



# The Relationship Between Alcohol Use And Burnout

Bradley Tanner, MD, ME

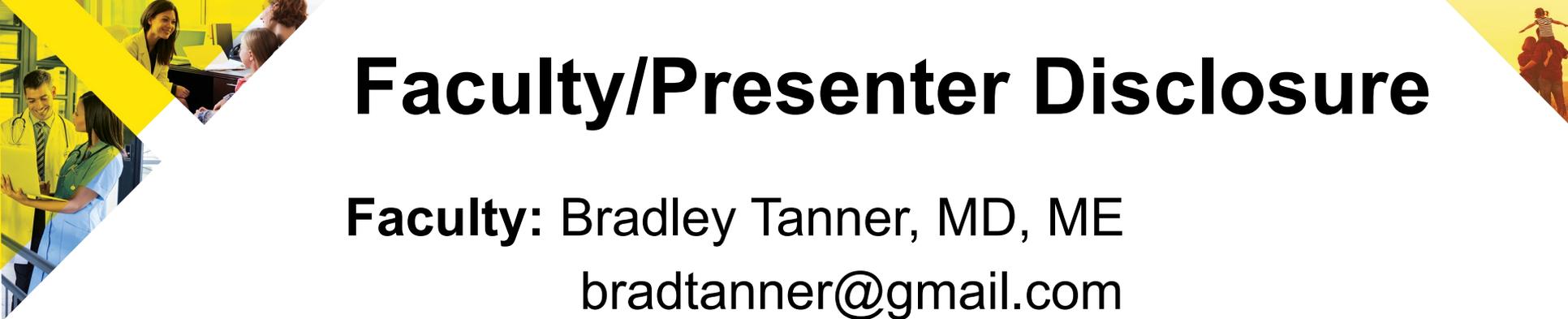
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# Faculty/Presenter Disclosure

**Faculty:** Bradley Tanner, MD, ME  
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**Relationships with commercial interests:**  
Owner and Employee of Clinical Tools, Inc.



# Objectives

- 1) Highlight the relationship of alcohol use and burnout
- 2) Emphasize the need to intervene with medical students
- 3) Discuss potential of simulated stress experience



# 1) The Relationship Of Alcohol Use And Burnout

- 1) Oreskovich MR, Shanafelt T, Dyrbye LN, et al. The prevalence of substance use disorders in American physicians. *Am J Addict.* 2015;24(1):30-38.
- 2) Jackson ER, Shanafelt TD, Hasan O, Satele DV, Dyrbye LN. Burnout and Alcohol Abuse/Dependence Among U.S. Medical Students *Acad Med.* March 2016.  
doi:10.1097/ACM.0000000000001138.





# Oreskovich et al. 2015

- 1) 15.4% of surgeons had a score on the Alcohol Use Disorders Identification Test, version C, consistent with alcohol abuse or dependence.
- 2) Male surgeons 13.9%, Female surgeons 25.6%.
- 3) Emotional exhaustion and depersonalization domains of burnout were strongly associated with alcohol abuse or dependence.



# Jackson et al. 2016

- 1) 32.4% of medical students met diagnostic criteria for alcohol abuse/dependence.
- 2) Students who were burned out ( $P = .01$ ) were more likely to have alcohol abuse/dependence.
- 3) Emotional exhaustion and depersonalization domains of burnout were strongly associated with alcohol abuse/dependence.





# Causation?

- 1) No ability to detect causation either way
- 2) No additional studies of this lethal combination
- 3) But we have common sense on our side. We have plenty of evidence that alcohol is used for stress management and often personal knowledge of others who have turned to alcohol as a solution



# Audience Input

- 1) Share experience with medical students, residents or practicing physicians struggling with alcohol use and burnout.
- 2) What were the predominant symptoms?
- 3) How did you address the problem?
- 4) Success?



## 2) The Need To Intervene With Medical Students

- 1) Burnout and alcohol use must be recognized in early medical training before dangerous coping patterns are established
- 2) Interventions can guide the development of strategies that build resilience to the stresses of clinical practice.
- 3) Students and resident physicians are often reluctant to seek help and express concerns





# Audience Input

- 1) Do you work with medical students?
- 2) How can we prepare them for the stresses of clinical care?
- 3) How do we create an environment supportive of disclosure?



