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Retraction of "Prevalence and Predictors of Burnout Among Hospice and Palliative Care Professionals From 2016 Apr; 51(4):690–6"

Arif H. Kamal, MD, MHS, **Janet H. Bull, MD**, **Steven P. Wolf, MS**, **Keith M. Swetz, MD, MA**, **Tait D. Shanafelt, MD**, **Katherine Ast, MSW**, **Dio Kavalieratos, PhD**, **Christian T. Sinclair, MD**

Duke Center for Learning Health Care (A.H.K., S.P.W.), Duke Clinical Research Institute, Durham, North Carolina; Duke Cancer Institute (A.H.K.), Durham, North Carolina; Four Seasons Compassion for Life (J.H.B.), Flat Rock, North Carolina; University of Alabama – Birmingham (K.M.S.), Birmingham, Alabama; Mayo Clinic (T.D.S.), Rochester, Minnesota; American Academy of Hospice and Palliative Medicine (K.A.), Rosemont, Illinois; University of Pittsburgh (D.K.), Pittsburgh, Pennsylvania; and University of Kansas (C.T.S.), Kansas City, Kansas, USA

We wanted to bring to your attention a notable error in our publication from 2016.[1] In this publication, we report the findings of a field-wide survey of AAHPM members regarding burnout and related issues. We reported a burnout rate of 62% among survey participants, calculated using the Maslach Burnout Inventory-22 (MBI), a widely recognized standard for burnout measurement in health services field.

In the Fall of 2018, we conducted another burnout survey among several membership organizations in the National Coalition for Hospice and Palliative Care, using several survey components from the earlier study, including the MBI. In the course of performing the more recent analysis, we found a burnout rate much lower than what was reported in 2016.[2] Understanding that dramatic shifts in burnout prevalence are not often found, particularly across short time intervals, we re-ran our analysis from the 2016 manuscript.

In doing so, we found a critical error in how the MBI score was tabulated in the 2016 analysis. This resulted from an inadvertent error in the coding of the survey scores. Specifically, the MBI comprises 22 questions, with responses recorded on a seven-point Likert scale ranging from 0 to 6. However, the database for our earlier research stored the MBI responses as values between 1 and 7. This necessitated subtracting a value of 1 from all MBI items before scoring the questionnaire. This was not done and resulted in overestimation of the prevalence of burnout. To address this, we have submitted a revised manuscript and that revision has been accepted as a replacement for the original paper. Notably, our revised findings now include the following: 1) the prevalence of burnout in the cohort is lower (38.7%) than what was previously published and 2) there was no longer a significant difference in burnout comparing physicians (41.9%) and other palliative care clinicians/workers (37.1%) ($P = 0.17$) in the univariable analysis, although clinical role remained a significant predictor of burnout in the multivariable model.

We invite the *JPSM* readership to read the revised manuscript for further details on the methods to address the error and updated findings. We are sincerely regretful of our error and appreciate the ability to update our field on this important topic.

References

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