

### Sudden and early death among medical professionals: How to reverse this trend?

Dear Editor,

Sudden and early deaths have frequently been reported among medical professionals during the past few years.<sup>[1-3]</sup> Why are there so many sudden deaths happening among young and middle-aged doctors? One of the most important reasons is overwork, stress, lack of physical activity, and lack of regular health checkups. Young and middle-aged doctors are in a critical period of their family and professional career development. Not only do they hope to make breakthroughs in clinical services as well as academic research, but they also face pressure from patients and their families to deliver the perfect outcome. The escalation of contradictions between doctors and patients has also become an increasing mental burden in the practice of many medical professionals.

During the past few years, the sudden death of young ophthalmologists in India shocked the entire ophthalmic fraternity. Some of the ophthalmologists succumbed before age of 45 years. This indicates an alarming trend of the sudden death of doctors. What are the possible factors for sudden and premature death among ophthalmologists and other medical professionals? The reasons are multiple and closely associated with stress/burnout, a sedentary lifestyle, long working hours, visiting and operating in multiple hospitals, as well as economic and social factors. Middle-aged doctors have heavy familial responsibilities, such as paying the bank loan for medical/ophthalmic practice, supporting parents, rearing children, and making mortgage payments, which cause them to work harder (six to seven days a week for 10 to 12 hours) without any breaks. Deteriorated working environment, serious violence against doctors, and decreased patient-physician trust also intensified the sense of "stress/burnout" in doctors. Male medical professionals, especially in surgical sub-specialty and operative care, have larger overloads and longer working hours, which may be the primary cause of death. Besides, incorrect stress relief manners also affect doctors' healths, such as excessive alcohol consumption, smoking, and long-term energy drink consumption and lack of exercise, consumption of junk food, and obesity also increase the risk of acute myocardial infarction and stroke. Very busy medical professionals and high-volume ophthalmic surgeons usually neglect regular medical checkups themselves, which results in some potential diseases not being timely detected, such as diabetes, hypertension, coronary artery disease, hyperlipidemia, hyperuricemia, etc.

Cancer has figured prominently in the few studies as a causative agent for premature death among medical professionals.<sup>[4]</sup> However, a direct relationship between doctors' premature death and cancer needs to be examined more precisely through well-conducted studies. Theoretically, medical professionals are exposed to various occupational and environmental factors that may increase the risk of cancer. Doctors are a unique group of individuals who are routinely exposed to multiple carcinogens, such as ionizing radiation and

various chemicals. Exposure to high doses of diagnostic and therapeutic ionizing radiation is known to increase the incidence of various cancers, like those of the thyroid and the ovary. The high incidence of differentiated thyroid cancers among doctors specialized in various disciplines of radiology is testimony to this. Even young postgraduate students in the specialty are reported to be associated with a higher incidence of cancers. Besides radiation and chemicals, the other factor known to cause cancer among doctors is stress itself. Stress caused by a heavy workload, burnout syndrome, compassion fatigue, and chronic sleep deprivation may also contribute to cancer.

In addition to cardiac ailments, and cancer, suicide among Indian doctors is a concern and remains one of the important causes of sudden death among medical students/residents and young medical professionals. The medical profession is considered more stressful, but mental health is still a subject of taboo in the medical profession in the Indian context. Medical professionals have a higher suicide risk, 2.5 times more than the general population.<sup>[4,5]</sup>

Residents or busy medical professionals often ignore the early warning symptoms of disease and several doctors not only hide the serious disease but may not be fully sincere about the investigations, treatment, and follow-up. The image of invulnerability, of the doctor/medical professional as 'superhuman', is a cultural value in the medical profession. It's entrenched in the ways medical colleges and teaching hospitals organize the work of medicine. During the residency training, it's widely acknowledged that the hours are long and hard, that about half of trainees will suffer from burnout and 1 in 10 will think about suicide. But doctors are expected to cope with the work and other pressure and prove they are resilient enough to soldier on. In this kind of environment, disclosure of illness becomes an admission of weakness — a sign of being unfit to practice medicine. It's not surprising, then, that resident trainees and practicing medical professionals often ignore early warning symptoms of a potentially serious illness and often don't seek support for health problems. In a recent meta-analysis, 27 percent of medical students met the criteria for depression, yet less than 16 percent of those who were depressed sought treatment.<sup>[6]</sup> Doctors turn to alcohol and drugs to battle stress, burnout, and bullying as per recently published reports. Many such doctors were erased or suspended from the medical register by General Medical Council in the UK.

