



European
Association for
Physician Health



**Association MOTS (Médecin Organisation
Travail Santé): Feedback on the follow-up of
doctors facing difficulties, medical support
and prevention measures**

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Being a doctor and staying a person

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MOTS : Follow up

Objectives

- ✓ Assistance for doctors presenting occupational and/or personal dysfunctions specific to medical practice,
- ✓ To propose appropriate medical support,
- ✓ Pluri-disciplinarity (medical, social...)

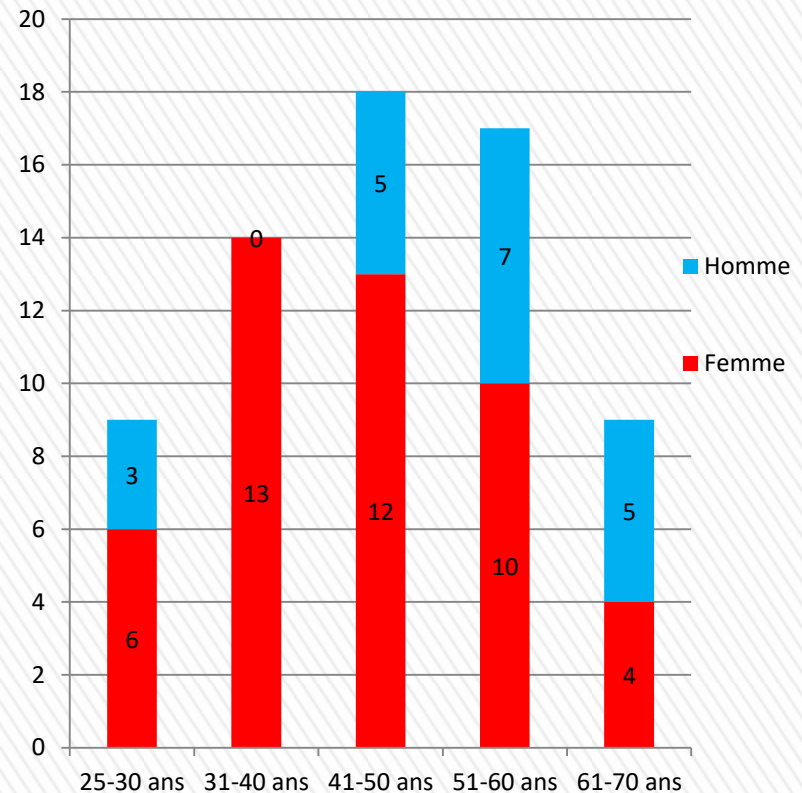
Means

- ✓ **Occupational physicians**, supervision with a psychiatrist
- ✓ **Confidential** interviews (63), phone calls (35) and mail exchanges (19)
- ✓ **65 doctors** during two years (2015-2016)



All practitioners are represented

- Private physicians, the “first target” (57 %), salaried doctors (23 %) and hospital workers (20 %).
- Women (66 %), men
- General practitioners (63 %), specialists
- From 25 to 69 years old,
- Junior doctors (6 %), retired doctors(3 %),



Confidential Follow up

- ✓ *First Call : a Call for Help* : Isolation and guilt
 - Valide and eliminate an emergency (alcoholism, suicide)
 - Guide MOTS (www.association-mots.org) : MBI test, surveys
- ✓ *First interview or phone call : 1 hour*
 - Professional and personal life and health events
 - Occupational dysfunctions
 - Propose appropriate support : « open new horizons »
medical care, professional project, institutional relations,
social ...
- ✓ *2d or third interview or phone call if necessary*
 - Evolution / health : amelioration or not (hospitalisation)
 - Work organization , social and financial situation



Medical Evolutions and Occupational Risk Factors

Demographic evolution and work intensification : More with less

- Medical penury, especially in rural or mountain areas
- Ageing of doctors, long studies,
- Feminization, especially for 31-40 years old women : overwork and burn out, motherhood and family caring (10/13)
- Part times
- Wear or deception

A Great Time Pressure



Private practice

- Medical penury, rural and urban areas
- Disorganization, lack of supply physicians (holidays, sick or maternity leave, retreat)
- Overwork even with part-time work or 2 part-time (1 or 2 days in nursing home)
- Personal and ethical conflicts with associates, council, institutions ,
- Fear of medical error (emergency and end-of-life care)
- Fear of leaving patients (sick leave)
- Legal proceedings
- Lack of prospects for the future, deception
- Financial or social issues (precarious situations).



