Wounded Healers

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Evidence points out that physicians in training who work for extended hours remain at great risk of injuring patients or themselves. Being motivated by the best intentions is not enough; they need to be given adequate rest. The time to regulate work hours is long overdue.

The disease burden in a fast developing nation like India is naturally enormous. With growing population, the need for more doctors is imperative. Since 1947 we have not been able to counter the load of patients turning out at outpatient departments and the number of doctors remains grossly insufficient to strike this balance.

Irrespective of popular governments, the percentage of gross domestic product spent on healthcare in India has never crossed 3%. The Government of Karnataka has recently passed a legislation to make it compulsory for government doctors to work in rural areas. This was justified to meet the shortage of doctors as well as a response to the refusal of junior doctors to work in rural areas.

Whether it is correct to expose junior doctors to resource-constraint settings and make the rural populace a party to social experimentation is a different issue. But with crumbling infrastructure, questionable security protection for doctors, especially for female doctors, and problematic pro-poor budgeting, India’s public health is, no doubt, in crisis. The working hours of postgraduate trainees and house surgeons call for a serious introspection, which has so far been neglected by the regulatory bodies.

Sleep Deprivation

Working hours of postgraduate trainees and house surgeons are not regulated in India and those working in government hospitals are the worst hit. Poor pay, fewer leaves and inadequate staff comprise the story of India’s government hospitals. Senior doctors do not get the salary hike they rightfully deserve and many of them work hard to earn their living. In times of recession and rising inflation, it naturally becomes difficult for them to even consider family priorities peaceably. Long hours of work haunt them.
Postgraduate trainees from different branches of medical science disciplines across different medical colleges and hospitals are made to work for about 36–72 hours. That is a violation of human rights. Sleep researchers clearly advocate six–eight hours of sleep for an adolescent person. On the contrary, doctors are deprived of sleep, their conscience muted. Eirch Segal used the term “wounded healers” for doctors in his novel titled *Doctors* (1988).

Veasey et al (2002) suggest that sleep loss and fatigue result in neurobehavioural impairment in healthy young adults. Compromised sleep as a result of long working hours is an important concern that needs to be seriously addressed. Surgical skills of house surgeons may be affected negatively by sleep loss. A study by Goldman et al (1972) compared videotapes of surgeries performed by residents posted in a surgical department after less than two hours of sleep with videotapes of same residents who performed surgeries after longer sleep hours. In this study, the authors tried to come up with what they termed operative inefficiency. They found that four of the five residents who had slept little required 30% more surgical time compared to those who had slept long hours. Sleep deprivation resulted in poorly planned manoeuvres which had a bearing on the time taken to perform surgery.

**Preventable Errors**

A study by Barger et al (2005) published in *The New England Journal of Medicine* found that the risk of motor vehicle crash doubles after 24 hours of work. Landrigan et al (2004) in their study point out that physicians in training make 36% more serious medical errors than those who work for 16 hours and also end up making five times more serious errors while diagnosing the patients. Looking at a perspective beyond decreased sleep, the residents have to compromise the time they give to patients and the time to explain the patient’s condition to her/his relatives. Young residents who end up working for longer durations sleep about two hours less than the average daily estimate, which guarantees a chronic build-up of sleep pressure (Baldwin and Daugherty 2004; Landrigan et al 2004; Rosen et al 2006).

In India, it is time to give attention to this matter. Postgraduate trainees and interns are compelled to work for more than 24 hours in India. It should be strictly restricted to not more than an average duty day. A regulation of this nature is urgently required in India where duty time is defined. An open debate should be conducted on “duty time”; we should discuss who should define the duty hours, keeping in mind the essential sleep time, the manner in which patient load can be addressed and appropriate post-duty leave should be given to all. Human rights watchdogs should advocate this cause for the rightful attention it deserves.

Many medical college hospitals expect their unit on duty to look after the casualty also and the entire hospital during the night which puts extreme stress on the minds of doctors. The Joint Commission on Accreditation of Healthcare Organisations had brought out a report on “Effects of Health Care Provider Work Hours and Sleep Deprivation on Safety and Performance” (Lockley et al 2007) where the weight of evidence pointedly suggested that extended work hours hijack performance levels and increase fatigue. The probability of making errors while working overtime is very high. Evidence has pointed out that physicians in training who work for extended hours remain at great risk of injuring the patients or themselves. The time to regulate work hours is long overdue.

**REFERENCES**


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