



Palliative Care As An Anti-burnout



Perspective Of The Resident In Family Medicine

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Lecture Outline

- Burnout and residency
- Family medicine principles & residency
- Home hospice as anti-burnout practice

What Is Burnout?

- Pathological syndrome in which emotional depletion and maladaptive detachment develop in response to prolonged occupational stress

Work Characteristics Related With Low Burnout

- Time off
- Flexible working hours
- Managing owns time
- Opportunities for learning
- Future career prospects
- Clear management
- Adequate feedback on performance
- Voice in important matters
- Culture of openness & tolerance
- Good salary

Residency & Burnout

- Intense work demands
 - Long hours
 - Tremendous responsibilities (lives of others)
- Low autonomy
 - Limited control over time management
 - Lack of empowerment (but also lack of support)
- Work-home interference
- Communication problems within the team

- Thomas, N. K. (2004). Resident burnout. *Jama* 292, 2880-2889.
- Nyssen AS, Hansez I, Baele P, Lamy M, De Keyser V. Occupational stress and burnout in anaesthesia. *Br J Anaesth.* 2003;90:333-337.

Burnout Dimensions

- Emotional exhaustion – depletion of individual's energy
- Depersonalization & cynicism – detachment from the job
- Feelings of inefficacy – lack of personal achievement

Anti-burnout Suggestions

- To improve resident wellbeing:
 - Restoring meaning to residents' time commitments
 - Facilitating supportive social interactions
 - Increasing resident work control
 - Promoting the separation of work & home life

Family medicine is the medical specialty which provides continuing, comprehensive health care for the individual and family. It is a specialty in breadth that integrates the biological, clinical and behavioral sciences. The scope of family medicine encompasses all ages, both sexes, each organ system and every disease entity.

Principles Of Family Medicine

- Continuing and comprehensive health care for the individual and the family.
- Integrates the biological, clinical, and behavioral sciences.
- Optimal physical and mental health.

