

BACKGROUND

- Stress in medical education and its impact on resident well-being is well documented, and has been documented in pediatric trainees.
- Although 2012 ACGME guidelines require residencies provide curricula to enhance physician wellness and well-being as well as mindfulness and empathy in the doctor-patient encounter, few programs have been developed to address this critical training.
- The Pediatric Integrative Medicine in Residency (PIMR) program through the University of Arizona Center for Integrative Medicine introduces an integrative medicine framework to address and evaluate resident health and wellness in its national pilot program.

PEDIATRIC INTEGRATIVE MEDICINE IN RESIDENCY (PIMR)



METHODS

- First year pediatric residents (n=174) from 5 residencies participating in the PIMR program completed standardized wellbeing measures at the start of residency.
- Residents were from 3 classes:
 - 2015 n=15
 - 2016 n=98
 - 2017 n=61
- Physician wellness activities to complement the IM curriculum and address physician burnout are in place at the residencies.

SAMPLE

- Female n=129; 75.4%
- Average Age 27.8 years, range 22-39 years
- Single n=87; 48.5%
- Children n=21; 12.3%
- White* n=105; 67.7%
- Hispanic* n=10; 6.4%
- Required IM/CAM coursework in medical school* – Yes n=67; 43.8%
- IM/CAM electives in medical school* – Yes n=50; 32.7%
- Personal Use of IM/CAM therapies/IM/CAM providers* – Yes n=83; 54.2%

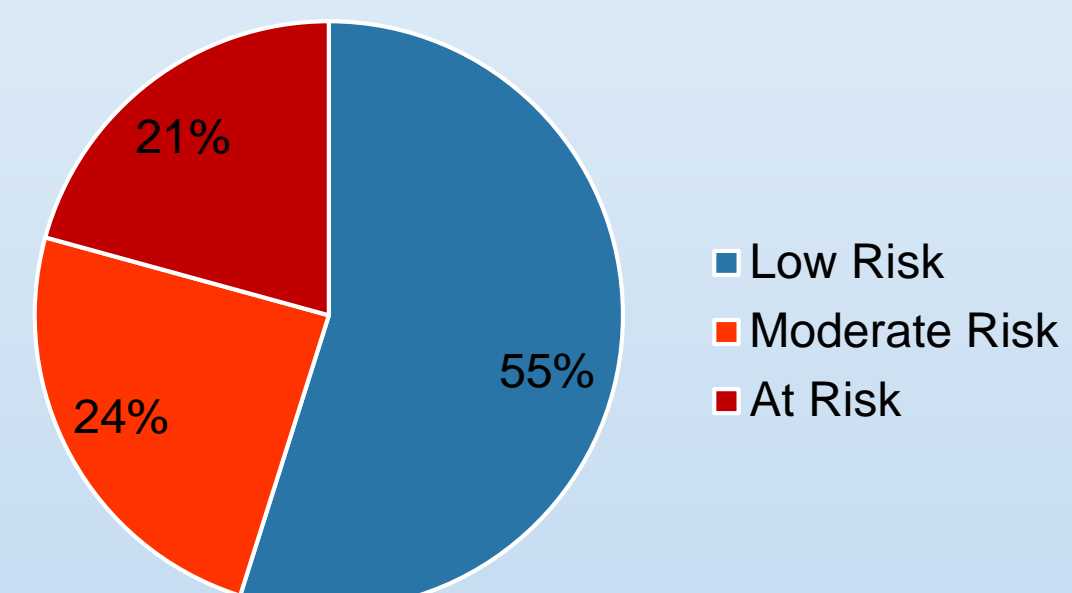
*not available for 2015 class

MEASURES

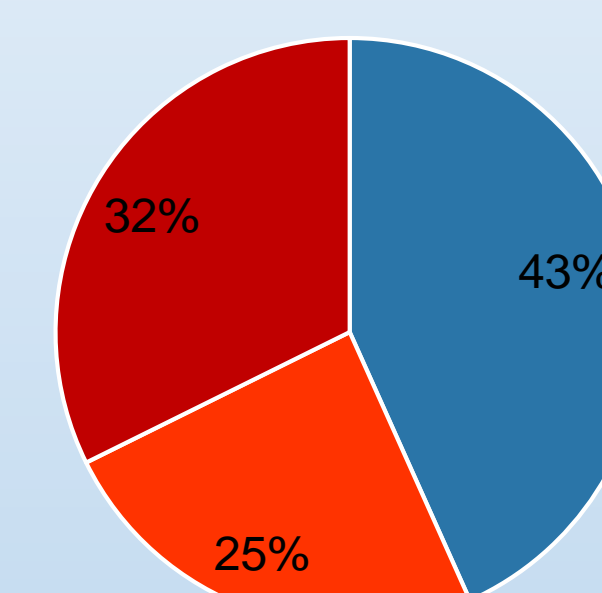
Dimension	Measure
Burnout	Maslach Burnout Inventory (MBI; Maslach et al. 1996) - Emotional Exhaustion (EE) - Depersonalization (DP)
Psychological health Perceived stress Mood state distress	Perceived Stress Scale (PSS; Cohen et al., 1983) Center for Epidemiological Studies - Depression (CES-D; Radloff, 1977)
Global life satisfaction/	Satisfaction with Life Scale (SWLS; Diener, 1985)
Affective traits	Positive & Negative Affect Schedule (PANAS; Watson, 1988)
Personal characteristics Mindfulness Empathy Emotional intelligence	Freiburg Mindfulness Inventory (FMI; Walach et al., 2006) Jefferson Scale of Physician Empathy (JES; Hojat et al., 2001) Interpersonal Reactivity Index (IRI; Davis, 1980) - Empathic Concern (IRI EC) - Perspective Taking (IRI PT) - Personal Distress (IRI PD)

