

Can stress really kill you?

How to recognize signs of stress and why you should care



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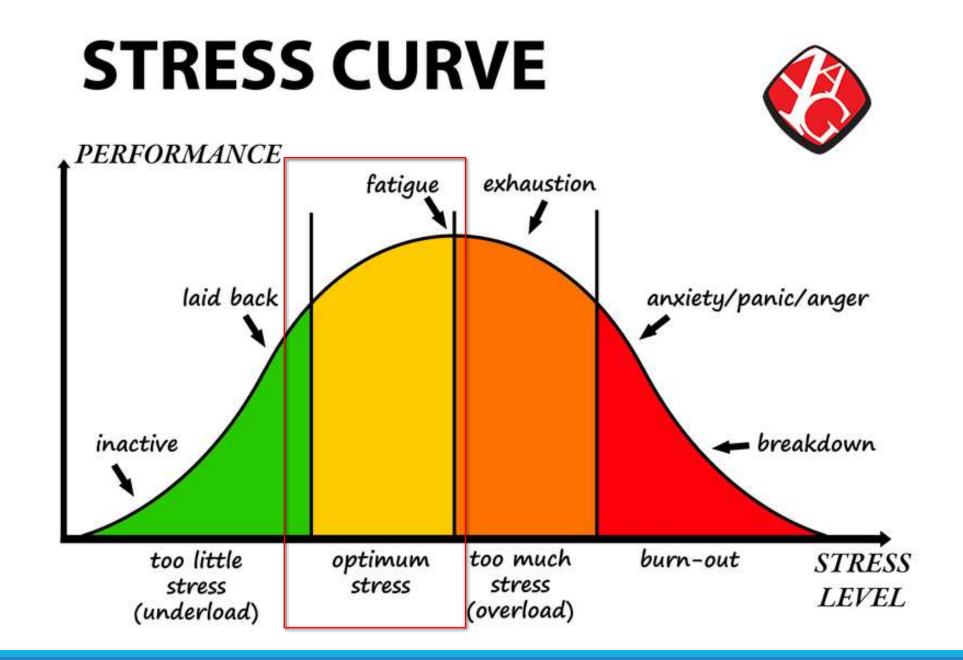


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Disclosures

- This presentation is an initiative from the Canadian Medical Association (CMA)
 - It has been prepared by Catherine Laurin and opinions expressed do not necessarily represent those of the CMA

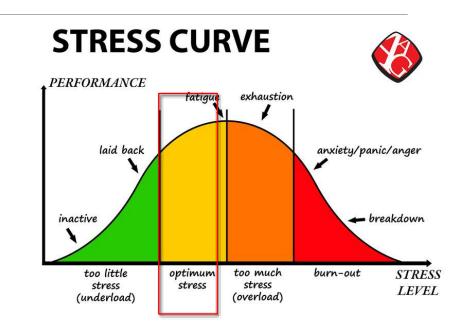
• Conferences, consulting: AbbVie, Shire



Learning objectives

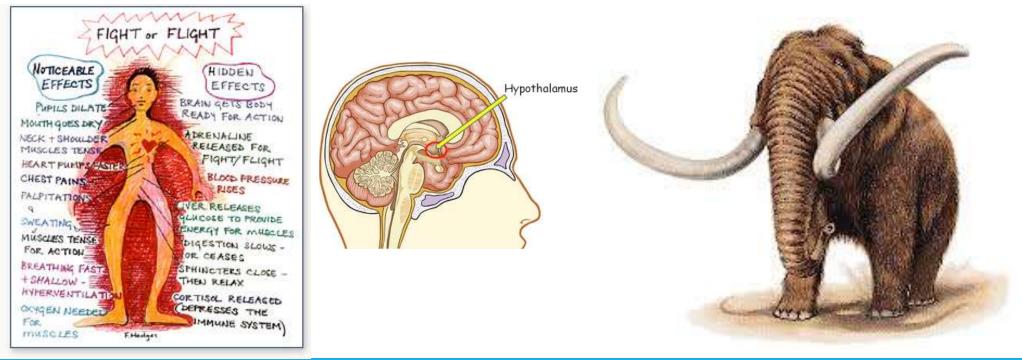
- Gain knowledge about stress and understand the importance of staying in the optimal stress zone!
 - Causes and symptoms
 - Sources of stress
 - Positive stress vs negative
 - Burnout

...stayed tuned for what you can do about it!



What is stress?

