

## DISRUPTIVE PHYSICIAN BEHAVIOR

THE LEGACY OF HARD WORK, LONG HOURS,  
AND EXCEPTIONALLY HIGH EXPECTATIONS

## STRESS

- “Stress can kill” ....
  - Stress contributes to 90% of all diseases.
    - Heart attacks
    - Diabetes
    - Certain cancers
    - Exacerbates osteoporosis, arthritis and allergies
  - Half of all visits to doctors are “stress-related”.
  - Stress puts the body in a constant state of high alert.
  - Inflammation ^ response to nonthreatening allergens while reducing our ability to heal wounds.

## STRESS

- A normal part of daily living.
- Transaction between you and your environment.
- Can also be prolonged drains on mental and/or physical energy (DISTRESS)
- A normal element in a physician’s life and work.

## STRESS

- Doctors fall into the greatest risk category for problems with drug abuse, alcoholism, and suicide due to stress.
- Stress addiction is common among this group of professionals who get a “high” from controlling outcomes, people, and by having to make complex decisions impacting clients’/patients’ lives.

## CHARACTERISTICS OF DESTRUCTIVE STRESS

- Over-engagement.
- Emotions become over-reactive.
- Physical energy depletion.
- Dis-integration.
- Loss of fuel and energy.
- An increased sense of urgency and hyperactivity.
- Presence of panic, phobic, and anxiety-type disorders.
- Affects physiology by invading and weakening immune systems/physical damage is primary.

## CAUSES of DISRUPTIVE BEHAVIOR

- Emotional and physical exhaustion experienced as a result of excessive work related stress.
- Adjustment to employment.
- Inability to process and manage stressors.
- Personality disorders.
- Alcohol/drug abuse or addiction.
- Unmanageable personal situations.
- Rapid changes in health care delivery systems.
- Feeling “stuck” in medicine.

### characteristics of disruptive behavior

- Defense characterized by disengagement.
- Appearance of anxiety and depression.
- Blunted emotions/Emotional damage.
- Cynical attitudes.
- Suspicious outlook.
- Excessive use of alcohol and/or other drugs.
- Appearance of overconfidence.
- Chronically feeling physically sick.
- A sense of helplessness and hopelessness.

### ALERT!!

- 8-12% of health professionals develop a substance related disorder at some point in their careers (West J. Med. 2001:174:50-4).
- Addiction is often shielded by the "code of silence" among practitioners.
- Physicians seem to avoid confronting colleagues in an effort to protect them from licensure action, shame, or social stigmatization.

### more characteristics of disruptive behavior

- Fatigue
- Exhaustion
- Irritability
- Inability to concentrate
- Insomnia
- Depression
- Anxiety
- Loss of interest in one's work or personal life

### MOST COMMON CONFLICTS

- Physician to physician
  - Abusive language
  - Blaming or bullying
  - Threats of violence, retribution or litigation
- Acting out with staff.
  - Intimidation
  - Abusive language
  - Sarcasm, cynicism
  - Demeaning, insulting
  - Sexual comments, jokes, innuendos
  - Lack of regard for boundaries

### CAUSES OF BURNOUT

- Lack of self care.
- Denial of distress.
- Detachment from what is really going on inside.
- Societal expectations.
- Lack of perceived control.
- Excessive work load.
- Sleep deprivation.
- Aging population.
- Lack of recognition.
- Conflict within the profession.

### COMMON CONFLICTS

- Inappropriate responses to patient needs
  - Defiant, rigid, inflexible positioning
  - Avoidant, unreliable
  - Late or unsuitable replies to pages
  - Arrogance
  - Unprofessional demeanor
  - Inadequate communication in quality, quantity and promptness

## POTENTIAL CONSEQUENCES

- Medical staff bylaws actually operationalized.
- Sanctions by medical executive committee.
  - Partial loss of privileges
  - Temporary suspension of privileges
  - Revocation of privileges
- Contracts between physician and medical staff.
- Sanctions by employer.
  - Leave of absence
  - Contract non-renewal
  - Report to medical licensing board
  - Referral to state Physician Health Program

## The Antidote

- 4. Support physician by offering to pay for counseling.
- 5. Encourage wellness among physicians.
- 6. Promote communication, connectedness with physicians.
- 7. Create a supportive, understanding environment.

## The Antidote



## Antidote

- 8. Set and maintain healthy boundaries with all disruptive behaviors.
- 9. Put mechanisms in place to alleviate pressure.
- 10. Celebrate physician success.

## The Antidote

- 1. Intervention
- 2. Assessment
- 3. Treatment
  - Focused education
    - Anger management
    - Conflict resolution
    - Counseling
    - Impulse control training

## Antidote

And finally.....

- **RECOGNIZE.....DON'T BLAME!**



Docs are human too!

