

HCW Levels of Stress and Burn Out during the Pandemic

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Stress

Characterized by over-engagement

Emotions are overactive

Produces urgency and hyperactivity

Loss of energy

Leads to anxiety disorders

Primary damage is physical

VS

Burnout

Characterized by disengagement

Emotions are blunted

Produces helplessness and hopelessness

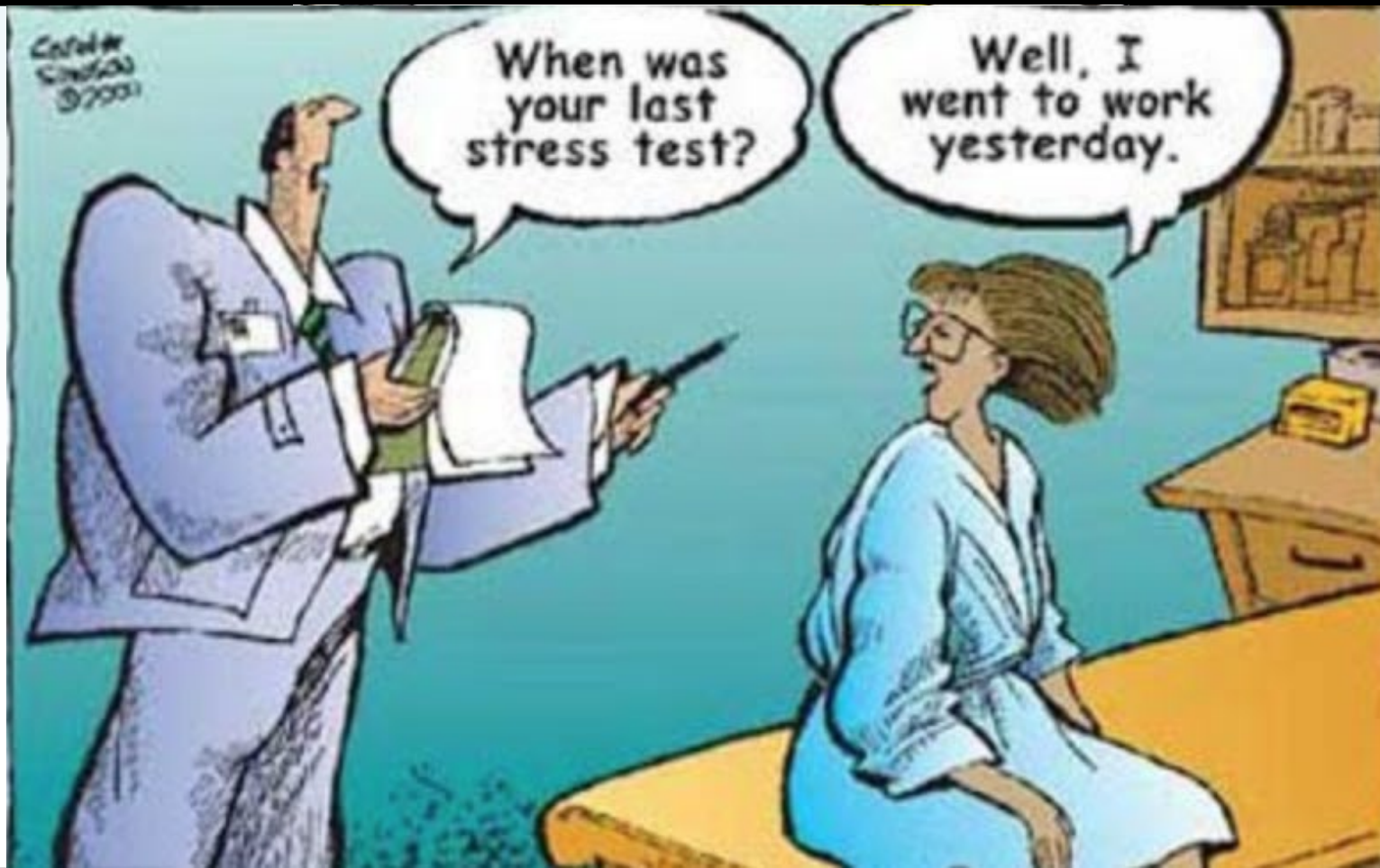
Loss of motivation

Leads to depression

Primary damage is emotional

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Systematic review and meta-analysis of 65 global studies on HCW mental health during COVID-19