Stress is your body's way of responding to any kind of demand. It's essentially designed to **maintain homeostasis** and promote **survival** in face of threat/dangers



Moderne stress

We no longer have to hunt for our dinners,

yet stress remains a daily part of our existence

Performances, schedule, ruminations, etc. (psychological, chronic)

Hard to escape!



Mammouth or work overload

Whether you're living a **real or imagined danger**, your brain will respond in the same way: it will work to **mobilize your body to protect you** from imminent danger



Lemon exercise

What does this tell you about the mind-body connection?

Your brain doesn't make the difference between a real or a mind-induced situation (just think about the last suspense movie you've watched!)



Your brain gives real power to **your thoughts**!



Stress

Stress is what we "feel" when there is an imbalance between life demands and our ability to effectively cope



"Healthy" vs "unhealthy" stress

Brief increases in heart rate, mild elevations in stress hormone levels.

POSITIVE

TOLERABLE

TOXIC

Wedding, giving a talk, etc.

Serious, temporary stress responses, buffered by supportive relationships.

Loss of a loved one, an injury, etc.

Prolonged activation of stress response systems in the absence of protective relationships.

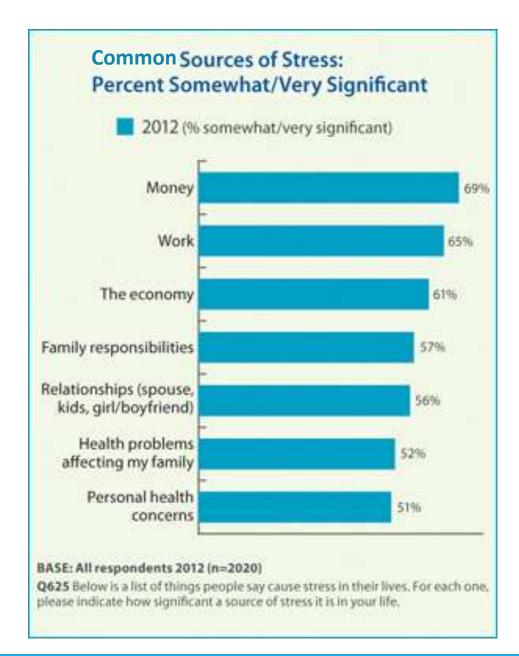
Exposure to violence, chronic disease, etc.

Typical stress responses

Stress Wallin	ng Signs and Symptoms		
Cognitive Symptoms	Emotional Symptoms		
Memory problems	 Moodiness 		
Inability to concentrate	 Irritability or short temper 		
Poor judgment	 Agitation, inability to relax 		
Seeing only the negative	 Feeling overwhelmed 		
Anxious or racing thoughts	 Sense of loneliness and isolation 		
Constant worrying	 Depression or general unhappiness 		
Physical Symptoms	Behavioral Symptoms		
Aches and pains	 Eating more or less 		
Diarrhea or constipation	 Sleeping too much or too little 		
Nausea, dizziness	 Isolating yourself from others 		
Chest pain, rapid heartbeat	 Procrastinating or neglecting responsibilities 		
Loss of sex drive	 Using alcohol, cigarettes, or drugs to relax 		
Frequent colds	 Nervous habits (e.g. nail biting, pacing) 		

In other words...