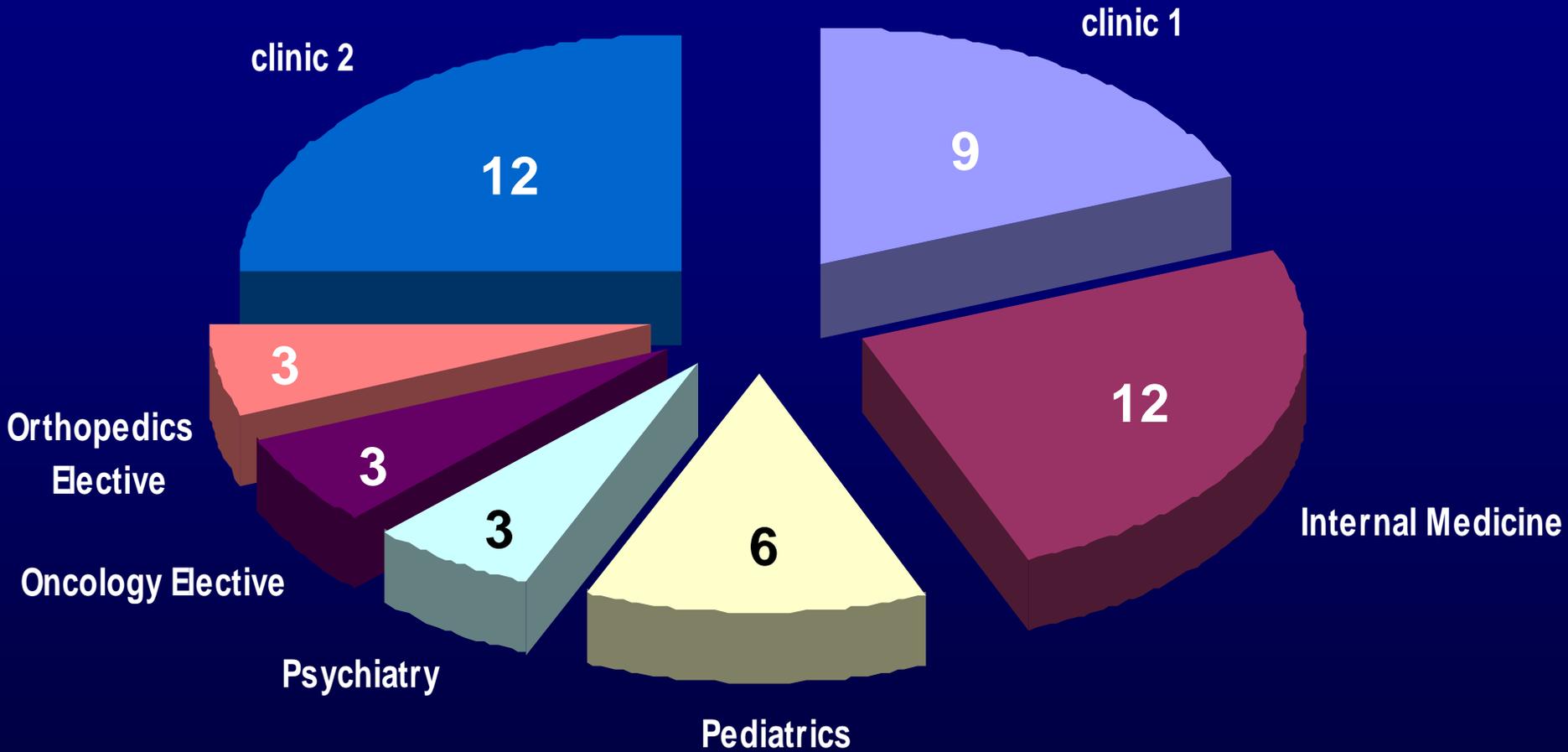
Principles Of Family Medicine

- Responsive to the needs and preferences of patients.
- Respectful of patients' families, personal values, and beliefs.
- Prime importance of patient-physician relationship with the patient viewed in the context of the family.

Principles Of Family Practice

- Access to care
- Continuity of care
- Comprehensive care
- Coordination of care
- Contextual care

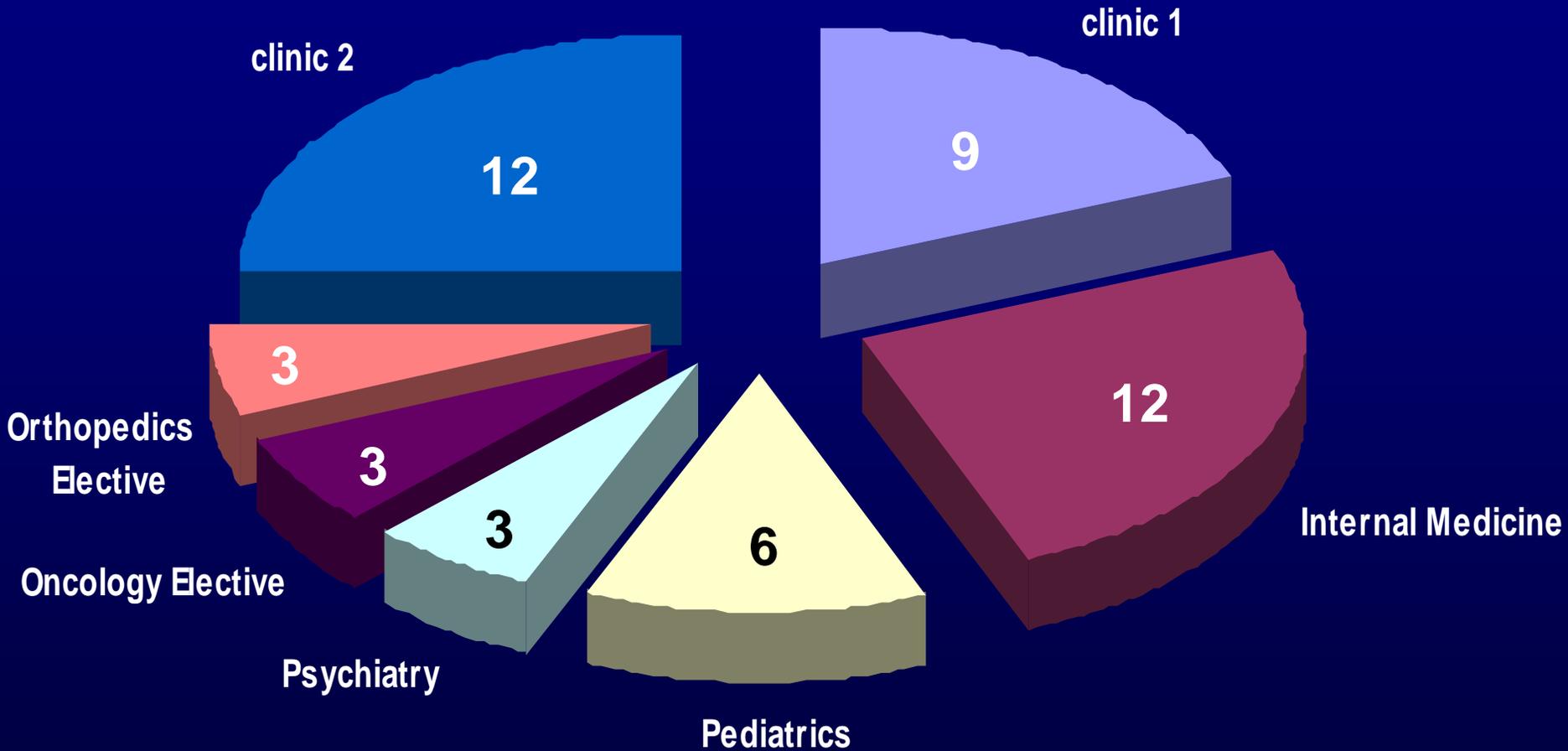
Family Medicine Residency 4 years



Residency Reality

- Disease oriented medicine
 - Mostly biological approach
 - Hospital (& clinic) setting
 - Random encounters
 - Short time per patient
 - Limited communication
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Family Medicine Residency 4 years