- Data on the prevalence of moderate depression, anxiety and PTSD was pooled across 65 studies involving 97,333 health care workers across 21 countries.
- The systematic review found high prevalence estimates of moderate depression (21.7%), anxiety (22.1%) and PTSD (21.5%) among health care workers during the COVID-19 pandemic



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Mental health issues continue even after pandemic surges subside

- Researchers in China found that nurses and women in particular suffered psychological burdens after the pandemic.
- A survey of more than 1,800 nurses and doctors who treated COVID-19 patients in China, 71% reported “distress”, 50% described depression, 44% suffered anxiety and 34% had insomnia



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Existing studies of stress and burn out in the USA

Most focus on Doctors and nurses, not other health care providers



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Emergency Room Physician Survey 2020

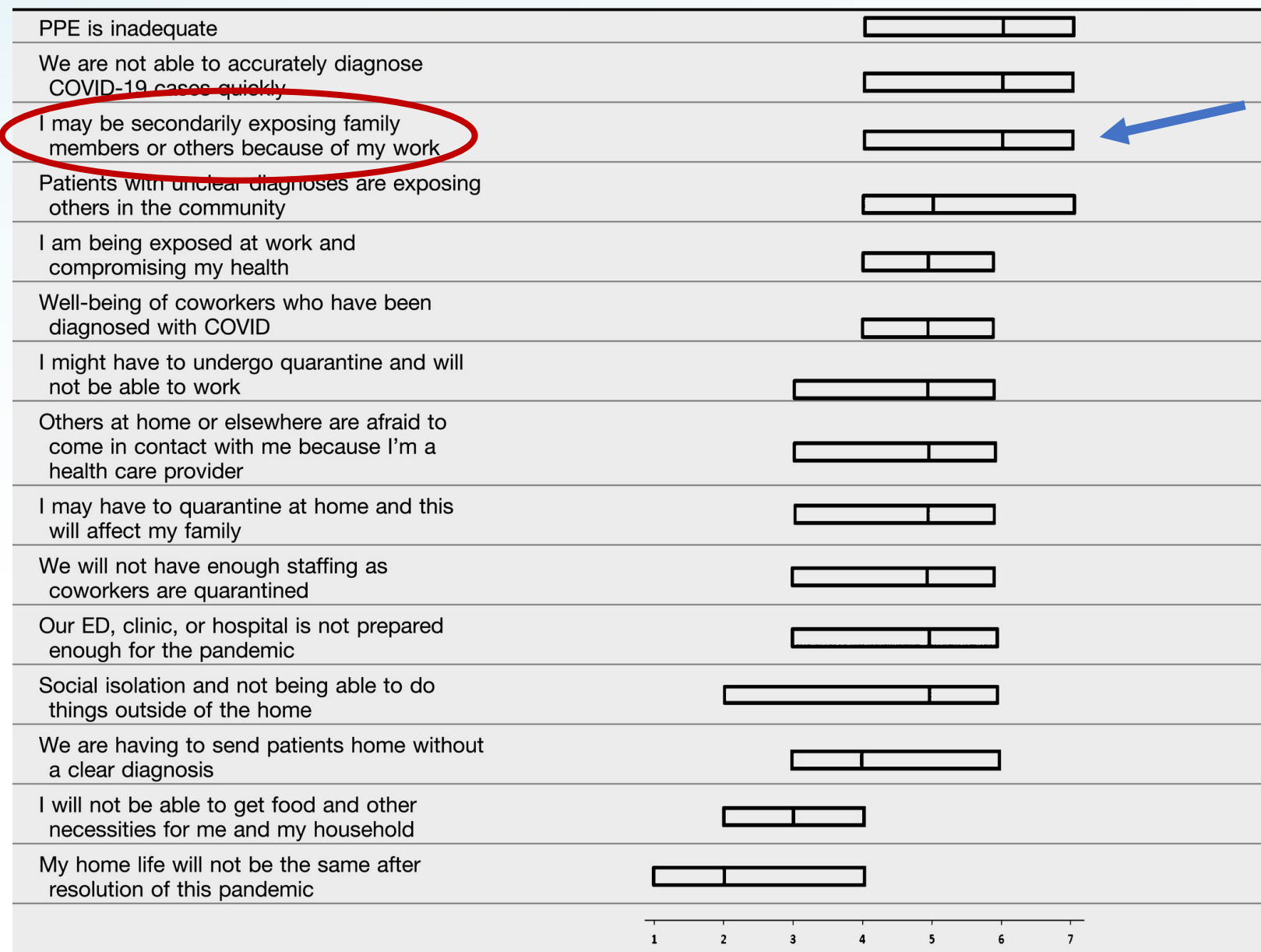
A survey of 426 EM physicians

- On a scale of 1 to 7 (**1 = not at all, 4 = somewhat, and 7 = extremely**),
 - Effect of the pandemic on work and home stress levels **was 5**
 - Emotional exhaustion/burnout
 - increased from a pre-pandemic median level of 3
 - to since the pandemic started a median of 4
- **Notably:**
 - **Most physicians (90.8%) reported changing their behavior toward family and friends, especially by decreasing signs of affection (76.8%).**



