

FEB 1, 2019

Staff News Writer

---

The pressures of medical school can have a major impact on students' mental health and wellness. In an AMA Annual Meeting session, one expert offered insight on taking care of yourself during medical school. As part of the interactive portion of the session, students offered their own anecdotes on how they take steps toward improving their own mental health and wellness.

"Doctors actually live pretty healthy lives," Joshua Nathan, MD, said to medical students. "If you look at the mortality rates, we tend to live at least as long if not longer than other people."

"Where we suffer the most is mental health," said Dr. Nathan, a psychiatrist and behavior health medical director at the Lake County Health Department and Community Health Center in Waukegan, Illinois. "Depression and anxiety can certainly interfere with being empathetic. We have to talk about mental health and wellness to students without stigmatizing it."

### Barriers to mental health: From the student perspective

"What are the barriers that you guys face?" Dr. Nathan asked, opening the session to conversation. "What are the challenges to your mental health?"

"Part of it is stigma," one student said. "The other part is time. One of my roommates was struggling with mental health issues and she was seeing someone, but when she got to third year she didn't really have time to continue seeing this person and so she relapsed because she didn't have time to take care of herself."

"We could probably do a lot better taking care of ourselves," another student replied, "but also to take care of each other. We are in a unique position to understand and relate to one another. It's getting a little better, but we're still bred to be competitive and to not put ourselves out there if we are having a bad day."

“We’re often scared to seek treatment for depression,” a third student said. “We’re afraid of how it might affect our career.”

“I think for first- and second-year students especially, people don’t know the difference in whether this is a normal amount of stress or is this diagnostic anxiety or depression,” another student offered. “A lot of people think, ‘this is med school, I’m stressed out all the time, this is just normal.’ Opening that discussion up and telling students, ‘no, you can actually get through this and we can help you out’ would help.”

## Anticipating the causes of stress and burnout

“When we talk about physical health we do a great job,” Dr. Nathan said. “But how do you prevent mental illness? How do you prevent burnout?”

According to Dr. Nathan, the best thing to do is identify the things we can anticipate. “We know there might be a heavy workload,” he said. “Some things about the work that we do in medicine we can change, but some things we can’t. But we can anticipate both of those things. The things that we can change maybe we can do something about that.”

“There is quite literally more to know now than there was 50 years ago [when it comes to medical education],” he said. “Genetics wasn’t a big part of medicine then, but it is now. And the stuff that was part of medicine 50 years ago is still part of medicine. There’s just more information to know.”

“There are also some things we can’t change,” he said. “In part of the work I’m doing with empathy, believe it or not, we all get less empathic as we get through medical school. We start out idealistic—‘this is awesome, we’re going to help people’—and then we actually meet patients.”

Another challenge some medical students face is separation from family.

Dr. Nathan developed the Clinicians Acting to Reinforce Empathic Skill course during his tenure in the psychiatry department at the University of Illinois College of Medicine. The course includes an empathy development workshop and mental health and wellness training for medical students.

“With patients, things aren’t quite as we envision them to be,” he said. “We actually distance ourselves emotionally from what’s happening. We can anticipate this because we know that it happens.

“That’s when you start to talk about tools,” he said. “What can we do when things start to get hard? Because we know they’re going to.

“No matter how much pressure we take off before that, at some point you realize people are dying—and sometimes we can’t help them,” Dr. Nathan said. “Death is a part of life and we can start to accept that but it’s tougher than we expected it to be.”

“How many people are going to med school in the same city as their parents? How many of you are more than a five-hour drive from your parents?” Dr. Nathan asked the students gathered at the session, held during the 2016 AMA Annual Meeting in Chicago.

“You get removed from your friends, you get removed from your family, you’re thrown into a heavy workload, your supports are far away, the things you’re used to are far away,” he said. “That’s a real challenge to trying to figure out how to take care of yourself in a brand-new place and connect to your supports.”

## How three students overcome barriers

“So what do we do when it does start to get hard?” Dr. Nathan asked. “When we start to feel sad, when we start to feel stressed by the burden of having to take care of somebody?”

Three students offered ways they have found to deal with the pressures of medical school and continue to grow both emotionally and clinically as a medical student:

**Peer support:** “I live with four other people in my year and one of the things that works for us is coming together at the end of the day to cook dinner. We talk to each other so we have a really good support system. Five of us live there together. When you see a death, which definitely happens and that’s something hard, it’s really nice to have people to talk to about that.”

**Carving out time for exercise:** “First year was really tough, there were a lot of exams and I was extremely busy. I realized I had changed my routine. I didn’t take care of myself as much and I wondered, ‘Why do I feel like crap all the time?’

“And so now, in anticipation of third year, I brought exercise back into my life. I stopped exercising in first year because I didn’t feel like I had enough time. I would eat all day [while] studying and I gained weight and I felt so unhealthy. I realized that running again would make me feel good and I needed to be more mindful of that. Carving out [time to exercise], no matter how busy I was or how stressed out school made me, changed things.”

**Journaling:** “I’m a rising M4 and I’m part of a bioethics program where we were tasked to, for every single clinical rotation we’d taken, write three journal entries. I have found that there’s something about a blank piece of paper and being required to write about my experiences that is very cathartic.”

“It has helped me understand the harsh feelings I’ve had about surgery or really happy feelings I’ve had about psych or pediatrics. It’s sort of an all-encompassing thing that it’s okay to feel this huge range of emotions and that’s allowing me to grow and deal with the good and the bad and the feelings in the middle.”