Salaried and hospital doctors

- Psychological workplace risk : Conflicts (7/15) : hierarchical (5/15), colleagues (2), value conflict
- Moral harassment (2),
- Lack of consideration (human and/or financial)
- Overwork by accumulation of functions : Overwork even in part-time, or two part-time
- Understaffing : reorganization, posts restrictions
- Dismissal or resignation (salaried)
- Professional transfer (hospital)



Personal Factors

- ✓ Traumatic antecedent : beaten child (2)
- ✓ Dictated medical studies (2)
- ✓ Familial difficulties : splits, death or serious illness (children (2), brother or sister (2), mother or father, all age...)
- ✓ Social and financial difficulties : precarity (3), jobless spouse (7), financial negligence (unpaid taxes (2), ruin (2))
- ✓ Social, solidarity or sport commitments, protection or risk factor (sport accident, overwork)
- ✓ Artistic commitment : protection



Psychological Factors

- Anxiety, insomnia, depression, somatic problems,
- Personality (obsessive disorder...)
- Burn out, Addiction,
- Denial, deadlock
 - I can't say NO to my patients, chief, colleagues, family...
 - I can't go on but I can't stop, I feel guilty
 - I have no time, no money,
 - It's not possible

Working to live or living to work ?



Being a Sick Doctor

From “Physician heal thyself” to “Care for care givers”

- No or few medical care : no general practitioner,
- Short and delayed sick leave or maternity leave, miscarriage or premature delivery (5)
- Chronic somatic disease : cancer (3, one death), diabetes mellitus (2), heart disease (2), pulmonary embolism (1), rheumatoid arthritis (2)
- Mental illness : depression (18), bipolar disorder (2), suicidal thought (2)...
- Addiction (alcohol 2, morphine 1)
- Serious traffic or sport accident (2)



Medical support

Doctors suffer from isolation and guilt.

- Attentiveness,
- Raise awareness,
- Systemic approach,
- Professional reorganization, change of practice,
- Physical and psychical care, general practitioner, healthy way of life,
- Medico-social and medico-legal-administrative orientations to be structured for more efficiency.



Clinical Case

Docteur L, general practitioner man, 43 years old, married, 3 children

Work story :

1992-2000 : medical studies, one difficult period,

2000-2016 : alternative private and salaried doctor

2015 : overwork, exhaustion, anxiety, fear of medical mistakes,

« I can not say stop or no, I like medecine especially pediatriy and my job but I would better stop ...



1st Appt :

MBI test : high 3 scores, exhaustion, depersonalization and diminution of personal accomplishment

Work organisation and relationship patient surveys : problem with end of life and geriatric people

Health survey : good health except anxiety

Advice : psychiatric follow up, work reorganisation

2d Appt : 6 months later (twice delayed/patient, summer, no time)

Worsening situation, insomnia, panick attack, hospitalisation.



3d Appt : phone call : 9 months later

Stop private activity, salaried doctor, continuous training, feel better



Find and Keep Balance

- Doctors are subject to strong professional requirements and need to be accompanied.
- Overwork and exhaustion result from the degradation of working conditions with major disequilibrium of the balances efforts / rewards (stress), and constraints / resources (burn out).
- Future : Primary prevention, health promotion during initial and continuing education, and mobilization of health actors and decision-makers in response to this challenge during the whole professional life :

Keeping physicians in good health to provide good care.

Thank you for your attention

