Protective and risk factors for psychiatric morbidity among GPs

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Health and Organization among GPs

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Background physicians’ health

- **Burnout** (Dewa, 2014; Houkes, 2011, Romani & Ashkar, 2014)
- **Suicide ideation** (Eneroth, 2014; Fridner, 2009, 2011; Rosta 2013; Shanafelt, 2011; Wall, 2014)
- **Self-diagnosing and -treatment** (Montgomery, 2011; Stoesser, 2014)
- **Seeking professional help** (Adams, 2000; Fridner, 2012; Tyssen, 2007)
- **Declining professional performance**
  - impair quality of patient care (Baldisseri, 2007; Bright & Krahn, 2011)
  - affect doctor – patient communication (Firth-Cozens, 1998)
  - medical errors (Fahrenkopf, 2008; Garrouste-Orgeas, 2015; Williams et al, 2007)

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Previous research (see for example Embriaco, 2012; Renzi, 2012; Wang 2011)

- **Factors that increase psychiatric morbidity**
  - heavy work load
  - impaired relationship with colleagues
  - unsatisfactory communication
  - job stress

- **Factors that reduce psychiatric morbidity**
  - work control
  - workplace social support
  - being relieved from service after night shift

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Resilience


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Population and setting

- N = 283, response rate 41%
  - 181 female GPs
  - 102 male GPs
- 26% foreign-born physicians
- Health care region in central Sweden

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Outcome variable GHQ-12 (Goldberg & Williams, 1991)

- Anxiety, depression, sleep disturbances and feeling less capable or confident
- Cutpoint ≥3 (Holt & Del Mar, 2005; Jackson, 2007; Kelly et al, 2008)
- 22.5% men and 26.5% women
- (α = .81)

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Illegitimate work tasks (Semmer, 2010)

- Unreasonable tasks
  - outside the range of one’s occupation
- Unnecessary tasks
  - Should not be carried out at all

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Independent variables

- Vacancies
- Control work pace
- Patient work stressful
- Illegitimate work tasks
- Self treatment

** = p-value < 0.01

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Multiple logistic regression model among female GPs with psychiatric morbidity as the outcome variable

<table>
<thead>
<tr>
<th>Predictors</th>
<th>OR</th>
<th>p</th>
</tr>
</thead>
<tbody>
<tr>
<td>Being married</td>
<td>0.87</td>
<td>NS</td>
</tr>
<tr>
<td>Vacancies</td>
<td>1.46</td>
<td>**</td>
</tr>
<tr>
<td>Control work pace</td>
<td>0.47</td>
<td>**</td>
</tr>
<tr>
<td>Patient work stressful</td>
<td>3.48</td>
<td>***</td>
</tr>
<tr>
<td>Illegitimate work</td>
<td>1.19</td>
<td>NS</td>
</tr>
<tr>
<td>Self treatment</td>
<td>1.14</td>
<td>NS</td>
</tr>
</tbody>
</table>

OR = Odds Ratio, NS = Statistically non-significant (p > 0.05)
** = p-value < 0.01, *** = p-value < 0.001

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Multiple logistic regression model among male GPs with psychiatric morbidity as the outcome variable

<table>
<thead>
<tr>
<th>Predictors</th>
<th>OR</th>
<th>p</th>
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</thead>
<tbody>
<tr>
<td>Being married</td>
<td>0.07</td>
<td>**</td>
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<tr>
<td>Vacancies</td>
<td>2.46</td>
<td>**</td>
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<tr>
<td>Control work pace</td>
<td>0.43</td>
<td>NS</td>
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<tr>
<td>Patient work stressful</td>
<td>1.71</td>
<td>NS</td>
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<td>Illegitimate work</td>
<td>2.64</td>
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<tr>
<td>Self treatment</td>
<td>2.37</td>
<td>**</td>
</tr>
</tbody>
</table>

OR = Odds Ratio, NS = Statistically non-significant (p >0.05)
** = p-value < 0.01

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Summary psychiatric morbidity

- Female protective factor
  - Control work pace

- Male protective factor
  - Being married

- Female risk factors
  - Stressful patient work
  - Vacancies

- Male risk factors
  - Illegitimate work
  - Vacancies
  - Self-treatment

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Thank you for listening!

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