Abstract

Background. The long-term consequences of stress on the surgeon are unknown. One manifestation of stress is burnout. The purpose of this study was to measure the prevalence of burnout in actively practicing American surgeons. Methods. The Maslach Burnout Inventory and a questionnaire of our own design were sent to 1706 graduates of various University of Michigan surgical residencies (1222) and members of the Midwest Surgical Association (484). The response rate was 44%. Responses from 582 actively practicing surgeons were the sample used for analysis. Results. Thirty-two percent of actively practicing surgeons showed high levels of emotional exhaustion, 13% showed high levels of depersonalization, and 4% showed evidence for low personal accomplishment. Younger surgeons were more susceptible to burnout ($r = -0.28, P < .01$). Burnout was not related to caseload, practice setting, or percent of patients insured by a health maintenance organization. Important etiologic factors were a sense that work was overwhelming ($r = 0.61, P < .01$), a perceived lack of autonomy ($r = -0.41, P < .01$), and the expectation of more job-related stress than one's colleagues ($r = -0.27, P < .01$).
factors were a sense that work was "overwhelming" ($r = 0.61, P < .01$), a perceived imbalance between career, family, and personal growth ($r = -0.56, P < .01$), perceptions that career was unrewarding ($r = -0.42, P < .01$), and lack of autonomy or decision involvement ($r = -0.39, P < .01$). A strong association was noted between burnout elements and a desire to retire early ($r = 0.50, P < .01$). **Conclusions.** Burnout is an important problem for actively practicing American surgeons. These data could be used to modify existing surgical training curricula or as an aid to surgical leadership when negotiating about the surgical work environment. (Surgery 2001;130:696-705.)

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