From Doctors to Patients: The Importance of Valuing Mental Health in the Workplace of Physicians from the National Health Service

De Médicos a Doentes: A Importância de Valorizar a Saúde Mental no Local de Trabalho dos Médicos do Serviço Nacional de Saúde

Keywords: Burnout, Professional; Internship and Residency; Physicians; Portugal

Palavras-chave: Esgotamento Profissional; Internato e Residência; Médicos; Portugal

Dear Editor,

The article published by Mendonça *et al*¹ characterized the contemporaneous situation of Portuguese physicians, and raises the question if, in the near future, we will be debating whether there's access to healthcare rather than discussing the quality of the service provided.

From an historical perspective, physicians are viewed as someone who treats patients, and not someone that also needs care. However, today, physicians are increasingly becoming patients themselves. The most recent national outlook on the mental health of our professionals reports that two-thirds (66%) had high levels of emotional exhaustion, 39% had high levels of depersonalization and 30% had low professional fulfillment.² Signs of depression and anxiety were present in 21% and 45% of the respondents, respectively. This worrying scenario may jeopardize the quality and access to healthcare. Two studies were mentioned by the authors concerning the impact of the pandemic on the mental health of healthcare professionals. Nonetheless, this vulnerability is not seasonal: it was already a significant

public health problem before the COVID-19 crisis, and it is, undeniably, getting worse.³ Constant availability for work-related matters is now a demand, which associated with a scaling cost of living, is encouraging multiple employment and work-family conflicts, absenteeism, mental health illnesses, and leaving the National Health Service (SNS). In Portugal, depression and anxiety already represent the sixth and ninth-most common causes of disability-adjusted life years (DALY).⁴

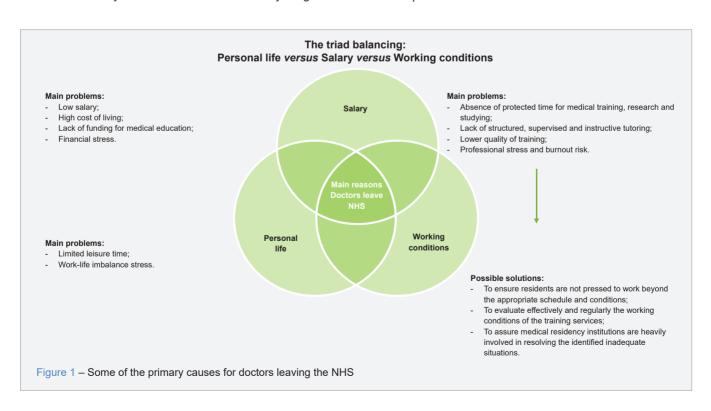
The National Occupational Health Program states that a safe and healthy workplace is a fundamental right and a social goal. However, the public healthcare system remains largely neglected.

It is essential to strike a balance between the needs of citizens and the needs of medical professionals. Therefore, in addition to the changes suggested by the authors, we also propose: (i) ensuring that residents are not pressured to work beyond their scheduled working hours; (ii) to effectively evaluate the working conditions of the various health-care institutions that offer residency positions; (iii) guarantee that medical residency institutions are heavily involved in resolving the identified inadequate situations (Fig.1). We believe that a greater presence and intervention by these institutions will not only improve the working conditions of residents but will also promote a healthy environment and their retention in the SNS.

AUTHOR CONTRIBUTIONS

AMA: Conception and draft the final version of the manuscript.

MC: Draft and critical approval of the final version of the manuscript.



COMPETING INTERESTS

MC has received support from Comissão de Médicos Internos de Saúde Pública de Lisboa e Vale do Tejo for attending meetings as its representative; has integrated the elected board of Comissão de Médicos internos de Saúde Pública de Lisboa e Vale do Tejo; is the supervisor of the residency training of a Public Health Medical Resident; has received payment for lectures given to Public Health Medical Residents in Escola Nacional de Saúde Pública da Universidade NOVA de Lisboa and Instituto de Saúde Pública

at Universidade do Porto.

AMA is a member of *Mesa da Assembleia Geral* at Associação Nacional de Médicos de Saúde Pública and is doing her Public Health Residency at the Public Health Unit Francisco George.

FUNDING SOURCES

This research received no specific grant from any funding agency in the public, commercial, or not-for-profit sectors.

REFERENCES

- Mendonça C, Garcia Moreira I, Loureiro MD, Ribeiro JC. Why do doctors leave the national health service in Portugal? State of play and possible solutions. Acta Med Port. 2022;35:611-3.
- Vala J, Marques Pinto A, Moreira S, Costa Lopes R, Januário P. Burnout na classe médica em Portugal: perspetivas psicológicas e psicossociológicas. Relatório final. Instituto de Ciências Sociais da Universidade de Lisboa. 2017. [consultado 2022 set 22]. Disponível em: https://ordemdosmedicos.pt/wp-content/uploads/2017/09/ESTUDO-BURNOUT_OM.pdf.
- Murthy VH. Confronting health worker burnout and well-being. N Engl J Med. 2022;387:577-9
- World Health Organization. Global Health Estimates 2020: Disease burden by cause, age, sex, by country and by region, 2000-2019. 2020. [consultado 2022 Set 25]. Disponível em: https://www.who.int/data/gho/data/themes/mortality-and-global-health-estimates/global-health-estimates-leading-causes-of-dalys.
- Bodenheimer T, Sinsky C. From triple to quadruple aim: care of the patient requires care of the provider. Ann Fam Med. 2014;12:573-6.

- 1. Unidade de Saúde Pública Francisco George. Agrupamento de Centros de Saúde Lisboa Norte. Administração Regional de Saúde de Lisboa e Vale do Tejo. Lisboa. Portugal.
- 2. Unidade de Saúde Pública Maia e Valongo. Agrupamento de Centros de Saúde Grande Porto III Maia/Valongo. Administração Regional de Saúde do Norte. Portugal
- Autor correspondente: Ana Margarida Alho. margarida.alho@arslvt.min-saude.pt

Recebido/Received: 30/09/2022 - Aceite/Accepted: 20/03/2023 - Publicado Online/Published Online: 11/05/2023 - Publicado/Published: 01/06/2023 Copyright © Ordem dos Médicos 2023

https://doi.org/10.20344/amp.19146