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# Clarifying the Relationship

- 1) Survey students at the onset of training for burnout and alcohol use
- 2) Follow alcohol use and depersonalization, emotional exhaustion scores throughout their studies
- 3) Build a “medical student stress app” for them to track symptoms.





# 3) The Potential Of Simulated Stress Experience

- 1) NIH/NIAAA #1 R43 AA026474-01. *BurntOut: Role-Play Simulation for Building Medical Student Resiliency*
- 2) Prepare students for the personal health challenges of medicine, guide them toward coping strategies, and improve resilience.
- 3) Design, create, and evaluate a novel role-playing experience addressing the risk of alcohol use and burnout in medical students



# The Simulation Experience

- ✓ Complete 5-8 simulation scenario experiences on the Oculus Go™ Headset VR platform lasting approximately 5 minutes.



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# Navigate scenarios to interact with patients, administrators, peers, and friends



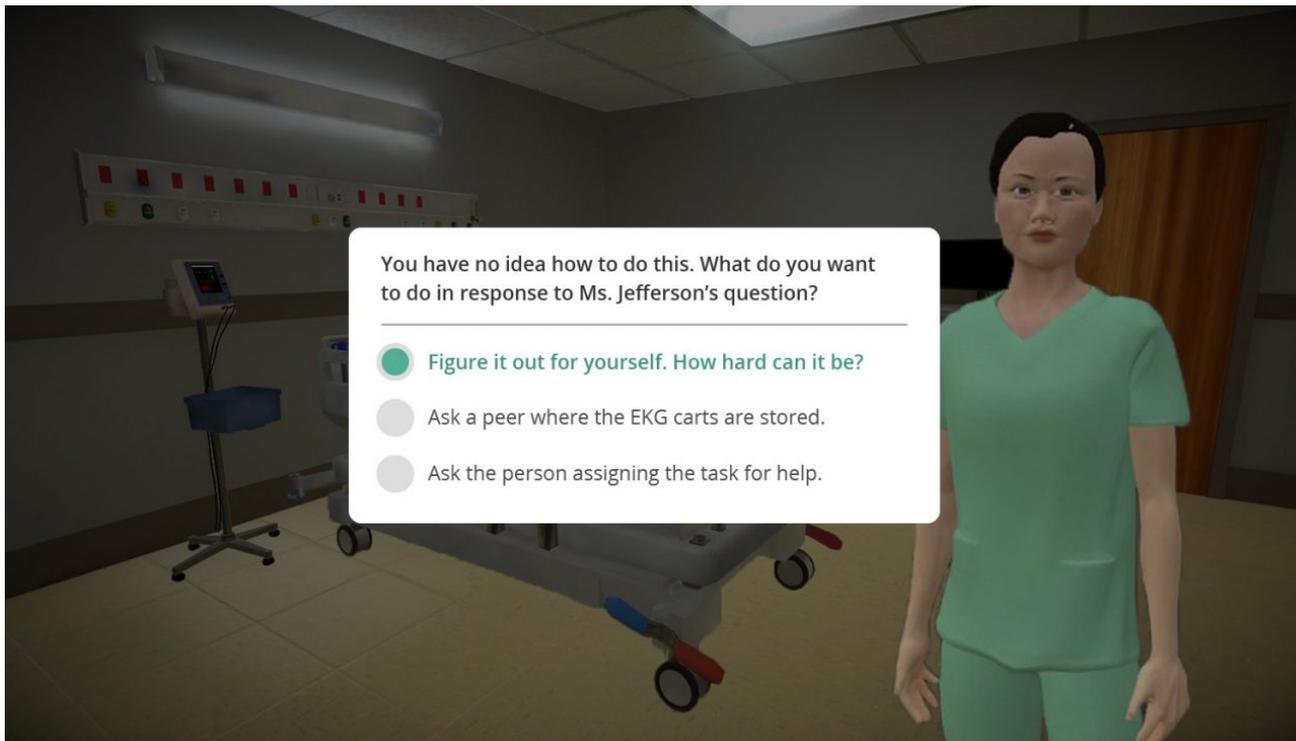
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# Make decisions on how to best address challenges and avoid burnout