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EM doctors' concerns Causing them stress On 7-point scale





Risk of infection to families: a constant source of worry for HCW

- *Under normal circumstances*, HCWs usually have access to adequate personal protective equipment (PPE) to properly protect themselves from infection.
- **The nationwide shortage of PPE has put HCWs at an even greater risk of acquiring COVID-19.**
- Persons infected with COVID-19 on the job can be asymptomatic and infectious and place their families and those they routinely interact with at risk.
- And on the other hand , family members of HCWs can place HCW at risk to spreading the virus to the patients they care for.



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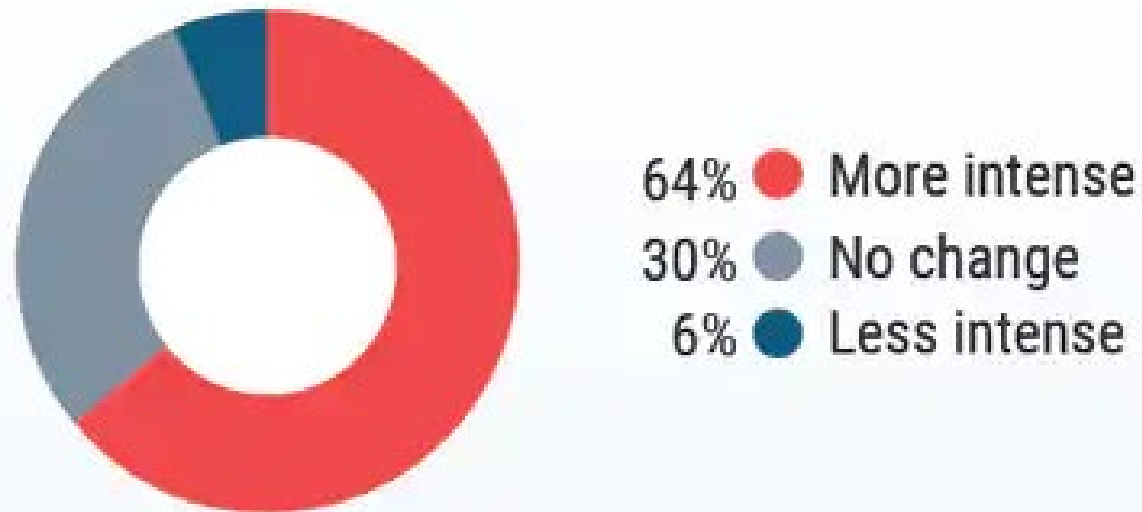


Medscape US and International Physicians' COVID-19 Experience Report: Risk, Burnout, Loneliness



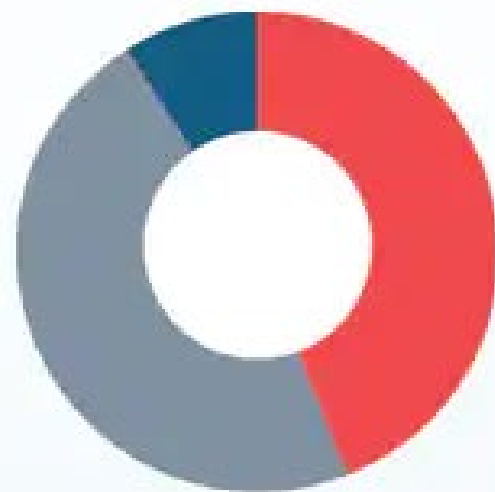
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US Physicians: Has Your Burnout Increased Since COVID-19?



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Are Your Relationships at Home Better or Worse?



