COMMENTARY

Becoming an emotionally intelligent physician

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Socrates

By the very nature of their work, physicians often have profound, moving, and sometimes disturbing experiences. These experiences have the potential to catalyze personal growth. But growth only occurs if physicians take time to reflect on the experience, process its implications for their personal and professional development, and initiate behavior change.

This provocative study by Kern and colleagues examines the issue of personal growth in physicians by analyzing the stories of a group of physicians affiliated with the American Academy on Physician and Patient. The study participants are not representative of all physicians; they were selected because of their particular interest in this area. But all physicians can relate to their stories that describe powerful experiences common to medical practice and to life. These are stories about medical errors, death and dying, and divorce, as well as less dramatic but equally powerful descriptions of their emotional reactions to patients and students.

While the stories may not be unique, the accompanying self-reflection and personal growth described by these physicians is extraordinary. Although the authors do not describe them as such, they are excellent case studies of emotional intelligence in medical practice.

Emotional intelligence is defined by Salovey and Mayer as: "The ability to perceive and express emotion, assimilate emotion in thought, understand and reason with emotion, and regulate emotion in the self and others." There is little discussion of emotional intelligence in medical practice and medical education, but it may be the key to the stories of personal growth Kern and coworkers describe. The core competencies involved in emotional intelligence are the perception of emotions (in self and others), the understanding of these emotions, and the

management of emotions. Perception of emotions requires that the physician be more "mindful" in the practice of medicine and in their daily life.² The mindful physician notes the sadness, fear, joy, anger, regret, and other emotions that inevitably arise in the day-to-day practice of medicine. Only by becoming aware of these emotions can the physician seek to understand and manage them in a way that will promote personal and professional growth.

Perception of emotions is necessary, but often not sufficient, to promote personal growth. These stories illustrate the need for a period of introspection, when the individual can reflect on the significant event and the emotions and behaviors it generates. Reflection promotes deeper understanding of oneself and of others. This understanding is a prerequisite to achieving personal growth, as seen in the skilled management of emotions in medical practice (such as the use of empathy) or in other personal growth outcomes that Kern and colleagues discuss.

Medical educators should look for ways to incorporate mindfulness in their curriculum, and practicing physicians must develop the capacity for mindfulness in their personal and professional lives.³ Likewise, time for reflection during training and practice is essential for promoting personal growth and preventing burnout. We must recruit individuals with a high level of emotional intelligence into medicine and then nurture these attributes during training and practice if we hope to promote personal growth and enhanced well-being for all physicians.⁴

References

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