

Beyond the operating theatre: mindfulness and self-care as antidotes to burnout in anaesthesiology

Chiong Kian Tiong

Faculty of Medicine, Universiti Malaya, Kuala Lumpur, Malaysia

A call to action: mitigating burnout and enhancing well-being in anaesthesiology

Anaesthesiology is one of the most demanding and high-stress medical specialties. Anaesthesiologists operate in a fast-paced, high-pressure environment, often working long hours for both elective and emergency procedures. The intense workload and extended shifts can contribute to excessive stress, ultimately reducing job satisfaction and negatively impacting physical and mental well-being. This persistent stress may lead to fatigue and burnout.¹ In addition to heavy workloads, other contributing factors to burnout include early-career stress, inexperience, and personal responsibilities such as having children, particularly among younger and less experienced physicians.² Burnout manifests as emotional exhaustion, depersonalisation, and a diminished sense of personal achievement stemming from prolonged interpersonal stressors that can compromise both patient care and physician professionalism.³ Therefore, it is essential to find a balance to alleviate burnout and manage workload stress effectively. Maintaining work quality and professionalism without compromising patient care can be achieved through consistent mindfulness practice and self-reflection. As an undergraduate medical student aspiring to specialise in anaesthesiology, I recognise the potential of incorporating mindfulness into everyday practice beyond the operating theatre to foster well-being and combat burnout.

Correspondence: Chiong Kian Tiong, Faculty of Medicine, University of Malaya, 50603 Kuala Lumpur, Wilayah Persekutuan Kuala Lumpur, Malaysia. E-mail: tiongchiongkian@gmail.com

Mindfulness-based stress reduction (MBSR) techniques, such as guided meditation and deep breathing exercises, can significantly help anaesthesiologists manage stress and enhance emotional resilience, even in high-pressure environments. However, implementing MBSR in an acute care setting presents challenges. Given the high-stakes and time-sensitive nature of anaesthesiology, finding even a few minutes for stress-relieving practices can be difficult. To address these barriers, institutional policies and guidelines can be revised to incorporate designated time for MBSR. If manpower allows, anaesthesiologists can take turns practicing mindfulness exercises, ensuring that patient care remains uninterrupted, and fostering a culture of well-being. Brief mindfulness sessions integrated into daily routines, such as deep breathing between procedures or reflective pauses before critical tasks, can help improve focus and reduce emotional exhaustion. A structured approach could involve allocating at least 10 minutes for mindfulness practice before each grand ward round in the intensive care unit or elective surgery. Organisations can also support MBSR implementation by incorporating mindfulness training into professional development programmes and encouraging a culture that prioritises physician well-being. While emergency procedures must remain the priority, allowing anaesthesiologists to engage in brief mindfulness exercises before non-urgent cases can help cultivate long-term stress management habits without compromising patient care. By integrating MBSR into daily practice through policy support, anaesthesiologists can experience greater well-being while maintaining efficiency and professionalism in their demanding roles.

It is equally important to address other stressors that contribute to burnout. Younger anaesthesiologists often face additional pressures from research, teaching, and clinical duties, while residency training can limit career control and create uncertainty regarding job expectations. These challenges can be mitigated through structured mentor-mentee programs and career talks that provide clarity on job expectations and subspecialisation pathways after graduation as a clinical anaesthesiologist. A systematic approach, such as assigning a senior trainee to mentor 2 to 3 junior trainees, can foster guidance and support in navigating career progression. Additionally, career talks conducted by experienced anaesthesiologists can offer valuable insights into various career pathways, helping trainees make informed decisions and manage professional expectations more effectively. Furthermore, interactive sessions or team-building activities focusing on wellness and relaxation techniques involving anaesthesiologists from different hospitals or institutions can serve as valuable platforms for stress relief, professional networking, and knowledge exchange. These sessions encourage participants to cultivate mindfulness by being fully present in the moment and acknowledging their thoughts, emotions, and physical well-being. Engaging in group discussions allows trainees and practicing anaesthesiologists to share experiences, gain diverse perspectives, and address common challenges in a supportive environment. Activities

such as yoga, meditation, and outdoor retreats such as mountain trips can further promote relaxation and mental clarity. For younger physicians, particularly women and those with children, the challenge of balancing work and family life can be mitigated through flexible work shifts. Allocating at least 1 designated day for family time can enhance overall well-being and mindfulness. Additionally, establishing peer support groups focused on family and gender-related issues can create a safe space for open discussions, allowing physicians to share strategies and experiences in managing both professional and personal responsibilities.

As a medical student, stress is inevitable, especially when balancing clinical duties, studies, and personal interests. One of the most effective approaches I have adopted for managing burnout is structured task organisation. I begin by listing all my tasks, prioritising them based on urgency and importance, and systematically addressing them. Procrastination often leads to a buildup of last-minute work, increasing stress and anxiety. To prevent this, I break tasks into smaller, manageable steps, set achievable deadlines, minimise distractions, and reward myself for progress. Additionally, I find relief in sharing my thoughts with family and close friends, as expressing my feelings helps alleviate stress. Practicing self-affirmation and recognising even minor accomplishments have kept me motivated. Like many others, I have struggled with imposter syndrome, often feeling inadequate compared to my peers. However, I have realised that constant comparison is unproductive. Instead, I focus on self-improvement by incorporating daily mindfulness and wellness practices. Every day, I write in a journal and reflect on my progress, noting at least 5 things I am grateful for, no matter how small, such as getting sufficient rest. This habit has significantly reduced my imposter syndrome, shifting my mindset from self-doubt to personal growth. By implementing these strategies, I have achieved a better balance between academics, clinical duties, and personal well-being while maintaining a healthier and more focused outlook.

Regardless of the form of mindfulness practice or reflection, what truly matters is finding a method that effectively alleviates stress and enhances well-being. As much as career progression and clinical duties are essential for a practicing physician, maintaining both mental and physical health is equally important. A healthy physician is better equipped to provide high-quality, professional care to patients. Prioritising self-care is not a sign of weakness but a necessity to sustain long-term success and fulfilment in the medical profession.

References

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