44% ● More stressed

47% ● No change

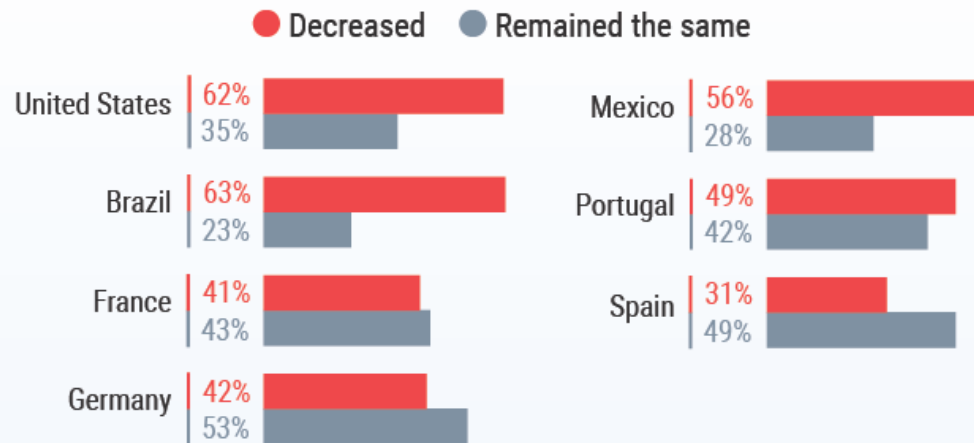
9% ● Less stressed



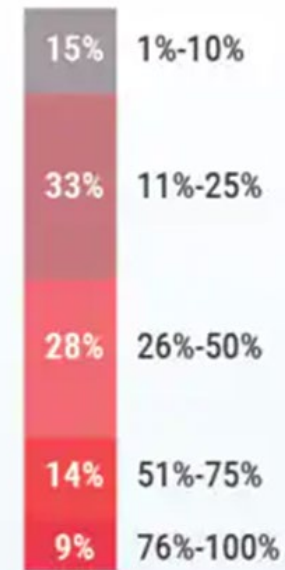
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Has Your Income Changed Since the Start of the COVID-19 Pandemic?



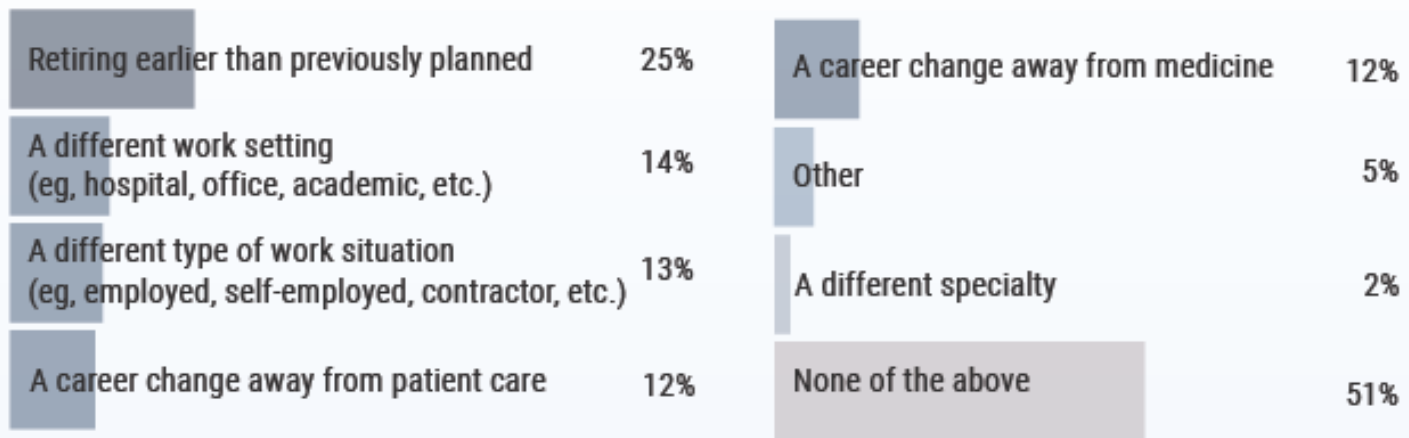
US Physicians: How Much Has Your Income Decreased?




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Are You Considering a Career Change Owing to Your Experiences With Treating COVID-19?





2020 American Physicians Survey speaks further to the economic impact of COVID-19

- 72% of physicians have experienced a reduction in income due to COVID-19.
 - Of these, 55% have experienced income losses of 26% or more.
- 8% of physicians have closed their practices as a result of COVID-19 as per summer 2020
- In terms of reduced volume of patients
 - 37% of physicians saw volume decreases in their practices of 25% or less.
 - 41% saw volume decreases of 26% or more, which may be difficult or impossible for most physician practices to sustain for more than a few months
- 43% of physicians have reduced staff due to COVID-19.
- 59% of physicians agreed that COVID-19 will lead to a reduction in the number of independent physician practices in their communities.



