# Prioritizing Pathologists Wellness

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**Venus Brady:**

Welcome to the latest CAPcast presented by the College of American Pathologists. In this episode, you will hear Dr. Marisa Saint Martin, who is medical director of OneBlood in Jacksonville, Florida, and a member of the CAP's House of Delegates and Professional and Community Engagement Committee, along with Dr. Michael Cohen, who is a professor of pathology at Wake Forest School of Medicine, and also a member of the CAP's House of Delegates, the Council of Membership and Professional Development, and the Engaged Leadership Network Chat with Dr. Sue Chang about wellness for pathologists.

**Dr. Sue Chang:**

Hi everybody. I'm so glad to be here today speaking with you all about what's happening within the Council on Membership and Professional Development, the CMPD. My name is Dr. Sue Chang. I am a pathologist at City of Hope in Southern California. I'm the chair of the Professional and Community Engagement Committee, and I'm happy to serve as your host and interviewer today with our two fabulous guests, Dr. Michael Cohen and Dr. Marisa Saint Martin, who are co-leading a very important CMPD project on physician pathologist wellness. You may have seen them recently as the feature story in A CAP Today article, and they're here to talk with us about the topic of pathologist burnout, wellness, and really to explain to us or show us how personal stories can really become universal themes. So I wanted to start with you, Michael. Can you tell me a little bit about yourself and what led you to this topic?

**Dr. Michael Cohen:**

Yeah, thanks, Sue. I think my interest in the whole area of wellness and burnout, which to me are sort of two sides of the same coin, are born out of a personal story. So I don't think in that sense all of this is that unique. But I would say this began for me five years ago when I came to this institution where I was hired as director of anatomic pathology and within about a month and a half I was put into the corner office, which is to say I became the interim chair. There were a number of issues that arose here, which I think I've been well covered in the press and I won't go into the rest. Lemme leave it at the point that a lot of that focused on spending time with risk management, but I was doing still the work of AP director irregular service load, and I quickly became overwhelmed, which in retrospect was sort of my buzzword for being burnt out.

And I think in retrospect that clearly had classic triad as at least as defined by Christina Maslach, I was exhausted both physically and mentally. I really felt I was ineffective in what I was trying to do in all of these capacities, and that then ultimately led to some sort of disengagement with the whole process. And so at close to the end of two years, I decided enough is enough, and I stepped away from that role as interim chair. So that's my story. I suspect Marisa may well have a different story, but I'm sure there's some common themes there.

**Dr. Marisa Saint Martin:**

Absolutely. Thank you, Michael. So my personal journey regarding burnout is a little bit different. And I'll start by saying that now that I know a little bit more about burnout, when I go back, I realized that I had symptoms of burnout several times during my career. I just didn't call it that, but the signs and symptoms were definitely there. I'm the type of person that always says yes, and that brought me a lot of advancement as a pathologist and also joy because I wanted to be helpful. But in taking so much, I disturbed the balance between doing and being suddenly I was doing all the time, jumping from one task, meeting, commitment, patient, directorship to another, and I somewhat forgot to actually be present in my life to enjoy what I was doing and particularly to connect what I was doing with a sense of purpose that went on and on with some detriment to my wellbeing.

But it was not until my personal life got deeply shaken that I truly took notice of what was going on with me when my best friend passed away from a gastric carcinoma that consumed her in six months. And shortly after my dad, who was and still is my hero, was diagnosed with Alzheimer's disease, a disease that ultimately took his life, my own life and journey started to become more real, took a different direction. I started to open my eyes to the reality of my day-to-day experience, to how I was being treated and how I was treating myself. I went to my first burnout retreat for physicians and I learned a lot. And then after that, I could not get enough. I started to read everything I could regarding the dilemma of burnout in the workforce. I was getting myself ready to help. I just didn't know it yet.

While I was working at Loyola University in Chicago, I was selected to be part of an effort to increase wellness among physicians, and I became part of a multidisciplinary resilience team. Not satisfied with the basic coaching that we receive as a group, I decided to become a certified coach to better serve those with burnout issues. After that, I created a hospital-wide wellbeing task force and also an ACGME compliant curriculum for the pathology residency program. That work was recognized not just by a publication of our data in academic pathology, but also by receiving two national awards. The program was highly successful. I suddenly was being invited to give talks nationwide, not on pathology or transfusion medicine topics, which are my specialties, but mostly on burnout and resilience issues. In many ways, my burnout learnings and helping others was kind of selfish because I realized that all that work was and still is also helping me. When I started sharing my story, others started sharing too, and that brought us all a sense of recovered humanity, of not feeling a sense of not feeling alone or embarrassed or weak for having these feelings and symptoms. And it brought us all a sense of community. And lastly, add that getting my mindfulness certification and starting a daily mindfulness practice were also big contributions in my recovery from burnout symptoms.

