

## Become a More Relaxed, Healthier Physician

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## Jay Winner, MD, FAAFP

Family physician, Sansum Clinic, Santa Barbara, California.

Dr. Winner has been a family physician at Sansum Clinic since 1991. He is a former chairman of the Department of Family Medicine at Santa Barbara Cottage Hospital, California. Noticing the frequency of stress-related illness and recognizing that medication was only part of the solution, he founded Sansum Clinic's Stress Reduction Program. Dr. Winner regularly speaks to a wide variety of groups on the topic of stress reduction. He has written articles on stress for medical and mental health journals, and he has been quoted frequently for lay articles on the subject. His latest book, *Relaxation on the Run*, was published in 2015.

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## Learning Objectives

1. Utilize simple mindfulness skills to reduce stress, increase satisfaction and improve connection with patients.
2. Use reframing to increase empathy with even the most difficult patients.
3. Apply techniques to deal effectively with difficult emotions and regain a healthy perspective even during the tough days

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## Audience Engagement System

The image shows three sequential screenshots of a mobile application interface for an audience engagement system.   
Step 1: The home screen displays a navigation menu with icons for Home, CME, My Profile, and My Account. A red arrow points to the 'CME' icon.   
Step 2: A list of CME activities is shown, including 'Annual Interview & Safety Tool', 'CME01 Acute Coronary Syndromes', 'CME02 Cardiorespiratory', 'CME03 Evaluation of Services, PE', 'CME04 Pediatric Respiratory PE', and 'CME05 Obesity & Patient-Centered Approaches'. A red arrow points to the 'CME01 Acute Coronary Syndromes' entry.   
Step 3: The details for 'CME01 Acute Coronary Syndromes: Unchain My Heart' are displayed, including the title, date, time, and a 'View Details' button. A red arrow points to the 'View Details' button.

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## Agenda

1. What is mindfulness? (Theory)
2. Application of mindfulness to medical practice – to reduce stress, enjoy practice and connect with patients
3. Examples of reframing
4. Applying reframing to reduce the frustrations of medical practice

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## What Are We Balancing?



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## In the Office

### Not Mindful

- Wanting to get a visit (or the day) over with
- Feeling rushed
- Feeling annoyed or stressed

### Mindful

- Connecting with your patients
- Enjoying the interactions
- Calmly and efficiently reviewing labs and doing refills

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## Mindfulness at Home

### Not Mindful

- Obsessing about work when at home
- Not really communicating with spouse and children

### Mindful

- Enjoying your free time
- Fully listening to your family and friends creating improved relationships

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## Mindfulness 101

- Peak experience vs usual distress (whether high anxiety or just unease)
- Moment to moment non-judgmental awareness

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### Not Mindful

Judging present – often negatively

Wishing things were different

More of the same

Automatic pilot

### Mindful

Non-judgmental awareness

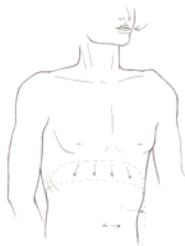
Embracing the moment

Curious, interested, beginner's mind

Fully engaged and present

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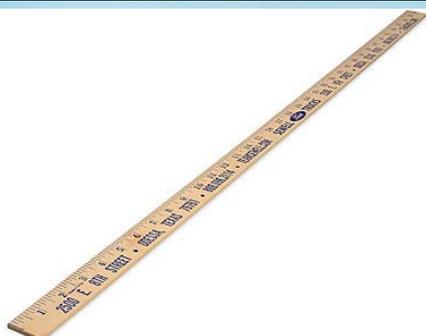
## Mindful Diaphragmatic Breathing



