## Physician stress, Medical errors and Remedies: Commentary/Opinion.

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## 1. Background:

Orthopaedic surgeons face very high levels of physical and psychological stress<sup>1</sup>. This is not to say that other specialities do not have a similar problem facing their residents and consultants. This can lead to burnout among the practising consultants and residents alike<sup>2</sup>. There are many contributing risk factors including critical patients, lengthy work hours, sleep deprivation, neglect of family & personal life<sup>3</sup>. This is even more stark among residents and younger consul-Burnout as a syndrome is identified as emotional exhaustion, depersonalization and a reduced sense of personal accomplishment<sup>4</sup>. Why it is of concern, is because it leads to negative outcomes for the doctors including physical and emotional illness, drug abuse, decreased doctor satisfaction 5,6&7.

Needless to say, our focus should be on the modifiable risk factors. And among these partially avoidable or modifiable risk factors are medical/surgical errors and patient complications<sup>8</sup>. Despite efforts to maintain the highest levels of skills & care with the best experience & expertise, it is inevitable that the surgeons will face medical/surgical errors and patients' complications in their career<sup>9</sup>. Learning how to minimise & manage these situations is critical<sup>10</sup>.

This demands a multi-pronged approach. First, and foremost is the patient-surgeon relationship. This is the keystone. Patient rapport is critical as it builds up trust in the surgeon and makes the patient accept that the surgeon is acting with his best interests in mind and that complications if any were despite these best efforts.

Secondly, in the preoperative stage, the patient needs to be explained and informed of the disease, the operative procedure and possible complications. This enables the patient to have a realistic understanding of the surgery. This may be easier said than done, especially in the developing world, where literacy rates vary wildly from 27% to 95%.

Thirdly, in case of complications, an expert consult with another surgeon not only helps the treating team but also helps build up confidence of the patient and his relatives. Fear of asking for help, is a dis-service to himself, that the surgeon is prone to make very often. Often an interdepartmental collaborative approach can help in managing and dealing with complex cases from which the surgeons should not shy away.

Fourthly, several patient safety guidelines to assist institutions and healthcare practitioners in creating a safer environment for patients were introduced by several national safety commissions in various countries<sup>11</sup>. Following these protocols may be mundane but go a long way to ensure calamitous errors do not occur.

Last but not the least, proper detailed docu-

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mentation, robust medical notes and comprehensive consent forms go a long way to reduce possible legal complications & burden..

Medical and surgical errors may be inevitable under most circumstances, but the burden and responsibility on the treating surgeon is irrationally higher. Basic and simple strategies when incorporated into patient management plans can help prevent many of these complications and help face them when these do occur.

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