Physicians have the highest suicide rate of any profession. Why aren’t we talking about it?

Every day, one physician commits suicide, and all of their patients lose their doctor. This needs to stop.

It is critical we start the conversation to address physician suicide now because physicians are the foundation of our health care system, and, let’s face it, physicians deal with a lot of fundamental issues at the core of it.

Rapidly changing practice models, inefficient electronic health records and administrative and regulatory burdens all take away time to directly interact with patients. In addition, the frustration stemming from our limited ability to influence social factors that critically affect treatment outcomes creates frustration in our daily work.

This complex practice setting, coupled with long hours and high expectations, contributes to “burnout” among physicians. In fact, 80 percent of physicians report being at capacity or overextended, with no time to see more patients while spending nearly 23 percent of their week on paperwork.
Beyond the administrative burden, our work by nature deals with traumatic events. We get bogged down by the emotional toll of dealing with life and death situations regularly. We do our best to deliver the care our patients need, but sometimes find that the health care system does not allow for us to do so. It’s no surprise to me that 78 percent of physicians experience feelings of burnout.

There’s a stigma surrounding mental health in our society, and it’s compounded when referring to physicians. Physicians have the highest suicide rate of any profession, and yet they often find themselves unable to discuss their own feelings of burnout or thoughts of suicide. Fear of possible license restriction by state medical boards or dwindling referrals from colleagues can make physicians reluctant to discuss their mental health with anyone. Additionally, our patients may distrust physicians who are suffering from depression, questioning their ability to provide care when they are unable to care for themselves. Too many physicians feel they’re in an unfriendly practice environment that suffocates them rather than protects their well being and allows open discussions of burnout or suicidal thoughts.

As an independent practicing physician, I understand how working in our constantly changing health care system can seem overwhelming. And I know I am not alone — my colleagues also feel the stress of the administrative and emotional hurdles we must deal with every day. We joined this profession eager to help patients stay healthy but find the health care system often stands in our way. I do not want my colleagues to lose their passion for being a physician because of these obstacles, and I definitely do not want to lose another colleague to suicide.

In order to address these fundamental issues that physicians experience daily, we must redesign our health care system. The practice environment is shaped by inefficient electronic records, strained patient-physician relationships, and payment and care delivery models that do not incorporate the physician perspective. How can physicians be expected to deliver the highest quality care in an environment that is inherently ineffective and unfriendly toward them? We need physician leaders to take charge in redesigning the systems they use every day, to create greater professional satisfaction, improved health outcomes for our patients and increased productivity on our end.

Until the issues at the core of the health care industry are addressed, physicians will continue to encounter stressors that lead to burnout, dissatisfaction and potentially suicide. We can no longer be passive bystanders by simply discussing burnout. We must lead and act now.

If you or someone you love is a physician, learn the warning signs that may be present in someone who might be burned out or suicidal. The Physicians Foundation recently launched the Vital Signs campaign to encourage awareness as well as provide suggestions for helping colleagues who might be suffering from burnout.

By being caring and informed observers of the possibility of burnout, we can help prevent physician suicide and start the conversation that is desperately needed to address it.

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