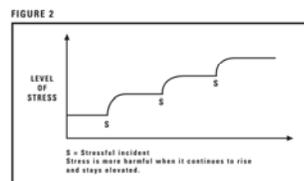
## Mindfulness

Patiently refocus your attention on a present moment sensation.  
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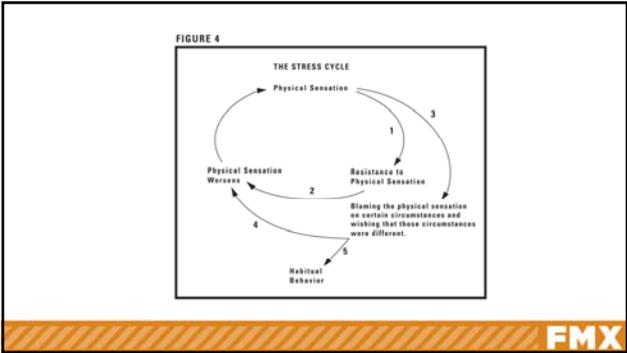
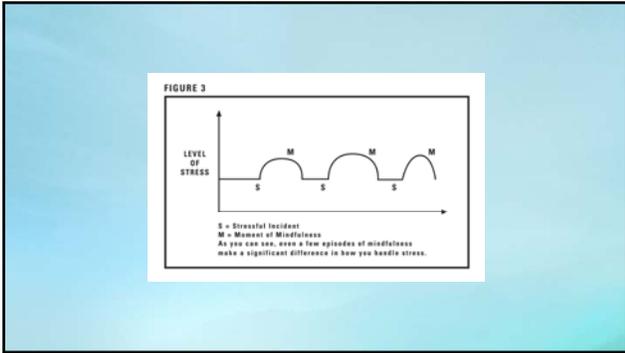
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## When Stress is a Problem

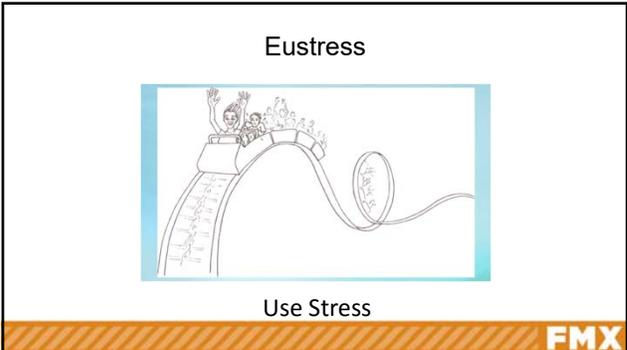


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“Between stimulus and response there is a space. In that space is our power to choose a response. In our response lies our growth and our freedom.”  
Victor Frankl

- Thoughts**
- Importance of thoughts
  - Be grateful for when you realize your mind has drifted, since only then are you mindful with the choice to return your attention to the breath, sensation, etc.



## Mindfulness

1. Use right yard stick: this breath
2. Don't resist stress; can use it
3. You don't have to believe all your thoughts
4. Don't resist your thoughts
5. Patiently refocus on this moment

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## Case:

- Dr. Adams is particularly anxious about some issues at home, but is about to go in and see a patient.
- Dr. Burger just got bad news about one patient and she needs to be focused for her next patient.
- Dr. Cohen is about to give Grand Rounds and is nervous.

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## Relaxing on the Run

- Use the energy
- Diaphragmatic breaths with mindful inhalation and relax muscle group with exhalation (such as shoulders, neck, jaw and/or muscles between eyes)
- Fully immerse yourself into the current activity – this one step
- Valet Pose

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## Valet Pose



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## Squeegee Breath (Dike Drummond)

1. Set intention to be present
2. Inhale to top of your head and hold for 3 seconds
3. Exhale to bottom of feet imagining squeegee releasing all tension
4. Smile and say "Ahh"

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## Case:

- Dr. Dennis was on call and was woken by a nurse. Dr. Dennis has trouble getting back to sleep.
- Dr. Evans feels like he needs to relax when he gets home from work, but has trouble relaxing without a drink.
- Dr. French has a new baby who has colic. He also has trouble getting back to sleep.

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## Insomnia:

- a) Sleep hygiene
- b) If annoyed about insomnia, think of the time awake at night as a perfect time to meditate.

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## Sleep Hygiene

- Avoid caffeine in the late afternoons or evenings.
- Avoid heavy meals right before bed.
- Regular exercise, but not right before bed.
- Bedroom dark, comfortable, quiet and only for sleep and sex.
- Regular routine and go to bed when tired.
- If you worry a lot, try writing your concerns down.
- Don't try too hard.

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## Purposes of Meditation

- To help with sleep
- To help be more awake; more focused
- Deeper relaxation (although, don't try hard to relax)
- To practice mindfully refocusing attention – an important skill during your day

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## Meditation

- a) Mindful diaphragmatic breathing
- b) Body scan
- c) When your mind drifts, focus back on breath, sound and/or mantra (word or phrase such as the word "one")
- d) Later can non-judgmentally notice whatever arises just in this moment (mindfulness meditation)

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## Make a Free App on a Smartphone StressRemedy.com



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## Common Barriers to Mindfulness

- I don't want to...
- I'm overwhelmed.
- Mindfulness is too hard.