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“In what ways will COVID-19 have long lasting effects on how health care is organized and delivered in your community?” (Please check all that apply)

	2020
There will be significantly fewer independent physician practices after the pandemic ends	59%
Hospitals will exert stronger influence over the organization and delivery of healthcare	50%
There will be a rise in more serious health conditions because patients delayed getting care due to the lockdown	72%
Use of telehealth will become much more widespread	85%
COVID-19 will have no long-lasting effects on my community	6%



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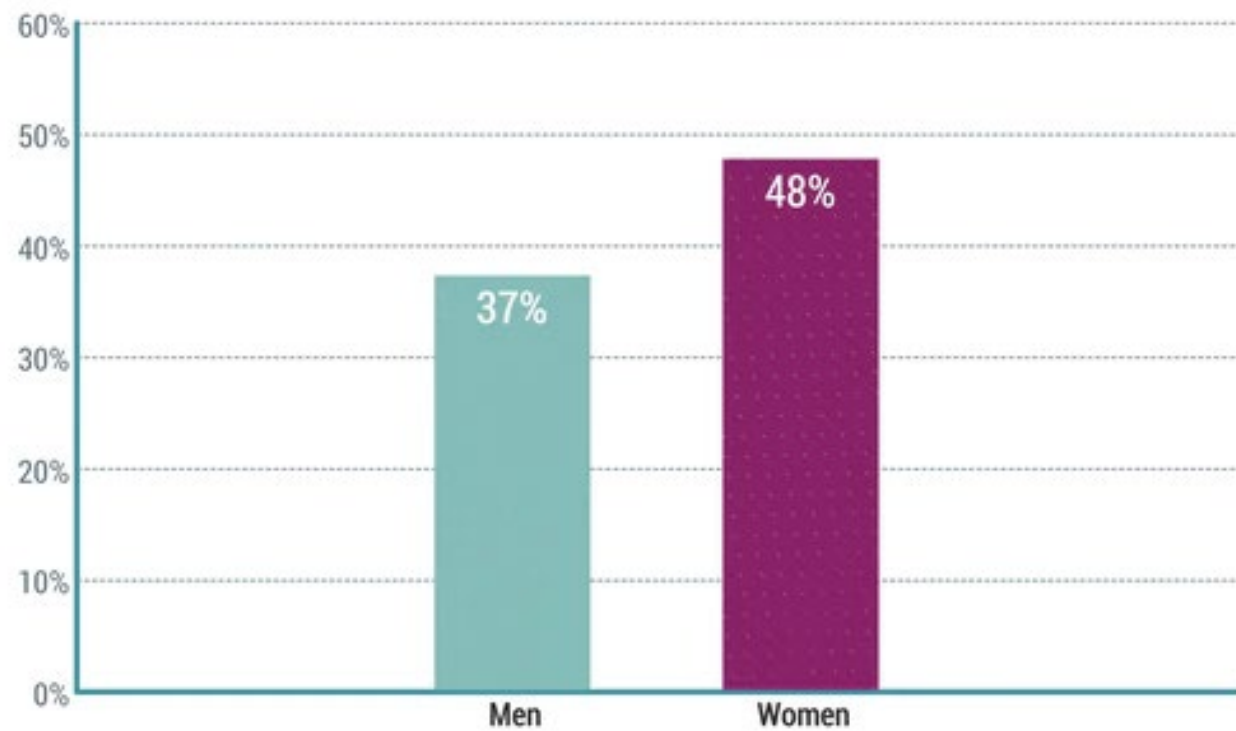
Medscape National Physician Burnout & Suicide Report 2020: The Generational Divide



