# Job Stress Contributes To Higher Rates Of Doctor Suicide

ANN ARBOR, Mich. — Doctors who commit suicide appear to be under-treated for mental health problems, despite their seemingly good access to healthcare, a new University of Michigan study shows.

Although more physicians than non-physicians in the study had known mental health problems prior to suicide, this didn't translate into a higher rate of antidepressant use, according to the study, which appears in General Hospital Psychiatry and provides a deeper look at why physicians may have a higher-than-average suicide rate.

Major depression is a known risk factor for suicide, particularly for female physicians.

Stigma, lack of confidentiality, and desire to self-treat may explain why physicians don't seek formal treatment for mental health problems, says lead author Katherine J. Gold, M.D., M.S.W., M.S., assistant professor of family medicine and of obstetrics and gynecology at the University of Michigan Medical School.

The study found that physicians who committed suicide were much more likely to have potentially lethal prescription medications in their system – but not medication prescribed for depression.

"Even though this population presumably has very good access to health care, it doesn't appear that they're getting adequate treatment," Gold says. "I think stigma about mental health is a huge part of the story. There is a belief that physicians should be able to avoid depression or just 'get over it' by themselves."

Other findings:

- There was a difference in methods for suicide. Firearms were the No. 1 method for both groups. The No. 2 method for physicians was an overdose, likely related to the physicians' knowledge of lethal drug dosing and prescribing ability.
- On-the-job stress could also be a bigger suicide risk factor for physicians, according to the study. A physician who commits suicide is far less likely to have had a recent death of a friend or family member or a crisis contribute to the suicide but much more likely to have a job problem contribute. Gold says this finding suggests that a physician's identity is strongly linked to the job role and physicians may be particularly vulnerable to problems at work.

The U-M study follows up work from another U-M Family Medicine study that

addressed risk factors for stress and burnout among medical students.

"This paints a more detailed picture of external events and risk factors in a physician's life before a suicide, rather than just looking at a death certificate," Gold says.

"We've seen a number of studies now that show a high rate of anxiety, depression and burnout among both medical students and physicians but we haven't done very much to develop programs to reduce or treat these risk factors and to increase mental health-seeking among physicians," Gold adds.

"There needs to be greater effort to address the stigma, under-diagnosis and treatment of depression among physicians and understand how we can reduce the stress related to work. We need to make mental health treatment more available, safe and confidential."

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