



CONFIDENTIAL

Compassion fatigue is one kind of stress that physicians and other professional caregivers are especially vulnerable to. Unresolved, it can affect your health, your effectiveness at work and disrupt your personal relationships. For help with compassion fatigue or other problems that trouble you, your Resident Assistance Program is a valuable and caring first resource. Call the Resident Assistance Program Hotline (RAP), 813-870-3344.

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Editor's Note: In this first article of a two-part series, you'll learn to identify signs of compassion fatigue and what some professionals recommend to counter it. In the next issue, experts provide additional advice on how to replenish your personal energy supply in the midst of the physical and emotional demands of your residency program.

Compassion Fatigue: Are You Vulnerable?

“Compassion fatigue is an occupational hazard of caring,” explains John-Henry Pfifferling, Ph.D., director of the Center for Professional Well-Being in Durham, N.C. “Physicians may see more trauma and suffering in one day than normal people see in a lifetime, and their own empathy puts them at risk.”

The condition known as compassion fatigue or “vicarious trauma” is characterized by emotional exhaustion and distress, as a result of being close to people who are suffering. “It’s a very human reaction,” says Pfifferling. “It’s unlike “burnout” in that instead of detaching as a way of coping, the person with compassion fatigue tends to keep giving and giving.”

Besides contending with their own emotions and reactions to the people in their care, physicians must also deal with the normal stresses of work, which for a resident can be both physically and emotionally taxing.

Symptoms, Triggers Vary

The human costs associated with compassion fatigue include deteriorating job performance, a higher rate of mistakes, low morale and disrupted personal relationships. Prolonged compassion fatigue can lead to an overall decline in health.

Among the symptoms that may indicate compassion fatigue are increased irritability, anger, frequent headaches, workaholicism, chronic lateness, depression, and difficulty balancing empathy with objectivity. Feelings of hopelessness and lowered ability to feel joy may also be red flags.

“One of the dangers of unidentified compassion fatigue is that you don’t recognize your empathy is gone,” says Pfifferling. “At that point, you’re not functioning well at the family, personal or organizational levels. You may blame others or the health care system. You may not complete your work, you’re not available

as a supportive colleague, you don’t network. You may seek relief in alcohol or drugs, or engage in risk-taking behavior. You may also be at risk for boundary violations — inappropriate sexual conduct — because needs aren’t being met.”

Compassion fatigue can hit especially hard when physicians are continually exposed to situations that trigger traumatic reminders from their own personal background. For example, a doctor who’s lost a child may

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**If your compassion does
not include yourself,
it is incomplete.**

-Jack Kornfield, Ph.D.



Don't Let Disability Derail Your Financial Future

Much attention is given to owning adequate life insurance, but planning for a possible disability could be of even greater importance. In 2000, the average household had enough life insurance to replace about 35 months of disposable income.¹ Yet one survey found that 82 percent of U.S. workers either have inadequate or no long-term disability income coverage.²

One way to help reduce the financial effects of becoming disabled is to consider purchasing an *individual long-term disability income insurance policy*. If you become disabled, disability income insurance pays a monthly benefit that can be used to help pay living expenses, such as a mortgage, car payments, groceries, and utility bills.

You already participate in an employer-sponsored disability income insurance program. Did you know you may purchase an additional \$1,500 monthly benefit individual disability policy at unisex rates with a lifetime 35% discount on the premium? If you pay the premiums yourself, the benefits are generally tax-free.

For more details on your current disability coverage, or if you would like to learn how to obtain more, please call *Julio Muniz* or *Kim Fults* at **Muniz and Associates**, 813-258-0033. www.munizandassociates.com

1) *Life Insurers Fact Book*, 2001

2) *Advisor Today*, May 2002

How to Cope with Compassion Fatigue, *continued*

find it difficult to deal effectively with critically ill children because of painful memories or unresolved issues.

Perspective Comes with Experience

“The danger of compassion fatigue is very real for medical residents, who lack the perspective that comes only with time and experience,” says Bob Berg, M.D., professor of pediatric care and chief of pediatrics at the University of Arizona College of Medicine in Tucson. “You’re still learning your craft, and dealing with novel experiences is emotionally traumatic. But it’s enriching, too. At the end of three years, you will have seen volumes of real people, developed sensitivity, compassion and empathy with them and their families, and helped them. And experience teaches us that most of our patients find a way to deal with terrible things. As you start to see those coping mechanisms in action, the better you are able to cope yourself.”

Tips for Physicians

If you’re concerned that you may be experiencing compassion fatigue, it’s important to understand that the pain you feel is normal. Talking to someone can help, as can making sure you are eating properly and exercising regularly. Other tips include getting enough sleep, taking time off and developing interests outside of medicine. And while those may pose a challenge under the residency regimen, they’re essential habits to develop as your medical career progresses.

“Identify what’s important to you,” advises Pfifferling, whose center specializes in physician stress management. “That may mean changing the way you work.” He cites the example of a psychiatrist who successfully dealt with his own compassion fatigue. “He decided to create a balance between high-risk patients and those with whom he had a greater opportunity for successful interventions. So instead of seeing perhaps four or five multiple-personality disorder patients in a row, he structured his time so that his most difficult patient appointments were spread out over a longer time period.”

Focus on the Privilege of Caring for Others

“Keep in mind that as a doctor, you are invited into people’s lives at some of their most sensitive and important moments, and that is an amazing privilege,” says Berg. “There will be times when you feel overwhelmed by the traumatic situations your patients and their families face. As you understand what they’re going through, life becomes more precious. And you realize what a privilege it is to have the opportunity to help.”

Helpful Resources:

- Compassion Fatigue Self Test <http://www.ace-network.com/cftest.htm>
- “Overcoming Compassion Fatigue” <http://www.aafp.org/fpm/20000400/39over.html>
- “Compassion Fatigue: Secondary Traumatic Stress Disorders in Those Who Treat the Traumatized” by Charles R. R. Figley, Taylor & Francis, Inc., May 1995