If you are a physician who is feeling as though your accomplishments are inadequate and your successes are undeserved or due to chance rather than personal effort, skill, ability and competence, you are not alone.

It’s called the “imposter phenomenon” and research shows physicians are more likely to experience it than other professionals. In fact, nearly one in four physicians report frequent or intense experiences with it, according to a study published in Mayo Clinic Proceedings.

Perhaps more importantly, the study found that the imposter phenomenon in physicians is associated with higher odds of both burnout and suicidal ideation. Physicians experiencing imposter phenomenon also have increased odds of lower professional fulfillment.

The study authors called for system-level efforts in the medical profession, health care organizations and individual physicians to address the professional norms and characteristics of organizational culture that contribute to the imposter phenomenon.

“These efforts should include debunking the professional norms and attitudes that cast physicians as superhuman, stigmatize help-seeking as weakness and position work perpetually above basic human needs,” said the study’s primary investigator, AMA member Tait Shanafelt, MD, chief wellness officer at Stanford Medicine.

“Such attitudes can be replaced with a culture of authenticity and vulnerability during the medical school and residency-training process—and, once in practice, to replace a culture of perfectionism with a commitment to excellence and a growth mindset,” added Dr. Shanafelt.

**Who experiences imposter phenomenon?**
Women and younger physicians as well as doctors working in academic practice or in the Veterans Health Administration had higher imposter-phenomenon scores. Older physicians and those working in private practice tended to have lower scores.

The higher prevalence of imposter phenomenon “among women physicians is notable and indicates an additional dimension that may contribute to higher rates of burnout for women physicians,” the study says.

Pediatricians, pediatric subspecialists and emergency physicians had the highest imposter-phenomenon scores in the study when specialties were compared. Ophthalmologists, radiologists and orthopedic surgeons, meanwhile, had the lowest scores.

Using defined thresholds, the severity of imposter-phenomenon symptoms among the 3,000 physicians who participated could be categorized as follows:

- 40.4%—minimal.
- 36.4%—moderate.
- 17.4%—frequent.
- 5.8%—intense.

How does it correlate with burnout?

Imposter phenomenon was independently associated with burnout, professional fulfillment and suicidal ideation after adjusting for age, gender, relationship status, specialty, hours worked per week, practice setting and self-valuation score.

Relative to those with low imposter phenomenon scores, the odds for experiencing burnout were 28% greater among those with moderate imposter phenomenon. Meanwhile, the odds were nearly 80% greater for those experiencing frequent imposter phenomenon and 113% for those experiencing intense imposter phenomenon symptoms.

Additionally, physicians experiencing moderate imposter phenomenon had 29% higher odds of suicide ideation. The numbers jumped to 41% among those categorized as frequent and 162% for those with intense imposter phenomenon.

And physicians who were experiencing imposter phenomenon were less likely to report having high professional fulfillment compared to colleagues not experiencing it. Then physicians with moderate imposter phenomenon had about 40% lower odds of having high professional fulfillment, while those with frequent or intense experiences had about 60% lower odds.
Reducing physician burnout is a critical component of the AMA Recovery Plan for America’s Physicians.

Far too many American physicians experience burnout.

That's why the AMA develops resources that prioritize well-being and highlight workflow changes so physicians can focus on what matters—patient care.

**How to spark change?**

The study authors offered system-level tactics on how to reduce symptoms of imposter phenomenon in physicians. They included:

- Storytelling events that provide the opportunity to share personal narratives.
- Small group discussions.
- Older physicians discussing the challenging times in their career and sharing their “failure resume” during department meetings or other forums.
- Identifying and evolving professional norms that suggest physicians should be superhuman or neglect personal needs.
- Efforts to normalize help-seeking and reduce stigma.