Burn Out among Anaesthesiologists during COVID-19 and Resilience in this New Normal

Karuna Sharma¹, Savita Choudhary^{2*} and Sunanda Gupta³

¹Assistant Professor, Department of Anaesthesiology, Geetanjali Medical College and Hospital, Udaipur, Rajasthan, India ²Professor, Department of Anaesthesiology, Geetanjali Medical College and Hospital, Udaipur, Rajasthan, India ³Professor and Head, Department of Anaesthesiology, Geetanjali Medical College and Hospital, Udaipur, Rajasthan, India

*Corresponding Author: Savita Choudhary, Professor, Department of Anaesthesiology, Geetanjali Medical College and Hospital, Udaipur, Rajasthan, India.

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The unprecedented health system crisis following COVID-19 pandemic is a pertinent concern for all, especially when it comes to medical personnel, it has different facets. The risk of contracting contagious disease and transmission to family members along with the stress associated with workload and demands of the system. COVID-19 pandemic has proved as a double edged sword to the anaesthesiologist; from being in spotlight as frontline warrior with professional recognition and satisfaction while dealing high risk of viral infection as frontline warriors in ICUs and operation theaters during emergency surgeries and jeopardizing own mental health while working in a system which is ever-changing, challenging and new to everyone.

Burnout is the term used in any field, to describe chronic psychological and physical stress related to their work. Burnout in anaesthesia is real and 25% of anesthesiologists are at high risk of developing it [1]. It is the topic of discussion in anaesthesia in recent years. World Federation of Societies of Anaesthesiologists (WSFA) highlighted the importance of occupational wellbeing to anaesthesiologist and has adopted it as the theme of World Anaesthesia day 2020. Anaesthesiologists face excessive ranges of occupational burnout, chemical dependency and psychological despair. Dr Adrian W Gelb, President of the WSFA, has posted a video message on the event of World Anaesthesia Day 2020, in which he has addressed the issue of "Occupational wellbeing of anaesthesiologists" [2].

COVID-19 pandemic has brought a recent surge in burnout among anaesthesiologist and other healthcare workers; anaesthesiologists being affected the most while accomplishing the role of health care provider in critically ill patients and airway manager in an unfamiliar and resource strained environment. It has emerged as a new cause of anxiety, depression, and worsening of existing mental issues [3]. Various causes have been identified for this recent surge, but the most important is getting exposed to deadly viral infection and its sequelae. Others, are fear of exposing the family members to the infection and hesitation in going home after duties, emotional breakdown after social disconnect, psychological breakdown of mothers of young children associated with separation and workplace problem related to long hours of physical discomfort due to Personal Protection Equipment (PPE) kit [4].

Resilience is the ability to resist disruption and overcome the fallout of the distressing event, to maintain normal functioning. Resilience can be an innate trait of an individual depending upon their physical and psychological characteristics or else it can be achieved with practicing self-care and improving support system; socially as well as at workplace [5].

Few of the measures of self-care are maintaining good hygiene, good sleep, healthy diet, endulging in sport or hobbies and practicing mindfulness and meditation.

Social and workplace related issues can be sorted out by providing positive workplace culture which includes opportunities for staff professional development, flexibility to facilitate family-work balance and ensuring that physicians feel valued and heard along with providing autonomy and control, whenever appropriate [5].

As COVID-19 is not going to end soon, so various plans and strategies have to be implemented to minimize burnout in healthcare workers which includes educational programs on burnout and stress management skills in the training of anesthesiologists. Institutional strategies such as properly equipped and safe work environment, proper distribution of workload and implementation of work breaks and time for recreation should be ensured.

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