

EDITORIAL

COVID-19 pandemic and physicians in training

The coronavirus disease 2019 (COVID-19) pandemic is the defining global health crisis of our time and the greatest challenge we have faced since the World War II. While all members of the healthcare system and physicians have the most direct contact with patients, most of the residents and medical students are experiencing the greatest stress, both physically and mentally. There is now a responsibility on the part of educators to identify and address those harmful effects which could be accompanied by residents and medical students during this pandemic. High clinical loads create high work demands, chronic sleep deprivation, fatigue, and negative mood which increase the risk of serious medical errors. They are facing with emotional drain result of dealing with sick and dying patients. Surely, inadequately managed stress among medical students and residents could lead to emotional distress and depression. Previous data showed that the prevalence of distress and depression is estimated to be 28.8%, ranging from 20.9% to 43.2%.¹ Furthermore, it has been considered that 1.4% of medical students and 1% of all residents take educational leave annually according to various emotional explanations.² Prevalence of suicidal ideation was 11.1% with 3% suicidal attempt.^{2,3} Besides, previous studies have reported that the rate of illicit drug use in medical students of Aristotle University in Greece was 24.7%, 2% were under treatment for alcohol abusing, and 12% were psychiatrically hospitalized.^{2,4} Further international studies considering lifetime and recent use of illicit substances showed various percentages ranging from 5% in French medical collage to 25% in Brazil.^{4,5} Furthermore, drug addiction is more frequent among physicians when comparing with general population.⁶ This stressful environment, undiscovered aspects of the severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2), hardworking of physician, fear of encountering with SARS-CoV-2 during direct contact with patients, transmitting the disease to their family members, and even death in the pandemic of COVID-19 are factors that could have additive effect on physician's mental health. In addition, it is not clear how long this issue will continue and how it affects medical educational programs especially those who are in unrelated fields. Therefore, training courses may be lengthened notably for residents who ought to be a surgeon. Head and neck surgery and anesthesiologist residents are at higher risk of exposure and infection due to direct contact with droplets of the upper aerodigestive tract during diagnostic and therapeutic procedures. Thus, residents who are inexperienced are dealing with difficult and stressful situation.

So, it is important that educators and health leaders pay more attention to emotional issues and consider protective factors to minimize the effects of stressors during pandemic of COVID-19 on residents and medical students. Governments support, friends and family support, satisfying learning environments, programs encouraging relaxation skills, and mindful meditation could significantly reduce the level of physical and emotional stress. Empathic connection with patients contributes to work satisfaction and is valued by patients in their healthcare experiences which lead to further decrease of emotional stress by medical staff.

CONFLICT OF INTEREST

The authors declare no potential conflict of interest.

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