Physicians are saying that, “in many cases, technology isn’t working for them” and they are “feeling burned out because of the stresses of the current environment of practice,” AMA President David O. Barbe, MD, MHA, said during a recent talk at a conference of health IT movers and shakers in which he explained how the AMA is working to help make technology function better for patients and physicians to improve care while reducing and preventing burnout in the clinical community.

The majority of issues that cause burnout can be attributed to the environment that physicians practice in. Burnout can lead to depression, suicide or early retirement, Dr. Barbe said at the 2017 Connected Health Conference in Boston. That amounts to a decrease in productivity and engagement that the medical community cannot afford in one of the critical parts of the health system. Addressing physician burnout is not about increasing a physician’s personal resilience, but instead requires making real system changes.

“We have to get our arms around this issue of physician burnout,” Dr. Barbe said.

He noted the findings of a study published in Mayo Clinic Proceedings that found the rate of burnout across all specialties is worsening. More than half (54 percent) of U.S. physicians are experiencing at least one symptom of burnout, which is up from 46 percent three years previously.

Physicians overwhelmingly say, “I don’t have the proper work-life balance,” with less than one-third saying they can manage that balance, said Dr. Barbe. A typical physician may spend twice as much time performing clerical activities—data entry, prior authorizations, paperwork—than they do with direct clinical decision-making time with their patients.

Solutions for improved physician support
The AMA has taken a new look at its full range of activities and has outlined the four P's of how the Association is innovating and looking at the way things can be done differently. These include programs, partnerships, products and policy.

“We can’t do any part of this by ourselves,” he said. “We need partnerships and collaborations to really move this industry forward to benefit physicians and patients.”

Tools and resources are available from the AMA to guide professional development and make the delivery of care more effective and efficient for physicians. In digital and mobile health, Dr. Barbe said the AMA’s goal is for physicians to be involved in all stages of the development of practice-streamlining solutions.

One partnership is with MATTER in Chicago, a health technology incubator where entrepreneurs and physicians collaborate on creative digital solutions for common health care frustrations. The AMA is also the anchor investor of Health2047, a Silicon Valley-based innovation enterprise developing and commercializing solutions in the areas of data liquidity, chronic care, productivity and payments to significantly change U.S. health care at the system level.

Last year, a new partnership was formed with Sling Health in St. Louis. Sling Health is a biotechnology incubator run by students from Harvard, MIT, Washington University and other elite schools to help inspire and support cutting-edge medical technology development. Additionally, the AMA is a founding member of the Sequoia Project, a nonprofit that provides program support for health IT interoperability. And Xcertia, co-founded by the AMA, is a nonprofit working to establish and promote industry guidelines for safe and effective mobile health apps.

The AMA’s Physician Innovation Network (PIN)—a second generation of which was unveiled in the fall—is another example of how the AMA is connecting physicians with technology innovators. PIN is designed to give physicians and health tech companies a way to connect online to develop health care solutions.

Another recent initiative is the AMA’s Integrated Health Model Initiative, or IHMI, which brings together the health and technology sectors from leading organizations around a common data model that is missing in health care. IHMI aims to create a framework for organizing data across health care and seeks to provide a shared framework for organizing health data, emphasizing patient-centric information and data elements most predictive of achieving better outcomes, goals and wellness for patients.

“Medicine is a wonderful profession. I count my blessings every day I walk into the exam room with a patient,” Dr. Barbe told the Connected Health Conference audience of physicians, tech developers, health care executives, academics and researchers. “I encourage you to join with us and let us develop the tools and processes that will let us move the area.”

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Physicians are eager for the advances that technology can provide, but too often they are not experiencing those right now. Many of the physicians find that the technology presented so far adds work to their day, interferes with their relationships with their patients, and often costs them more directly and indirectly than they can recognize in benefit, he said.

“We have a lot of work to do to move the needle on these dimensions to both increase the physician’s excitement about adopting these technologies, as well as making them work for them instead of against them,” said Dr. Barbe.

To ensure new digital health solutions facilitate effective care and relationships between patients and physicians, the AMA brings the physician voice to innovators and entrepreneurs. By recognizing the key challenges physicians face when implementing health IT and the increase of direct-to-consumer digital health apps, the AMA aims to help physicians navigate and maximize technology for improved patient care and professional satisfaction.

The AMA is focused on influencing health IT with the goal of enhancing patient-centered care, improving health outcomes and accelerating progress in health care.

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