RESULTS – BURNOUT & DEPRESSION

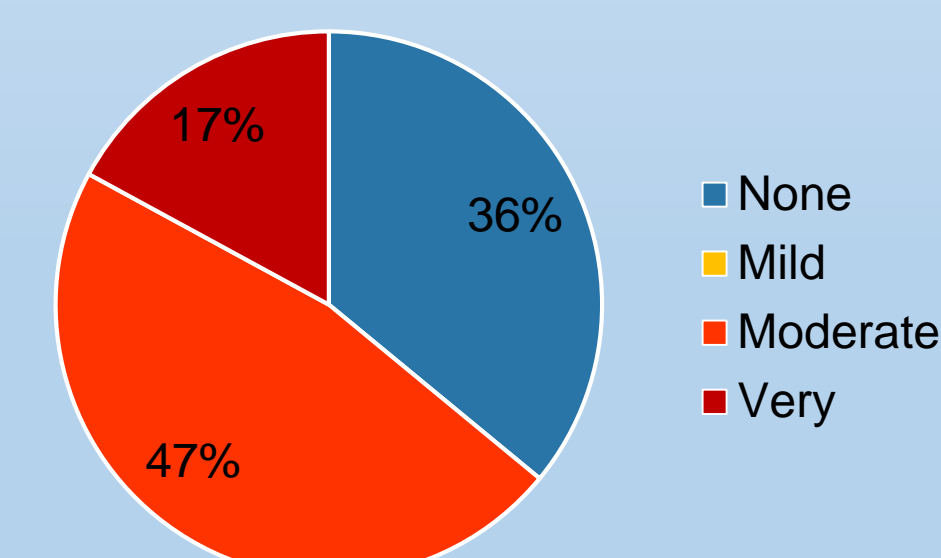
Emotional Exhaustion



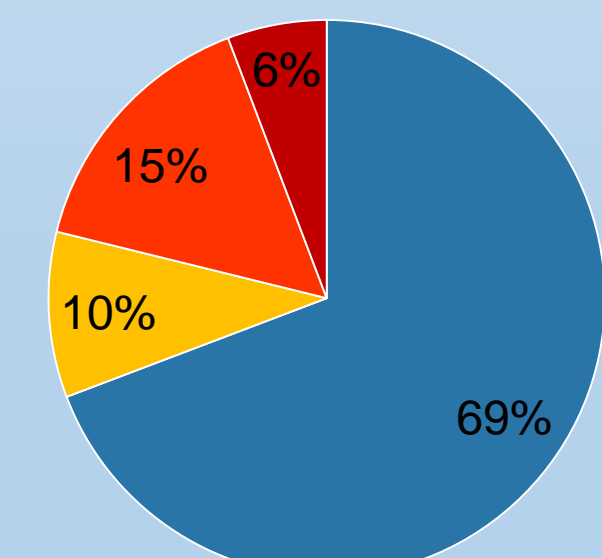
