Dynamic Chiropractic

YOUR PRACTICE

Burnout Triggers: Are You at Risk?

PREVALENCE, RISK FACTORS FOR CHIROPRACTIC BURNOUT.

Editorial Staff

A study in the March / April issue of $JMPT^1$ evaluated burnout prevalence and patterns among U.S. doctors of chiropractic, finding that DCs experience less emotional exhaustion (considered the core symptom of burnout) and depersonalization, and a greater sense of personal accomplishment, than medical doctors, nurses physical / occupational therapists and dentists.

However, in cross-referencing the three burnout variables with sociodemographic variables, "Significant differences ... were found in the level of EE, DP and PA as a function of sex, time dedicated to clinical care and administrative duties, source of reimbursement, the type of practice setting, the nature of practitioners' therapeutic focus, the location of chiropractic college, self-perception of burnout, the effect of suffering from a work-related injury, the varying chiropractic philosophical perspectives, and the public's opinion of chiropractic."

A randomized sample of chiropractors received and completed the Maslach Burnout Inventory – Human Services Survey and a sociodemographic questionnaire. Overall, only 2 percent of DCs were at high risk for burnout, characterized by high emotional exhaustion and depersonalization, and low sense of personal accomplishment; while 46 percent were at low risk for burnout (low EE / DP; high PA).

In terms of individual burnout subscores, 21 percent of DCs had high EE, 8 percent had low PA, and 8 percent had high DP.

Researchers then cross-referenced symptom subscores with the sociodemographic data to understand how particular personal / practice variables influenced EE, DP and PA. Some of the key findings revealed by their analysis include:

- *Practice duties:* Chiropractors who reported working longer hours and spending more time dedicated to administrative duties, rather than clinical care, had significantly lower EE and PA scores. Depersonalization (DP) scores also were higher based on the amount of time spent on administrative tasks.
- Wellness vs. acute / chronic care: Chiropractors who primarily provide "wellness care" had significantly lower EE and DP scores, and significantly higher PA scores, than those who primarily treat patients with acute, subacute, and chronic ailments.
- Reimbursement type: Chiropractors who depend on worker's compensation / personal injury as a major source of payment for services rendered had significantly higher EE scores than DCs who practice in a cash-fee setting, and significantly lower PA scores compared to those in cash-fee and major medical reimbursement practices.
- Business ownership: DCs who own their own business had significantly lower DP scores than non-owners.
- Chiropractors with a musculoskeletal focus had significantly higher EE and DP scores, and

- significantly lower PA scores, compared to subluxation-focused chiropractors.
- Work-related injury: Chiropractors who reported suffering a work-related injury (which the researchers suggest may be related to the physical demands of manual therapy) report significantly higher EE DP scores, and significantly lower PA scores, than their injury-free counterparts.
- *Professional issues:* Chiropractors who believe that "varying philosophical perspectives (straight vs. mixer)" and inconsistent public perception of chiropractic could increase burnout had significantly higher EE / DP scores, and significantly lower PA scores, compared to DCs who did not think so.
- *Practice experience*: Chiropractors with more practice experience (duration) had lower levels of EE compared with DCs with less practice experience.
- Gender: Women generally had higher PA scores and lower DP scores than men.

Reference

1. Williams SP, Zipp GP. Prevalence and associated risk factors for burnout among U.S. doctors of chiropractic. *JMPT*, Mar-Apr 2014; 37:180-89.

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