# Learn techniques to avoid and overcome burnout



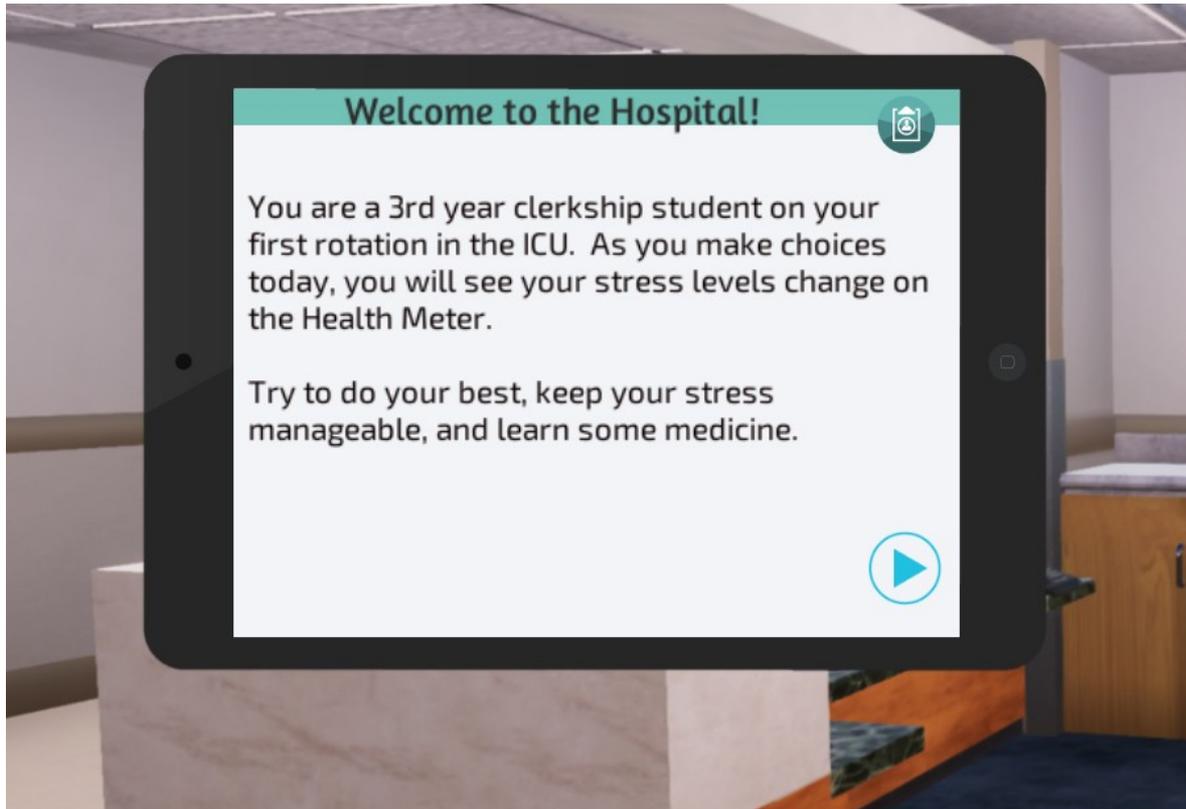


# The Simulation Experience

- 1) In the scenario, users build confidence in implementing real-world change in situations similar to their own challenges.
- 2) After each scenario, a debriefing summarizing negative and positive outcomes associated with those choices and add potential adaptations they might make to an expanding list of potential goals and actions.



<https://healthimpactstudio.itch.io/burntout>



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# Audience Input

- 1) Is there value in preparatory guidance?
- 2) Can a simulation actually build skills or resiliency?
- 3) How critical is an immersive experience vs. a standard 2D experience?
- 4) What topics should be included?
- 5) What are the stressors to target?



# Thanks!

- 1) Currently Evaluating Phase I Pilot
- 2) Consultants and Academic Partners Welcome!