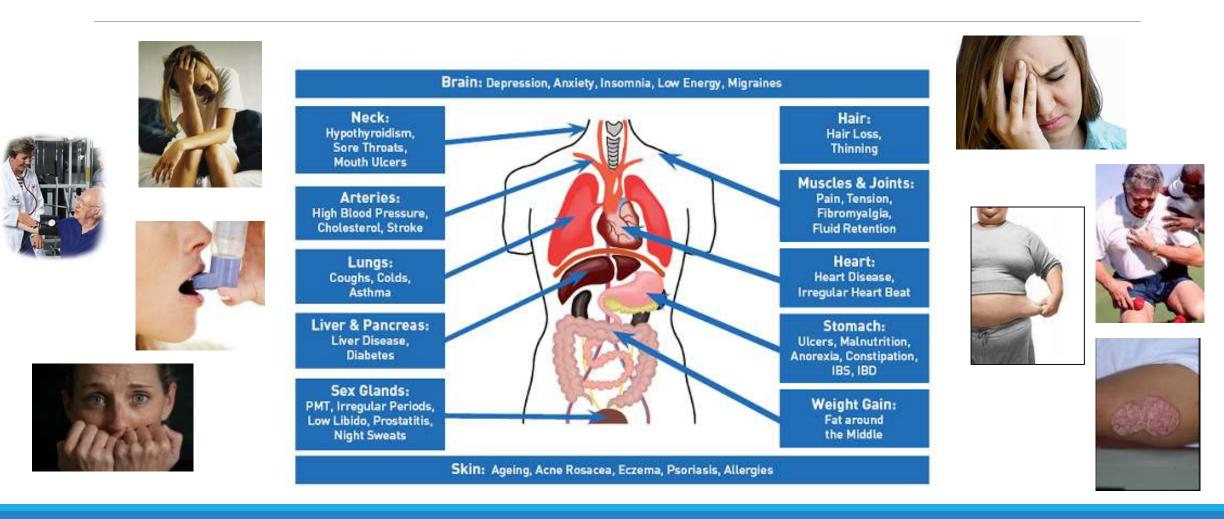




What sorts of situations are likely to stress us out?

BASE: 2012 (n=2010)

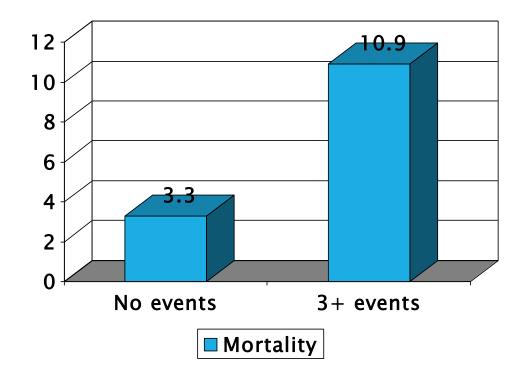
Pushing ourselves too hard can be a risk factor for chronic diseases



Stress and increased mortality risk

 Prospective f-up study of the impact of stressful life events on 7-year all-cause mortality in 752 Swedish men (aged 50)

•10.9 % of men with 3 or more life events had died vs. 3.3% of those reporting no stressful life events (evident only in men with low emotional support)



Controling for smoking, self perceived health, occupational class, and indices of social support

Being a sports fan (of a losing team) can increase heart attack risk

Carroll et al. examined hospital admissions for heart attacks following England's loss to Argentina in the 1998 World Cup



Argentina goalkeeper Carlos Roa saves Paul Ince's penalty ...



... and England fans' hearts miss a beat

Carroll et al, BMJ, 2002

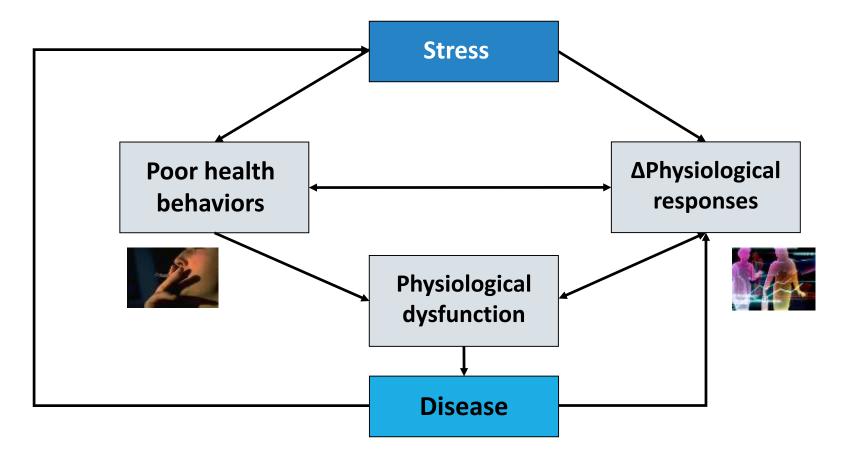
Table 2 Observed and expected numbers of emergency admissions for acute myocardial infarction on day and five days after England lost to Argentina by penalty shoot-out in 1998 World Cup

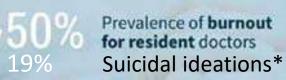
	Observed/expected* No of admissions	Actual-expected	Adjusted risk ratio†
Day of match	91/72	19.2	1.25 (0.99 to 1.57)
1 day after	88/72	16.0	1.21 (0.96 to 1.57)
2 days after	91/71	20.0	1.27 (1.01 to 1.61)
3 days after	76/74	-1.7	0.99 (0.77 to 1.27)
4 days after	71/74	-3.4	0.92 (0.71 to 1.19)
5 days after	83/72	10.9	1.13 (0.89 to 1.43)

*Predicted from a negative binomial regression model including sex, year and month of admission, temperature on day of admission, and day of week but excluding World Cup match days and five days after each match.

