

Managing Medical Malpractice Stress

Page 1: The Impact & Symptoms

Although malpractice claims are a completely predictable hazard of medical practice in the 21st century, medical training rarely addresses, let alone confers immunity from the harmful effects of malpractice litigation. Here is what you need to know to begin to transform the experience.

The impact of a medical malpractice suit on the physician, and on his or her family, produces the symptoms of medical malpractice stress (MSS).

The term "malpractice" is often a misnomer, as many - if not the majority of - suits, upon suitable investigation, are non-meritorious, mal-occurrences, mistakes caused by systemic errors, or harm associated with disease or illness processes. Because of the stigma associated with negligent injury, intense shame and negative consequences accrue to sued physicians. This reality alone behooves us to find alternatives to a current system that is not a sensible mode of compensation, or a valid and effective strategy for maintaining or improving medical care. Comparisons of medical malpractice and other personal injury awards were three times as high as in motor vehicle cases (Bovbjerg, et al, 1991). Physicians can find good data to support their claims that their status as victim is real.

Physicians who are sued usually perceive the claim as an assault on their own integrity. Sued physicians report reactions such as the following, to describe the emotional roller coaster of the experience:

"Over the weeks, months, and years of the suit, I felt waves of shame and betrayal."

"Very annoying and humiliating... an affront to my competency."

"An embittering experience."

"Now, I watch myself react to patients with a subtle distance."

"I had a frantic, furious reaction; now I realize my practice is no longer worth the sacrifice."

"It was the most stressful experience in my life. It reinforced my commitment to leave medicine."

"No one, not even my close colleagues, offered to support me."

Typical symptoms of the medical malpractice stress syndrome

In retrospective analyses of sued physicians, regardless of outcome of the suit, almost all report physical or emotional reactions. Common symptoms include:

Isolation. Most feel alone in their efforts to vindicate themselves. This feeling of aloneness persisted, in spite of having an attorney on the case. Rarely did the sued physician seek support from colleagues. When queried, their colleagues admitted they feared reaching out to help or did not know what they could offer.

Negative self-image. Regardless of the stage in the suit, many experienced a sense of defeat (grief, sadness and anger). During the suit - and after - sued physicians sensed less self-confidence, lower self-esteem, and recurrent bouts of shame. When we analyzed their feelings, many related a "re-wounding of their self-esteem" from medical training.

Massive emotional impact. Most experienced anger, free-floating tension, increased negative moods, depression-

like fatigue, frustration and violated sleep (insomnia). Many reports suggest depressive disorders lasting longer than two weeks. This litigation depression occurred in people who previously had not reported depression. Feeling an assaultive anger seemed to be the most common recurrent sensation.

Anger syndromes. Many sued physicians, regardless of legal outcome, report anger clusters including unexpected anger outbursts, irritability (with seemingly slight provocation), frustration, and dull or negative affect, as well as physical symptoms. These included GI and chest pains mimicking MI symptoms.

Fatigue syndromes. Many report changes in concentration, decreased libido, appetite apathy, and exhaustion or fatigue clusters in many arenas.

Absence of symptoms. Some physicians report no symptoms. Little data is available on the characteristics of these "resilient" physicians. Further research is needed on this group, to determine whether there are "immunizing" factors (i.e., available peer support, shared disclosure by peers, previous claims, successful defense, etc.) which might offer protection from the MMS, or whether denial is the explanation for these outliers.

Results of medical malpractice stress

Changed practice styles. Many sued physicians report profound reluctance or even refusal to see plaintiff's family, patients with seemingly high litigation risk, or those with poor prognoses. Many report a loss of empathy for some or even most patients. Most report increased obsessiveness in recordkeeping, an increase in frequency of ordering tests, including invasive tests or those with low likelihood of affecting the diagnosis. Many physicians decrease their performance of certain procedures, especially those where their own sense of control over the procedure is minimal or removed.

Changed life plans. A sense of professional isolation carries over to all other relationships. The litigation process typically drags on for about four years. Each stage in the suit may take place after weeks or months of inactivity, bringing with it the feeling of vicarious re-traumatization. As physicians complain or shut down about the bitterness they feel, they can become estranged from their natural support network. Without checking out their assumptions, many feel their significant others (spouses AND long-term medical partners) cannot completely understand or empathize with the deep violations associated with a malpractice claim. Ruminating about the case can tend to cause the "target" physician to detach from family, community, and from contributing to strategic practice decisions and involvement.

Typical emotional reactions to a claim of medical malpractice

If you are sued, expect to:

- Be personally angry
- Feel disillusioned
- Magnify self-doubts; question your own competence
- Experience persistence of negative feelings
- Feel isolated, frustrated, and unjustly singled out
- Experience guilt even if your performance and professionalism were faultless
- Experience symptoms or episodes of illness or depressive affect
- Lose some ground in your practice, although rarely permanently

Don't expect:

- Compassion from colleagues, especially if they have not yet been sued
- Immediate understanding from family, friends, and partners
- Support from administrators, if insurance may be jeopardized or more parties brought into the case because of your defense

- A change of heart on the part of the plaintiff or plaintiff's attorney
- That your attorney will just handle the case with you taking a back seat

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