Every effort should be made to promote a healthy work-life balance, especially for residents-in-training and female doctors, busy medical professionals, and high-volume ophthalmologists. The important issues need to be addressed and the nobility of the profession must be restored where health care is not merely a commercial commodity and doctors are not moneymaking machines. Their compassion and empathy need to be preserved and their grievances are taken into consideration. Medical professionals overlook their health, and ignoring the early warning symptoms is the other primary reason behind premature death. Having greater knowledge and a better understanding of mental and physical health issues, doctors must not undermine their own well-being for the sake of their profession or other things. They will do no good to their patients if they are not taking adequate care of themselves first. This is why the phrase *heal thyself* is used by doctors frequently.<sup>[4]</sup>

We suggest that each and every ophthalmologist/medical professional should take responsibility for his/her own health. Medical professionals/ophthalmologists should regularly perform aerobic exercise or connect with families and friends for support, instead of excessive smoking and drinking. Besides, regular medical checkup (blood pressure, blood sugar, ECG, Echocardiography, etc.) is an effective approach to detect and decrease the risk of some potential diseases such as diabetes, coronary artery disease, hypertension, and stroke. Government, non-government organizations, medical/ophthalmic societies, and media should help to improve the working environment and re-establish doctor-patient trust, which may further decrease the sense of "stress/burnout" for doctors. A change of lifestyle and healthy work-life balance—adding yoga, exercise, and meditation to reduce stress, maintain quality eating, and maintain body weight—can save many young doctor/ophthalmologist lives.

### Financial support and sponsorship

Nil.

### Conflicts of interest

There are no conflicts of interest.

**Suresh K Pandey, Vidushi Sharma**

SuVi Eye Institute and Lasik Laser Center, Kota, Rajasthan, India

**Correspondence to:** Dr. Suresh K Pandey,  
Past President, Kota Division Ophthalmological Society (KDOS),  
Past Vice President, Indian Medical Association (IMA) KOTA,  
Director, SuVi Eye Institute and Lasik Laser Center, C 13 Talwandi,  
SuVi Eye Hospital Road, KOTA - 324 005, Rajasthan, India.  
E-mail: suresh.pandey@gmail.com

### References

1. Song XN, Shen J, Ling W, Ling HB, Huang YM, Zhu MH, *et al.* Sudden deaths among Chinese physicians. *Chin Med J (Engl)* 2015;128:3251–3.
2. Hoffer EP. America's health care system is broken: What went wrong and how we can fix it. Part 3: Hospitals and doctors. *Am J Med* 2019;132:907–11.
3. Shi X, Liu R. Sudden cardiac death in physicians: An alarming problem in China. *Anatol J Cardiol* 2018;19:158.
4. Pandey, Suresh K; Sharma, Vidushi. Doctor, heal thyself: Addressing the shorter life expectancy of doctors in India. *Indian J Ophthalmol* 2019;67:1248–50.
5. Kishor M, Chandran S, Vinay HR, Ram D. Suicide among Indian doctors. *Indian J Psychiatry* 2021;63:279–84.
6. Rotenstein LS, Ramos MA, Torre M, *et al.* Prevalence of Depression, Depressive Symptoms, and Suicidal Ideation Among Medical Students: A Systematic Review and Meta-Analysis. *JAMA* 2016;316:2214–2236. doi:10.1001/jama.2016.17324.

This is an open access journal, and articles are distributed under the terms of the Creative Commons Attribution-NonCommercial-ShareAlike 4.0 License, which allows others to remix, tweak, and build upon the work non-commercially, as long as appropriate credit is given and the new creations are licensed under the identical terms.

Access this article online	
<b>Quick Response Code:</b>	<b>Website:</b> <a href="https://journals.lww.com/ijo">https://journals.lww.com/ijo</a>
	<b>DOI:</b> 10.4103/IJO.IJO_3229_22

**Cite this article as:** Pandey SK, Sharma V. Sudden and early death among medical professionals: How to reverse this trend? *Indian J Ophthalmol* 2023;71:2286-7.

© 2023 Indian Journal of Ophthalmology | Published by Wolters Kluwer - Medknow