+Compared with days not following any World Cup match, from a negative binomial regression model including sex, year and month of admission, temperature on day of admission, day of week.

How does stress impact disease?





Physician burnout



Emotional exhaustion

Impersonal attitude toward patients & coworkers

Perceived lack of accomplishment

Burnout can lead to



Anxiety Depression Substance abuse Addiction Suicide

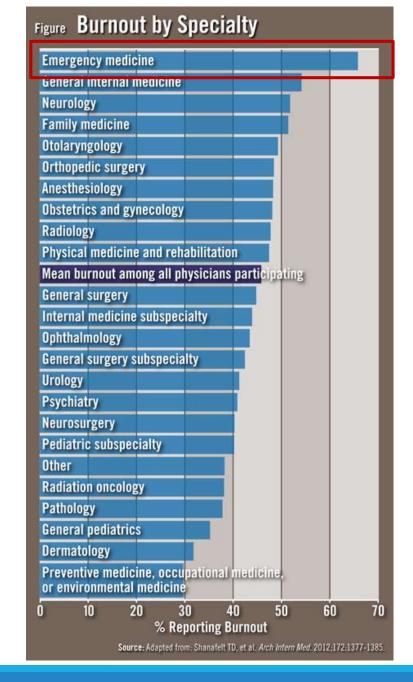


Fralick et al, Physician burnout: Who will protect us from ourselves? CMAJ 2014. *Sondage réalisé par l'AMC, octobre 2018 (CMA national physician health survey) Are physicians at higher risk of the effects of stress/burnout?

- Compared to other professionals, the risk for burnout among physicians is 36% higher
 - Bachelors degree (OR = .80)
 - Masters degree (OR = .71)
 - Doctoral degree (OR = .64)



- Absolute rates of burnout were 38% (docs) vs 28% (others)
- Physicians also reported more dissatisfaction with work-life balance (40% vs 23%)



ER docs had the highest rates of burnout compared to all other specialties : 65%

Dermatologists, pediatricians, and pathologists had the lowest rates of burnout : 30-35%



Seeking help



Reported being either aware or somewhat aware of what Physician Health Program services are available to them.

TOP REPORTED REASONS FOR SEEKING HELP:



Mental health and related issues (e.g., depression, burnout)

Personal stressors (e.g., relationships and family support)

Addictions and related disorders



Reported accessing a Physician Health Program in the last 5 years

TOP REPORTED BARRIERS TO SEEKING HELP:



Believing situation is not severe enough



Ashamed to seek help



sharred to seek help

Not aware of the range of services available

What burns docs out?

Time pressure Chaos Room availability Lack of teamwork EHR demands Lack of control over work Work-home interference Lack of values alignment with leaders



Higher retention Fewer medical errors Greater patient satisfaction Improved adherence Improved quality



Interventions

Tiré du module de formation en ligne AMA, Linzer, Guzman-Corrales & Poplau: https://www.stepsforward.org/modules/physician-burnout

Does fatigue/burnout affect performance?

Table 1. The effects of fatigue on performance

- Cognitive slowing
- More variable performance
- Neglect of nonessential activities
- Decrease in learning and vigilance
- Decay in problem solving
- Impaired memory



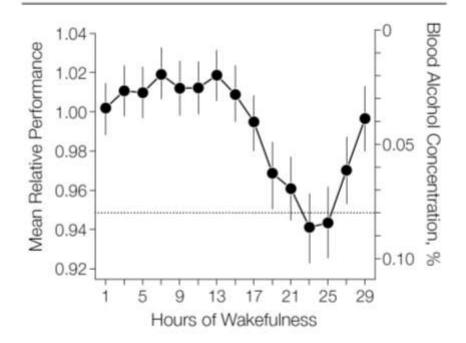
• Decline in motivation and clinical performance

Howard, Proc Bayl Univ Med Cent, 2005; Philibert, SLEEP, 2005

How dangerous is sleep deprivation?

 After 24 hrs of sleep deprivation, psychomotor performance is *equal to that during acute alcohol toxication*

Figure. Effect of Sleep Deprivation on Psychomotor Performance Compared With Blood Alcohol Concentration





Take home messages

- Stress is a problem of inadequate supply in the face of excess demand
- Stress is **common** in docs
- Stress is associated with significant health consequences: your personal health and quality of care with your patients
- **BURNOUT**, 3 signs to watch:
 - 1) cynicism
 - 2) emotional + physical exhaustion
 - 3) perceived lack of accomplishment

What can you do about it? Stay tuned for this afternoon's workshop...!



Acknowledgements

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international behavioural trials network



Questions?

