

Mental Health: What residents can do before a clinical surge at their institution

Introduction The following techniques are drawn from the fields of psychology and psychiatry, but also the peer support literature, literature relating to support for first responders to mass casualty events, and importantly from decades of work in the military and VA system on the prevention and management of PTSD. It is also informed by residents and those who support them- chief residents, faculty, program directors, mental health providers, and chief wellness officers.

People are feeling a huge amount of worry, anxiety, and fear so if you are feeling this, you are not alone with these feelings. I'm not here to talk you out of these feelings; rather, I'm here to help you reframe them into narratives that are accurate, but still helpful to you. These tools are easy to learn, take little time to use, and diverse enough that you can choose which ones resonate with you the most. The tools can be grouped into two main categories: how to manage the thoughts and feelings you and your colleagues may be experiencing, and how to use self-calming techniques.

Managing your thoughts and feelings Very useful approaches to this are foundational principles for Cognitive Behavioral Therapy (CBT). We tend to go through life feeling that adverse event equals outcome, and it isn't true. Adverse event doesn't equal outcome: it's adverse event plus one's cognitive and emotional reaction that produces the personal outcome. A key principle here is that the goal is not to *eliminate* thoughts and worries. Rather, it's to hold them gently-- to work with them so they will cause you less suffering and harm.

I'm worried that I will get infected and get sick and die. I'm married and have young kids and I am extremely worried that I will get sick and bring the virus home and they will get sick and could die. These are completely understandable fears to have and may feel terrifying. In thinking about it, the question is if you can manage in a way that is not so distressful. One way of thinking: yes, this is a reality that is possible, but how likely are certain outcomes? Even though you may face a relatively high risk of getting the infection, it is very likely that you will recover. The vast majority of childhood illnesses and young adult illnesses do not result in severe illness-- so even if you or they get it, the great, great likelihood is that you will recover and your family members will. In reports out of China, the mortality rate for those less than 40 was 0.2%, and there were no deaths in children less than 10. Some are now becoming suspicious about the number from China, but from early reports of US cases, mortality rate for those under 40 is under 1% as well, and may be substantially lower than that because of the prevalence of asymptomatic infections and the lack of early wide-spread testing here. Also, the total number of cases worldwide has passed one million and the total deaths of children appear to be in the single digits. In addition to managing these fears, you also want to try to move to the strategic. What can you control? Do everything you can to reduce the risk that you and they will get infected. Be vigilant about protecting yourself. Change of clothes, serious handwash before you leave the hospital, handwash when you get home.

Worry or fear that you will not be up to the challenge of taking care of critically ill patients. For those in primary care fields, emergency medicine, and critical care fields: you are prepared; you are capable; you are some of the most highly trained people on the planet. For those in non-primary care fields who worry that they will be assigned to a Pulmonary or Critical Care ICU and won't have the knowledge and skill to perform well. How can you think about that? One, they can't and don't expect you to perform at a level of an ICU fellow-- and you shouldn't either. And two, hopefully, and almost certainly, someone with more experience will be there to help you. And what you have to realize is that your efforts may not be enough-- not because of any inadequacy on your part, but rather because of the circumstances you've been dealt. So, it's imperative you find a place of trust in yourself and have faith.

Worry about the potential negative impact on one's own mental health. The incidence of PTSD in veterans of the Iraq war is estimated to be 11-20%, so most soldiers don't experience lasting PTSD, and it appears that post-traumatic growth is actually *more common*. In one study, 72% of veterans endorsed a significant degree of growth in at least one area. The two most common areas were feeling changing priorities about

what is important in life and being better able to appreciate each day. As you are feeling stress and worry, you may also already feel some growth.

These approaches of managing your thoughts and feelings can also help you choose your own attitude and response in the face of frustrations that will arise. As nerves get frayed, people will likely get more edgy. Do everything you can to deescalate rather than escalate. Try not to live in anger and frustration with things you can't change. When others are cranky, you have the power to choose your own attitude; it's difficult, but recognize when you are feeling this and try to tamp down and react with grace.

Self-calming techniques A self-calming technique that has been proven effective in the military is called tactical breathing. Here's how it works:

Relax yourself by taking **4 breaths** as described below. If you want, try to **Visualize** each number as you count.

- Breathe in counting 1, 2, 3, 4
- Stop and hold your breath counting 1, 2, 3, 4 Exhale counting 1, 2, 3, 4
- Repeat the breathing
- Breathe in counting 1, 2, 3, 4
- Pause and hold your breath counting 1, 2, 3, 4
- Exhale counting 1, 2, 3, 4

You can practice this a number of times a day for just a minute or so. Then when you are feeling really stressed, either before or during a surge, you can do it-- even for a few breath cycles, to calm your amygdala.

Other tips to reduce activation of your limbic system: Avoid excessive consumption of news and social media. A study after the Boston Marathon bombing found that those who had heavy consumption of media in the week following the bombing led to higher acute stress levels than witnessing the bombing itself.

This last strategy is drawn from peer support, and specifically from Dr. Jo Shapiro who has developed highly successful peer support programs. At the end of her trainings, she says that if you forget *all of the skills* that she taught, remember this: when you work with others in pain or distress, the most important thing you can give them is your loving presence. You can't fix your colleagues' pain and you shouldn't try to. In doing so, you risk minimizing the pain they are feeling. Instead, use empathic listening and lean into the discomfort you may feel yourself. When listening, reflect back what you have heard and validate their worries and feelings. Then, and only then, can you try to move to a place of helping the person try to reframe their thinking where you can give alternatives to the way they are processing the experience.

And you must also try to extend that same love to yourself. As physicians, we tend to beat up on ourselves; try to find a little bit of the compassion that you show to others and direct it toward yourself.

This one may be hard to do, but in the face of the stress and trauma, notice the good, the beautiful, the moments of grace and compassion and love that are almost certainly there right now.

Very importantly, if you are struggling deeply and these things seem too difficult to use, reach out to your program director, to chief residents, to mental health providers to help you, and don't feel shame in doing so.

Finally, know you are appreciated and loved. Try to find deep meaning in your work that can help sustain you in the face of extreme adversity. Viktor Frankl, a Holocaust survivor, said the following, "There is nothing in the world, I venture to say, that would so effectively help one to survive even the worst conditions as the knowledge that there is a meaning in one's life. There is much wisdom in the words of Nietzsche, 'He who has a why to live for can bear almost any how'". So, try to find that why, feel that why, hold it close and it will help sustain you.

My best to each and every one of you.

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