Depersonalization



Burnout Risk Level*



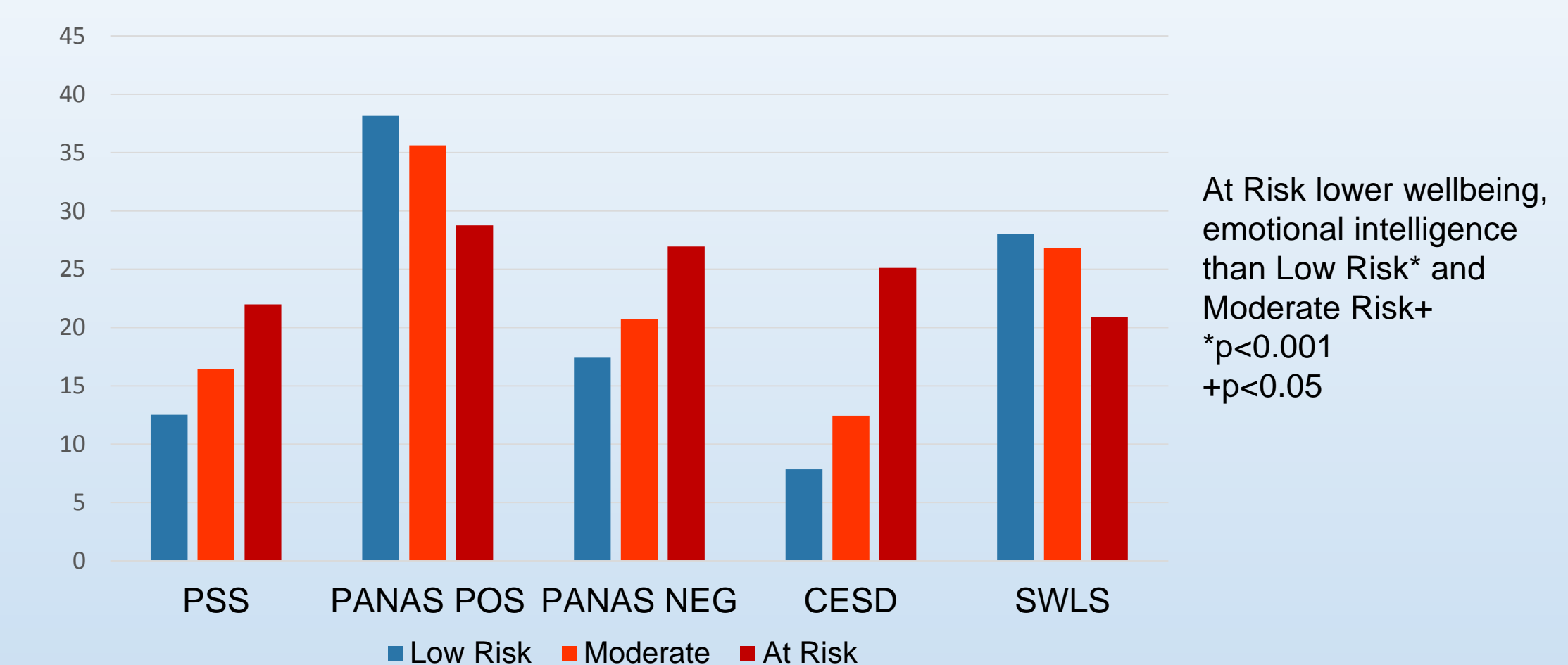
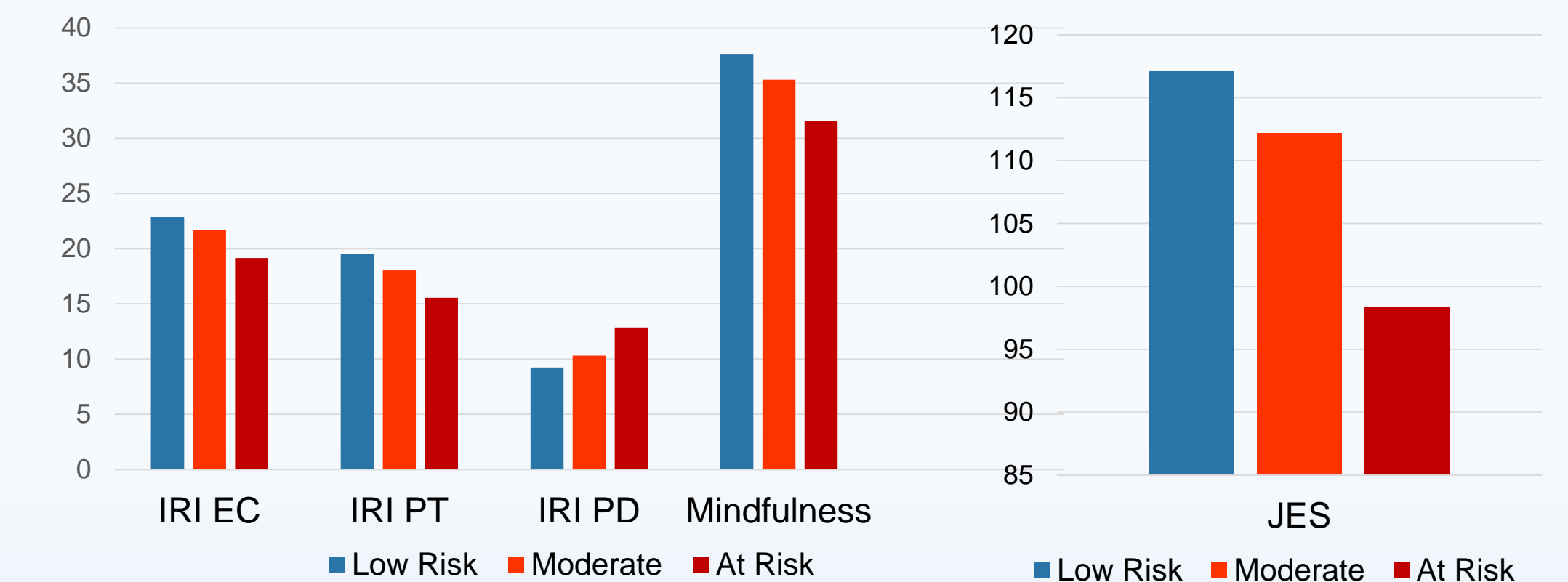
Depression



