Is your physician colleague at risk for suicide? Signs to look for

AUG 14, 2019

Staff News Writer

Two-thirds of people who attempt suicide do so after having seen a physician within the previous month. It’s a strong statement about the importance of being alert for telltale signals. That extends to high-risk individuals who aren’t patients, but who many physicians see every day—their colleagues.

The AMA House of Delegates recently directed that the Association explore collecting data on physician suicide. It is commonly understood that medical students, and physicians in residency and practice are at increased risk, not only for suicide, but also for the related factors of burnout and depression.

Recently released CME covering suicide screening and prevention for patients also addresses what physicians should look for among their colleagues—and themselves—to reduce the chances of suicide.

The CME video, “Identifying and Responding to Suicide Risk,” is designated by the AMA for one AMA PRA Category 1 Credit™.

The module is part of the AMA Ed Hub™, an online platform that brings together high-quality CME, maintenance of certification, and educational content—in one place—with relevant learning activities, automated credit tracking and reporting for some states and specialty boards.

Suicide’s toll

This learning activity emphasizes that anyone can be at risk for suicide, “which often occurs when stressors and health issues collide to create feelings of hopelessness and despair.” The activity
sketches suicide’s scope and common signals.

Suicide is the 10th leading cause of death in the nation. It is the second leading cause in ages 15 to 34, and the fourth leading cause in ages 35 to 54.

It claims the lives of nearly 47,000 Americans every year. There is a suicide every 12 minutes and about 123 every single day.

An estimated 250,000 people each year attempt suicide. More than a million people will have suicidal thoughts.

Many times, signs of personal crisis precede suicide. The module provides an extensive list, including increased substance abuse, mood changes, depression, anxiety, agitation, anger, loss of interest, humiliation and shame, or expressing no sense of purpose in life.

**When a physician exhibits risk**

The module emphasizes the value of routine patient screening. However, physicians going about their day are not encountering colleagues as patients, and it’s very unlikely that they will slide a screening questionnaire on to a colleague’s desk. The module provides specific insights for peer-to-peer interactions.

Be alert to colleagues and the multiple stressors they face. That could include general job problems, recent loss of a patient, license restriction, malpractice, financial problems, a professional identity crisis, or professional isolation.

The module includes the scenario of physician-to-physician encounter. In it, a physician finds a colleague sitting in her office and staring out into space with a worried look. She has confided previously to working more than 70 hours a week and feeling burned out.

When concerned, don’t worry too much about having the exact right thing to say. The goal is to just start the conversation. It is enough to say, “How are you doing today?”

Encourage a colleague to share what is going on. In a recent survey, 80% of physicians indicated their workload was at capacity. In circumstances like that, a colleague may well encounter the words of the scenario’s troubled and exhausted physician: “I just don’t know how I can keep going like this. Work is just too much and I feel like I’m not making a difference here.”
When warranted, don’t hesitate to ask about self-harm. It will not increase the chances that someone will commit suicide.

Consider what assistance to offer. What physicians know—but could benefit from being empathically reminded of—is that depression, stress or distress are temporary and treatable. The module suggests perhaps referring a colleague to a therapist or employee assistance program or offering help with managing a caseload.

That assistance should be offered in the spirit of, “Let’s do this together and get you the help you need.”

The AMA Ed Hub also offers a course on physician burnout for a total of 8.5 CME credits. These CME and education activities help you understand and prevent burnout, redesign your practice to reduce stress and promote well-being.

Learn more about AMA CME accreditation.