Becoming a More Relaxed, Healthy Physician: Reducing Frustration and Increasing Fulfillment

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Dr. Winner has been a family physician at Sansum Clinic—the largest multispeciality clinic in Central California—since 1991. He is also a former chairman of the Department of Family Medicine at Santa Barbara Cottage Hospital, California. Dr. Winner recognized not only that stress-related illness was extremely frequent, but also that prescribing medication was only part of the solution. Therefore, in 1992, he founded Sansum Clinic’s Stress Reduction Program. He continues to run the program and teach in it. He has written journal articles and speaks on the topics of stress, health, and physician wellness. In addition, he is the author of the book Relaxation on the Run: Simple Methods to Reduce Stress in Seconds Plus Practical Lifestyle Tips for a Happier and Healthier Life.
Learning Objectives

1. Utilize simple mindfulness skills to reduce stress, increase satisfaction and improve connection with patients.

2. Use reframing to reduce frustration and increase empathy with even the most difficult patients.

3. Apply techniques to deal effectively with difficult emotions and regain a healthy perspective.
Where are you now?

To Be Healthy and More Relaxed:

• Eat well and exercise
• Adequate sleep
• Good social support
• Reasonable work schedule and efficient office
• What else can you yourself do right now?
Agenda – Things We Can Change Today!

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

In the Office
Not Mindful                  Mindful
• Feeling annoyed or frustrated  • Connecting with your patients
• Wanting to get a visit (or the day) over with  • Enjoying the interactions
                                            • Calmly and efficiently reviewing labs and doing refills
Mindfulness at Home

Not Mindful        Mindful

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

• Enjoying your free time
• Fully listening to your family and friends; creating healthy supportive relationships
Mindfulness 101

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

Mindful Diaphragmatic Breathing
Mindfulness

Patiently refocus your attention on a present moment sensation.
Patiently refocus your attention on a present moment sensation.
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**FIGURE 2**

When Stress is a Problem

LEVEL OF STRESS

S = Stressful incident
Stress is more harmful when it continues to rise and stays elevated.
**FIGURE 3**

![Graph showing level of stress over time with stressful incidents and moments of mindfulness marked.]

S = Stressful Incident  
M = Moment of Mindfulness  

As you can see, even a few episodes of mindfulness make a significant difference in how you handle stress.

**FIGURE 4**

**THE STRESS CYCLE**

1. Physical Sensation  
2. Resistance to Physical Sensation  
3. Blaming the physical sensation on certain circumstances and wishing those circumstances were different.  
4. Physical Sensation Worries  
5. Habitual Behavior
Mindfulness

Physical Sensation
Acceptance for Now

Thoughts Wishing Present Was Different
Notice Thoughts Come and Go Without Needing to Believe or Resist Thoughts

No Longer in Vicious Cycle And Have Time to Thoughtfully Respond

Eustress

Use Stress
Case:

• Dr. Adams is particularly anxious about some issues at home, and 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.

Mindfulness on the Go

• 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
Valet Pose

Case:

- Dr. French is worried about a family member and has trouble getting to sleep.
- Dr. Dennis was on call, was awoken by a nurse, and is unable to get back to sleep.
- Dr. Evans feels like he needs to relax when he gets home from work, but finds it difficult to do so without a drink.
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

Insomnia:

a) Sleep hygiene
b) If annoyed about insomnia, think of the time awake at night as a perfect time to meditate.
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, cool, quiet and only for sleep, sex and meditation.
• Regular routine and go to bed when tired.
• If you worry a lot, try writing your concerns down.
• Don’t try too hard

Meditation

a) Mindful diaphragmatic breathing
b) Body scan
c) When your mind drifts, focus back on breath, body sensations, 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)
Free Guided Meditations

• [http://marc.ucla.edu/mindful-meditations](http://marc.ucla.edu/mindful-meditations)
• UCLA Mindful app
• [https://health.ucsd.edu/specialties/mindfulness/programs/mbsr/Pages/audio.aspx](https://health.ucsd.edu/specialties/mindfulness/programs/mbsr/Pages/audio.aspx)
• Mindfulness Coach app

Make a Free App from a Website
Thoughts:

- Importance of thoughts
- We don’t have to resist or believe all our thoughts; we can just notice them
- 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.