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## Case

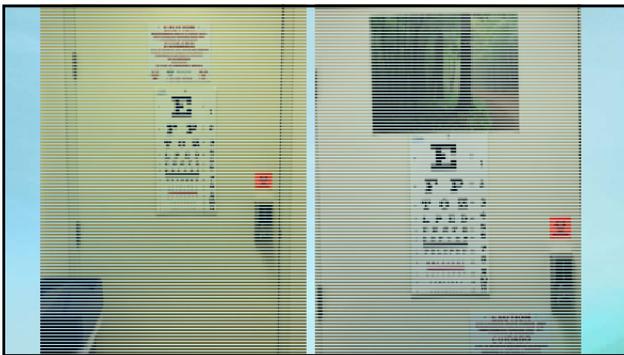
- Dr. Givens has trouble staying focused and connected with his patients. He feels distracted thinking about a variety of things: how rushed he is, other patients, and other family issues.

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## Times to Remember to Be Mindful in the Office

- The focus is not trying to relax, but to be more present -- to connect, understand and empathize with your patient. (Mindful communication)
- Feeling each footstep and you walk into the office (brief walking meditation).
- Feel your hand as you open the door.
- Take a breath right before you enter the room. Set the intention to connect with your patient.
- When you listen to heart and breath sounds, just listen.
- When you wash your hands, feel your hands.
- When listening and your mind wanders, patiently return your focus.
- Between patients, taste your lunch or your tea/coffee.

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## AES Question: What makes sense for you?

- A. Feeling each footstep and you walk into the office (brief walking meditation).
- B. Feel yourself open the door and/or feeling a breath right before you enter the room. (Set the intention to connect with your patient.)
- C. When you listen to heart or breath sounds, just listen.
- D. When you wash your hands, feel your hands.
- E. Taste your lunch.
- F. More than one of the choices

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## Being Mindful at Home

- Boundary Process (Dike Drummond)
- Shower
- Eating
- Brushing teeth
- Etc.

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## AES Question: What type of visits do you dread or find frustrating?

- A. Rude patients
- B. Non-compliant patients
- C. Patients with multiple vague complaints
- D. Patients inappropriately requesting narcotics
- E. Seeing patients when you are running late
- F. More than one of the above

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### Case:

- Dr. Winston is tired of people being rude to him

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### Reframing

- How do we reframe dealing with rude people?
- When people are rude they are almost always suffering.

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### Reframing

- I'm stressed!!!
- I have a high energy level or adrenaline level.

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### Reframing

- Dr. Harold's patient is not doing well. With hindsight, he thinks he should have prescribed a different medication and starts berating himself.
- "I am not discouraged, because every wrong attempt discarded is another step forward."  
Thomas Edison
- What can I learn from this?

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### Reframing

- Dr. Isaac has a long commute to work and gets stressed from unexpected delays at the in traffic (and from delays waiting at the grocery store).
- Waiting is an opportunity to relax from your busy day.

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### Reframing

- Dr. Jones dreads going into seeing her next patient who never seems to listen to her recommendations and is non-compliant with medication, diet and quitting smoking.
- Think of yourself not as a boss but as a caring consultant.
- Your job is to connect with the patient and offer expert counsel.
- This type of connection is *most likely* to have the patient *eventually* choose a wise course of action, but not always.

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## Reframing

- Dr. King dreads going to see his next patient who wants narcotic medication, but he suspects the patient is abusing drugs.
- Realize that **you and your patient have the same goal**, but with different strategies. You both want the patient to do well physically and mentally.
- You care about your patient. Your goal is to first do no harm and you think that the harm of the medication will outweigh the benefits. Risks: OIH (opioid-induced hyperalgesia) and addiction.
- Offer alternative solutions such as referral to a pain management specialist, or drug abuse program, use of buprenorphine/naloxone (Suboxone), etc.

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## Case

- Your next patient, Oscar, is very talkative and tends to have vague complaints.
- Sometimes patients just need to be reassured that their symptoms do not represent something serious.
- Sometimes just listening makes a difference – even a little listening may be more than they've received from other doctors. When you listen, they may be the most appreciative patients.