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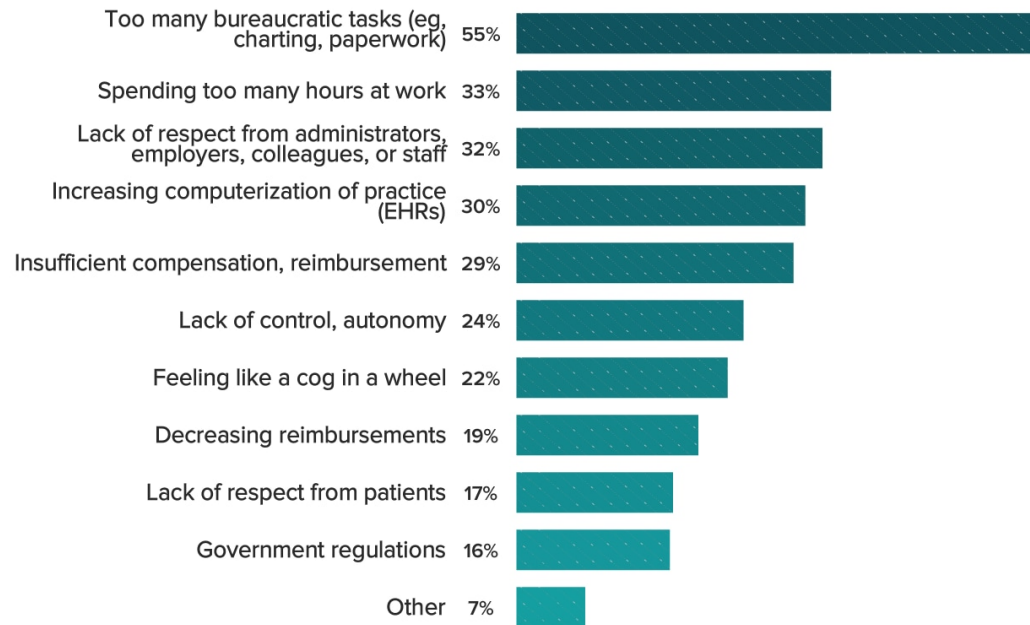
Are More Women or Men Physicians Burned Out?



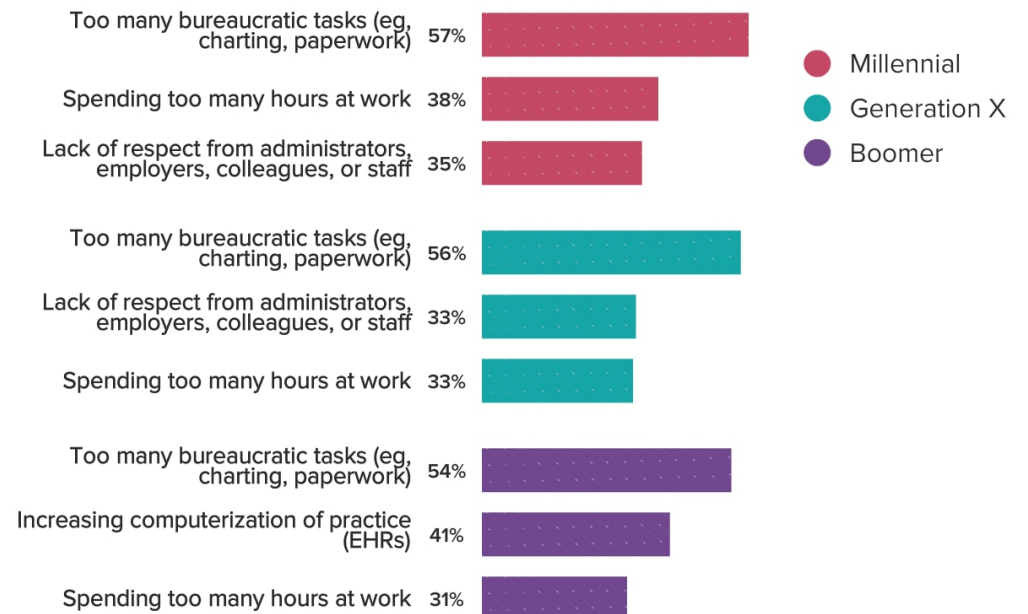
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What contributes to burnout

What Contributes Most to Burnout?



Top Three Contributors to Burnout (By Generation)



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Nursing surveys: International Council of Nurses COVID-19 Update

- In the early phase of the pandemic in China, about half of the nurses reported moderate and high work burnout, as shown in emotional exhaustion and depersonalization
- In Spain, 80% of nurses reported symptoms of anxiety and increasing burnout.
- In Brazil, the prevalence of anxiety among nursing professionals was close to 50% and of depression it was 25%.
- In a national survey among health workers in Australia, more than half reported burnout and 28% reported depression
- The Japanese Nursing Association stated that about 15% of hospitals across Japan had nurses quit their jobs, and some 20% of nurses reported they had experienced discrimination or prejudice amid the spread of the virus.



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USA Nursing survey

- In a survey in August 2020 by the American Nurses Association , over half of the nurses asked felt overwhelmed and 60% reported difficulty in sleeping
- 93% were experiencing stress and 76% reported exhaustion and burnout.



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