Common Barriers to Mindfulness

- I don’t want to...
- I’m overwhelmed.
- Mindfulness is too hard.
Times to Remember to Be Mindful in the Office

- Feeling each footstep as you walk from your office to your exam room (brief walking meditation).
- Feel your hand as you open the door.
- Take a mindful 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 the warm water.
- Between patients, taste your lunch or your tea/coffee.
Mindful Communication

• Set your intention to be curious about your patient and connect with him/her
• When listening and your mind wanders, patiently return your focus again and again
• When you are able to let go of certain judgmental thoughts, you are more able to connect and empathize
• Doctor more fulfilled, more effective and less errors
• Patient feels more satisfied and gets better care
• Can be enhanced by reframing

AES Question 1

What type of visits do you 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. All of the above
Case:
Dr. Winston is stressed about a patient being rude to him

Reframing

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

• Dr. Jones dreads going into seeing her next patient who has been non-compliant with medication, diet and quitting smoking.
• Not boss/employee relationship so term “compliance” doesn’t make sense
• **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.

Reframing

• Dr. King is anxious about seeing 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 psychologically.**
• 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, etc.
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.
• Just listening can make 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.**

Dr. Nelson enjoys seeing patients, but hates doing the paperwork and computer work.
• Have your team work to the top of their license and ability.
• Obsessing about trying to get a task over with usually doesn’t make it go faster. It just makes it more miserable.
Computer Work -- Reframing

• Realize that instead of “computer work”, it is patient care via the computer. (Consider adding patient photos to your EMR.)
• Advantages: can do it at your pace and with music and with a nice cup of coffee or tea
• Instead of “computer work” – “Relax and Review Time”

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 mindful breath
  • Later: do you need a schedule change?
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.”

Using Mindfulness to Deal with Difficult Emotions

**Increasing Suffering**

- Resisting
- Justifying (leading to rumination)

**Reducing Suffering**

- Accepting (for now)
- Simplifying
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.

Making Emotions Simple

<table>
<thead>
<tr>
<th>Situation</th>
<th>Physical Sensations</th>
<th>Emotion</th>
<th>Thoughts</th>
</tr>
</thead>
<tbody>
<tr>
<td>Going through a divorce.</td>
<td>Tightness in neck.</td>
<td>Sadness.</td>
<td>I feel incredibly lonely. It feels like the bottom of the deepest pit and there is no way out.</td>
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<td>..</td>
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</tbody>
</table>
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.

Currently 11th exercise at StressRemedy.com/audio

Ask for Help

- Avoid the traps of pride and perfectionism
- Who do we most connect with: the person who appears “perfect” and shows off or a real person with flaws
- Getting help and working through challenges makes us more empathetic, compassionate and better caregivers and better people
- Getting help should be a sign of strength, wisdom and professional maturity
- Get help from: EMR super user, your primary care provider, a counselor, employee assistance program, etc.
- Don’t wait till your at “wit’s end” – seek it early and often
- Practice
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.

Summary: Mindfulness

• Use the energy
• Patiently refocus attention
• Mindful inhalation and relax muscles with exhalation
• Valet Pose
• Taste your meal
• Feel your shower
• Difficult emotions: accept and simplify
• 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
Summary: Reframing

• Rude: suffering
• Stressed out: high energy or adrenaline level (for eustress, use stress)
• Failure: what can I learn from this

• Non-compliant patient: your job is being a caring 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: instead of “computer work” it is patient care via the computer or “relax and review time”; you can relax and listen to music

Practitioner Well-Being

Practice Efficiency*
More time with patients and at home

Reframing
Reduce Frustration
Reduce Otherness and Objectification

*Including appropriate volume
Otherness/Objectification

- Different and separate from you
- Treating people like things:
  - The non-compliant patient – that wastes your time
  - The rude entitled patient – that makes you angry
  - The whiner – that makes you late
  - The drug abuser – that makes you uncomfortable

Practitioner Well-Being

Fulfilling Human Connection

Practice Efficiency*
- More time with patients and at home

Reframing
- Reduce Frustration
- Reduce Otherness and Objectification

Mindfulness
- Be More Present to Increase Connection

*Including Appropriate Volume

“Love the One You’re With”
Crosby, Stills, Nash and Young
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 from book *Relaxation on the Run*
Practice Recommendations

• Mindfulness: Patiently return your focus to this step, breath, bite of food, etc.
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Questions