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## Reframing

- Dr. Nelson enjoys seeing patients, but hates doing the paperwork and computer work.
- The computer is not your patient. Whether it is online, on the phone or via mail, it is still a patient interaction. (Consider adding patient photos to your EMR.)
- If you are not reimbursed for phone or computer interactions, consider having the patient come in for a visit if it will take more than 5 to 10 minutes.

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## Reframing

- Dr. Marcus gets very stressed when she is running late. At those times, she has trouble listening and connecting with patients.
- **House of God** Rules for a Code
- Is anyone dying now?
- Either way, take a breath
- Later: do you need a schedule change?

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## Case

- Dr. Richards feels like he is in a “never ending battle.”
- Dr. Singer is down and feels like she is in the “bottom of the deepest lake.”

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## Using Mindfulness to Deal with Difficult Emotions

### Increasing Suffering      Reducing Suffering

- |                                      |                       |
|--------------------------------------|-----------------------|
| • Resisting                          | • Accepting (for now) |
| • Justifying (leading to rumination) | • Simplifying         |

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*Complicated stories with complex metaphors are best suited for literature, songs and theatre. Describing our own lives in that manner makes it more difficult to be mindful.*

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## Making Emotions Simple

Situation	Physical Sensations	Emotion	Thoughts
Going through a divorce.	Tightness in neck.	Sadness.	I feel incredibly lonely. It feels like the bottom of the deepest pit and there is now way out.
..			

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## 3 Minute Breathing Space

1. Spend one minute noting your emotion (in simple terms – happy, sad, angry, relaxed, high-energy), the physical sensations, and your thoughts.
2. Next minute: mindful breathing.
3. 3rd minute: expand your awareness to feel your whole relaxed body in the process of breathing.

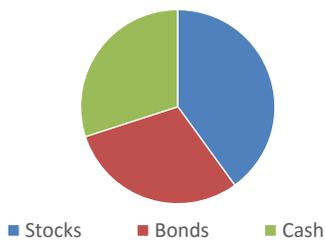
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## Case

- Dr. Thomas is stressed since her retirement just lost 20%.
- Dr. Victor is stressed since he didn't get a new job he wanted.
- Perspective

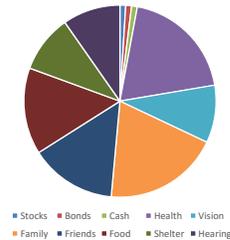
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Financial Portfolio



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Life Portfolio



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## Practice Recommendations

- Mindfulness: Patiently return your focus to this step, breath, bite of food, etc.
- Reframing: With frustrating visits, use a variety of ways to reframe the patient interaction.

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## Summary: Mindfulness

- Use the energy
- Mindful inhalation and relax muscles with exhalation
- Valet Pose
- Squeeze Breath
- Boundary ritual
- Taste your meal
- Feel your shower
- Feel feet on ground as walk to exam room
- Feel your hand open the exam door handle; perhaps take a mindful breath
- When listening to lungs or heart, just listen

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## Summary: Reframing

- Rude: suffering
- Stressed out: high energy or adrenaline level (for eustress, use stress)
- Failure: what can I learn from this
- Annoying wait: time out from your busy day
- Non-compliant patient: your job is a consultant; not a boss
- Narcotic overuse: emphasize same goal of health, but may have different strategy
- Vague complaints: just listening is doing more than many
- Intolerance of computer/paper work: remember the computer is not your patient; these are still patient interactions

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### Our Ship

Early this morning,  
I cared for a patient with severe dementia.  
He, not able to talk or get up out of bed.  
And I, not able to ignore or deny  
some day, I may be like him.  
His hair, salt.  
Mine, with some pepper left.  
His skin, with furrows;  
mine, with lines.  
Physical and mental health,  
are treated like a given,  
but the only real given:  
they do not last.  
In the past I have actively ignored this,  
So not to be depressed by this.

But now it is my bond,  
My connection to this person,  
And to all people.  
We are all on the same ship,  
crew-mates on this voyage,  
through calm seas,  
and rough waters.  
The only way the trip makes sense,  
is to take it together,  
kindly,  
connected,  
with heart,  
courage,  
empathy  
and love.

by Jay Winner

Questions?

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