**Dr. Sue Chang:**

Thank you for sharing your stories, Marisa and Michael, when I was listening to them, I was nodding along because a lot of the beats are very similar to I think what all of us experienced at one time or another. It occurred to me hearing about Michael, the departmental situation you ended up in and Marisa, your best friend passing away and your father's diagnosis. These were things that happened not in a vacuum, right? We personally, individually don't burn out. It's the integration or the complex interaction between our workplace, our family, our responsibilities, what we say yes to. I'm just curious what you think about the give and take between systems and people.

**Dr. Michael Cohen:**

As shown by the survey, 60% of the respondents, all of whom were CAP members, felt that their employers provided ineffective resources to prevent burnout. And that was certainly my experience. And so I agree with you that we live whole and full lives arguably too whole and too full, but you would like to think that there are resources available to help you. And I think Marisa's story as well as my own experience there, that we sort of had to stumble along and find our own resources. And I think part of this whole initiative is to make resources more readily available to the CAP membership.

**Dr. Marisa Saint Martin:**

I definitely agree with that. And Michael and I really wanted to understand what were the needs of CAP members regarding wellness, as well as what was the impact of burnout on pathology specifically? So we put together a group of interested pathologists, and together we work on strategies with the objectives of empowering our members to address burnout issues, to overcome all those biases related to resilience and burnout, and to build awareness of wellness related topics and information. There is a lot of data out there on burnout, but not much really specific to our specialty. We wanted to have data that represented our member experiences, our member experiences, and then potentially offering resources that pathologists may found find helpful. In March of this year, we issue an online study to roughly 3,500 members, and I'm happy to say that we have a very good response rate to achieve our objectives. We also designed our own wellness resource topic center on cap.org.

**Dr. Michael Cohen:**

Let me just highlight some of the findings of the survey. So our survey, and this is similar to the few other surveys that exist in the at least peer reviewed literature relevant to pathology, indicate that about 40% of pathologists report symptoms of burnout, which is relatively low compared to other medical specialties, but still we would find quite high. The rates are higher amongst women than they are amongst men, and they also seem to be higher amongst those newer practice, so less than 15 or 20 years in practice than those who are further along in their careers. It was also quite evident, and I think there should be no surprise that people reported burnout much more intensely as it were during the pandemic. Hopefully we've emerged from that, but I think we're still feeling some issues related to that. And the chief causes people identified were an excessive increased workload, which in part I think is related to our work for shortage. The issue that we sort of touched on before work-life integration, and then some of the challenges we all have, and I'm sure we have our own stories about this, about the inefficiencies of getting work done at our own places, which I think leads to a lot of frustration. So one of our hopes is that this podcast will engender some enthusiasm amongst the membership to become engaged, and we look very much to input about what resources they would like to see in order to try to help meet the needs of the college's fellows.

**Dr. Sue Chang:**

Thank you for sharing those findings. And with this engagement, what can our CAP members expect to see coming from all of this work and this information that we now have gathered?

**Dr. Marisa Saint Martin:**

Yeah, hopefully a lot. I feel that we are in a momentum forward process. We just launched a dedicated space on c.org that can be found under member resources where CAP members can find relatable wellness information and help. We are also working with many other areas within the CAP that may help us create and promote opportunities where members could tap into their own wellness. We also hope to see more wellness type offerings added to events, perhaps meditation rooms, different short courses, round tables, et cetera, at the annual meeting or other smaller meetings. And we're truly very thankful to you and the CAP for this opportunity, allowing us to broadcast the work of our group. Like Michael said, we hope it will be followed by a series of podcasts offered by our own project team members as a way for others to relate and connect.

**Dr. Sue Chang:**

I wanted to thank you both for talking with me today, and I have one final question for each of you. If there was one thing that you would like our CAP colleagues to take away from this work and your stories and what we're doing, what would that be?

**Dr. Michael Cohen:**

I'm going to give you two answers. One of which is that these issues are not unique to you. And the second one, which is sort of a corollary, is that there is really a peer group, a peer support group that I think we are trying to engender, which I think will help others who have gone through or going through these types of issues.

**Dr. Marisa Saint Martin:**

Thanks, Michael. You took the gist of what I was going to say too. My answer to your question, Sue, is also that we are not alone. You are not alone. And if someone is experiencing severe symptoms of burnout, there are a lot of resources out there. There's a lot of people out there. And if we see someone experiencing symptoms of burnout, let's just ask a simple question, are you okay? For them not to feel alone, even if we cannot do anything at the moment. Just that fact of being there for someone else makes a difference many, many times. And one more thing that I would like to add is whenever we are in the gist of all this burnout, I'm feeling isolated and depressed and exhausted. Just think about the phrase, this too shall pass. It will go away. It will get better, and hopefully we'll provide some resources for them.

**Dr. Sue Chang:**

I thank you both so much for sharing your very personal stories with us and for helping us sort of get the ball rolling on, like you said, peer support, helping each other through this and out of this For our listeners, if you wanted to hear more about this topic, you can check out when the Fire is Gone, strategies to Reignite Your Resiliency, which is a podcast that features our guest, Dr. Saint Martin, and explore the previously mentioned resources available cap.org. Thank you!

**Venus Brady:**

Again, thanks for tuning into this CAPcast. For the wellness resources presented by the Wellness Project team, visit cap.org and search wellness resources.