

How burnout can hinder patient-physician communication

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When a doctor is experiencing burnout, it can lead to adverse outcomes and poor patient-physician communication. Find out more.

Repeated exposure to high-demand, low-control health care environments is linked to adverse outcomes including burnout. And recently published research finds a link between physician burnout and poor patient-physician communication.

Committed to making physician burnout a thing of the past, the AMA has studied, and is currently addressing issues causing and fueling physician burnout—including time constraints, technology and regulations—to better understand and reduce the challenges physicians face. By focusing on factors causing burnout at the system-level, the AMA assesses an organization's well-being and offers guidance and targeted solutions to support physician well-being and satisfaction.

The study, "Provider burnout and patient-provider communication in the context of hypertension care," published in the journal *Patient Education and Counseling*, emphasizes the important role patient-physician communication plays in health outcomes, particularly among patients with chronic disease.

Researchers studying 26 primary care physicians and other clinicians caring for patients with hypertension found an inverse association between burnout and relationship-building communication such as displaying empathy. And relationship-building, in turn, was linked to suboptimal patient care in the researchers' multivariate models.

Marie Brown, MD, the AMA's director of practice redesign, was not part of the research team behind the study, but she took some time to explain in greater depth the clinical contexts in which burnout can impede patient-physician communication.

Nonadherence, fragmented care

Physician burnout—defined by emotional exhaustion, depersonalization and a lack of sense of personal accomplishment—can interfere with quality patient care. For example, a physician who is burned out may be less likely to uncover that a patient wasn't taking the first or second diabetes drug.

Instead, the physician is likely to refer more, less likely to uncover nonadherence and more likely to prescribe a third or fourth medication unnecessarily, said AMA member Dr. Brown. This leads to fragmented care, poor outcomes, patient dissatisfaction and higher cost.

“Many physicians who are burning out and emotionally exhausted will not have the patience to dig deeper into why the patient is not following the recommendations,” she said. “Without good patient-physician relationships, we would not be able to achieve the outcomes of low blood pressure and diabetes control, which translates to fewer amputations, less kidney disease, fewer heart attacks.”

Nothing left for relationship

“The only way to improve patient communication is to have the time to communicate,” said Dr. Brown. “For most physicians working in a chaotic, under resourced environment, time is what is lacking.”

Burnout is linked to less relationship-building and patient-centered communication. This is because if the physician is experiencing burnout, the doctor does not “have any emotional reserve left to empathize with the patient,” said Dr. Brown.

For example, a young woman with low risk of heart disease complains of chest pain. It takes a tremendous amount of empathy and time to dig deeply into what is going on in that patient's life. The patient relationship needs to be developed to generate trust.

“Trust has to be increased for that woman to share that there may be domestic violence at home and that her complaining of chest pain was a call for help for the result of being pushed at home,” said Dr. Brown. “The woman does not need a cardiology referral or a stress test. That woman needs the understanding ear of a physician who can provide her the resources she needs to protect herself and her family.”

“Enhancing communication requires reorganization of the workflow so that the physician has no distractions when they are talking to the patient,” she said.

The AMA's STEPS Forward™ open-access modules offer innovative strategies that allow physicians and their staff to thrive in the new health care environment. These courses can help you prevent physician burnout, create the organizational foundation for joy in medicine and improve practice efficiency. One CME module specifically addresses listening with empathy.



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