+ 4 Year Academic Course in Family Medicine

Essentials Of Palliative Care

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 - Integrates the biological, clinical, and behavioral sciences.
 - Optimal physical and mental health.
- 

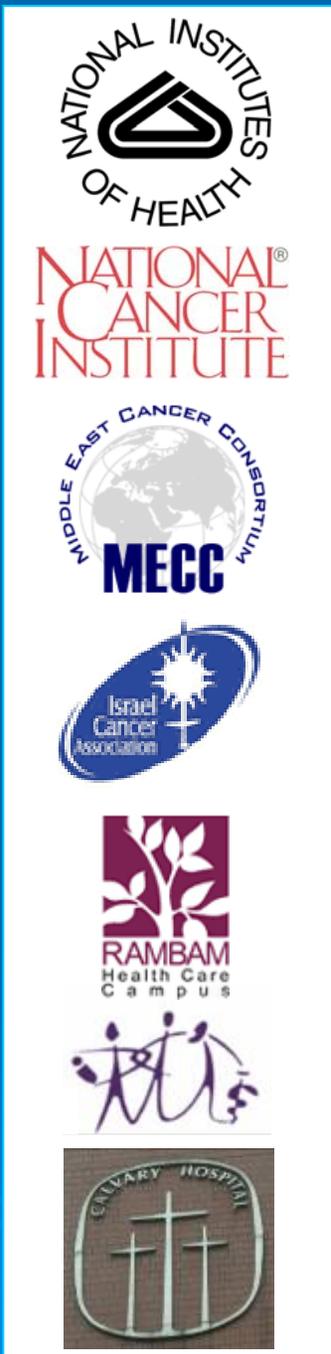
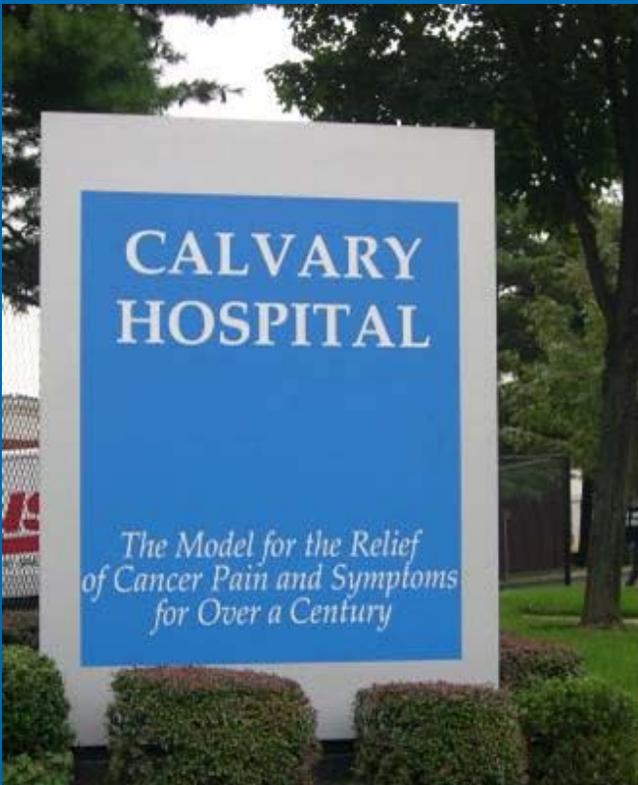
Essentials Of Palliative Care

- Responsive to the needs and preferences of patients.
- Respectful of patients' families, personal values, and beliefs.
- Prime importance of patient-physician relationship with the patient viewed in the context of the family.

"Dying is a very dull, dreary affair. And my advice to you is to have nothing whatever to do with it."

-- **W. Somerset Maugham** (1874 - 1965)





Working In Haifa Home Hospice

- One patient at a time
 - High autonomy
 - 'Cost effective'
 - Personal satisfaction
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- S.J.
- 92 year old male.
- Prostate cancer, bone metastases.
- Married, 5 children (Israel, England, USA, Australia).



Thank You

Principles Of Family Medicine

- Patient-centered medicine
 - Family care
 - Bio-psych-social approach
 - Communication importance
 - Home care
 - Continuity of care
 - Physician autonomy
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- The background of the slide is a solid blue color. In the lower right quadrant, there are several decorative elements consisting of concentric circles, resembling ripples in water. These circles are light blue and vary in size and opacity, creating a subtle pattern.

Family Medicine Residency

- 4 years (48 month):
 - Primary care clinic (9 months)
 - Internal medicine (12 months)
 - Pediatrics (6 months)
 - Psychiatry (3 months)
 - Elective 1 – oncology (3 months)
 - Elective 2 – orthopedics (3 months)
 - Primary care clinic (12 months)

Family Medicine Principles

- The family physician is committed to the person rather than to a particular body of knowledge, group of diseases, or special technique
 - ‘the patient defines the problem’
 - ‘the commitment has no defined end point’

Family Medicine Principles

- The Family Physician seeks to understand the context of the illness
- The Family Physician sees patients at the office, at their homes, and in the hospital.

