



European  
Association for  
Physician Health



**The mental health levels of rotating  
medical students from the universities of  
Francois Rabelais in Tours and Paris7-  
Diderot, an epidemiological descriptive  
multicentric transverse study**

Being a doctor and staying a person

April, 24&25th 2017 - Paris

# ➤ **Motivation for this study**

→ Great deal of data gathered for Doctors and post graduation students; but where do we stand on rotating medical students?

→ Final three years (Externat)=critical years

→ Topical issue +++ (QVT)



# ➤ Questions and objectives

→ Life style, Quality of life, Anxiety, Depression, Burn Out, Sleep Disorders, Psychosomatic disorders, Addiction, Suicidal tendencies, Urges to quit medical school, Consommation of psychoactive substances in the medical student population of the François Rabelais University of Tours?

→ Are there existing Associated factors?

→ **A Study in collaboration with Paris 7-Diderot University, where similar questions have been raised.**

## ❖ **Secondary Objective**

→ Which pertinent comparative degrees can we establish between the rotating medical students populations of the François Rabelais University of Tours and Paris 7-Diderot University?



# ➤ **Sample and Protocol**

- Medical students of Tours and Paris 7-Diderot
- Twofold Anonymous self-questionnaire using Google Forms
- Strictly identical Protocols in both cities
- Statistic analysis: Excel database, R software; univaried and multivaried analysis



	<b>François Rabelais of Tours</b>	<b>Paris 7-Diderot</b>
<b>Response percentage</b>	61,1%	43,4%
<b>DFASM1 (Fourth year)</b>	34,9%	36,8%
<b>DFASM2 (Fifth year)</b>	30,7%	34,4%
<b>DFASM3 (Sixth year)</b>	34,4%	28,8%
<b>Women</b>	63,8%	66,2%
<b>Men</b>	36,2%	33,8%
<b>Average age</b>	23,02	23,01
<b>Living situation</b>	Alone (59,4%)	Parental home (48,7%)
<b>Mothers level of Education</b>	Higher (67,3%)	Higher (70,8%)
<b>Fathers level of Education</b>	Higher (65,4%)	Higher (68,4%)
<b>Out-goings restaurant/bar/café</b>	once a month (43,8%)	Once a week (42,1%)
<b>Out-goings movie/museum/theater/exhibit</b>	once a month (40,5%)	once a month (42,9%)
<b>Visits family/friends</b>	More than once a week (40,6%)	More than once a week (36,6%)
<b>Physical activities</b>	once a week (41%)	once a week (31,2%)

	<b>François Rabelais of Tours</b>	<b>Paris 7-Diderot</b>
<b>Friends and Family support</b>	97,6%	97,2%
<b>Remotness</b>	3,78 (+/-1,17)	3,82(+/-1,15)
<b>Hospital internship satisfcation</b>	3,44(+/-0,97)	3,33(+/-1)
<b>Weight Variation (+/-2kg)</b>	44,5%	49,3%
<b>Smoking</b>	16%	23,5%
<b>Alcohol (dépendancy)</b>	84,6% (9,2%)	82,3% (9,5%)
<b>Marijuana (needing rehab)</b>	6,4% (70,5%)	21,1% (49,5%)
<b>Hard drugs</b>	9,6%	15,5%
<b>Stimulants</b>	24,1%	20,5%
<b>Anxiolytics</b>	37,1%	32,8%
<b>Somnifics</b>	26%	24,9%
<b>Antidépessants</b>	13,4%	13,3%

	<b>François Rabelais of Tours</b>	<b>Paris 7-Diderot</b>
<b>Anxiety</b>	39,9%	45,3%
<b>Dépression</b>	9,1%	12,1%
<b>At least one dimension of BO</b>	69,1%	76,1%
<b>1 dimension (weak BO)</b>	40,9%	39%
<b>2 dimensions (medium BO)</b>	19,5%	24,9%
<b>3 dimensions (severe BO)</b>	8,7%	12,1%
<b>High Emotional Exhaustion</b>	29,9%	34,6%
<b>High Depersonalisation</b>	25,2%	32,6%
<b>High Loss of Personal Accomplishment</b>	50,9%	57,9%
<b>Psychosomatic Disorders</b>	26,7%	37,2%
<b>Sleep Disorders</b>	57%	68,8%
<b>Quality of life</b>	35,1%	37,6%
<b>Urges to Quit Med School</b>	63,5%	65,6%
<b>Suicidal tendencies</b>	21,5%	20,1%
<b>Suicide Attempts</b>	2,6%	2,6%



# ➤ **Associated Factors**

- Lack of satisfaction during internships
- Remoteness from family due to Medical Studies
- Little/no support from friends and family
- Older age
- Being Female
- Weight Variations
- Smoking



# ❖ Comparison Tours-Paris 7

→ Main Differences :

Smoking , Hard drugs, Marijuana, Depersonalisation, Loss of Personal Accomplishment, 2 and 3 degrees of BO, Psychosomatic Disorders, Sleep Disorders

→ The city effect

**Paris:** Psychosomatic Disorders, Sleep Disorders, Depression, Marijuana consumption , Depersonalisation

**Tours:** Loss of Personal Accomplishment

→ Identical global trend+++



# ➤ Discussion

- Data in accordance with existing studies
- Continuity of suffering during Medical school and after doctoral graduation



# ➤ Conclusion

➤ Objective suffering

➤ City dependancy?

→ But similar global trend/ National Problem

➤ Which cure for this population?

➤ Public health issue+++/ Political and hospital-university reforms needed



**Thank you for your Attention**