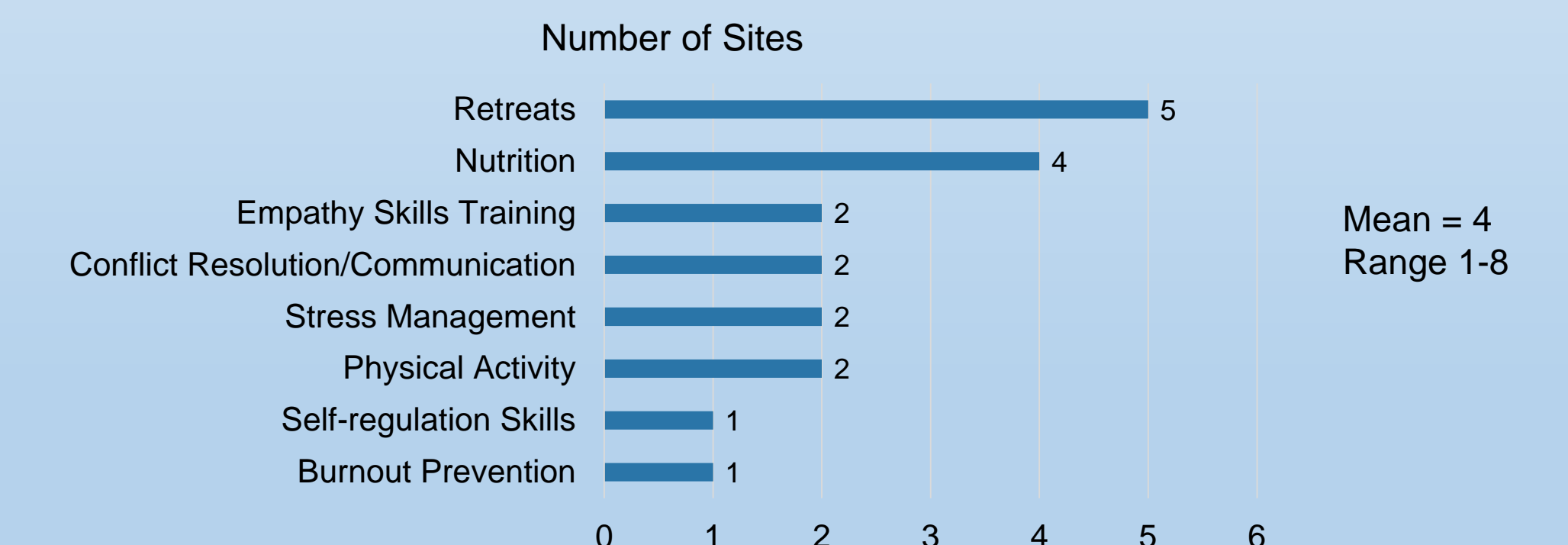
*Burnout risk levels are determined by risk categories on both the emotional exhaustion and depersonalization scales.

- Low risk = scoring in the low category on both scales
- At risk = scoring in the high category on both scales
- Moderate risk = the remaining category distributions combinations

RESULTS – IMPACT OF BURNOUT RISK LEVEL P<0.005



RESULTS – SITE WELLNESS ACTIVITIES



CONCLUSIONS

- Results indicate that a substantial proportion of residents are beginning residency with significant levels of burnout and depression: 21% are in the high emotional exhaustion range; 34% in the high depersonalization range; 17% are in the high risk range for both emotional exhaustion and depersonalization.
- Burnout risk level significantly impacts resident wellbeing, emotional intelligence, and empathy. Residents in the at risk burnout group had lower wellbeing, emotional intelligence, and empathy than residents in the low and moderate risk groups.
- The implementation of physician wellness activities is designed to both treat existing and ameliorate or reduce the effects of ongoing stress.