Medical Malpractice Stress Management: A Necessary Skill for Practicing Physicians
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We have learned of several suicides by physicians over the past two years relating directly or indirectly to litigation. It is highly likely that there have been others.

Why are allegations of malpractice so uniquely stressful to physicians?

Because the tactics employed by both sides, and indeed the judicial process itself, are uniquely designed to pressure defendants to settle cases. And settling a case of alleged malpractice is a body blow to a professional who has spent a lifetime dedicated to helping others. We are prepared to FIGHT in order to triumph over disease. But litigation is a different animal, one which is completely alien to us as physicians. It sometimes requires fighting for our OWN survival, against, rather than with a patient.

Almost all physicians are by nature perfectionists, compulsive, and self-neglecting. We chose this profession because we are action oriented, take-charge types, who want to be appreciated for making a positive impact on people's lives in their most vulnerable moments.

A charge of negligence strikes at the core of our self image, our self esteem, and at our beliefs about the value of our life's work. Adding insult to injury, a legal claim forces us to defend ourselves in a system in which we have little to no control, where processes are painfully slow and where the results may bear little relation to our efforts, yet can potentially have a permanent impact on our ability to practice.

Regardless of the eventual outcome, sued physicians almost always have physical and/or emotional reactions to the claim. Common emotional reactions include shock, denial, anger, anxiety, frustration, and shame. Physical reactions can include fatigue, difficulties concentrating, insomnia, onset of or recurrence of symptoms such as ulcer symptoms or chest pain, free floating anxiety or full blown depressive disorders.

Compounding the bodily reactions is a tendency towards isolation caused by the shame of being charged with malfeasance. Naturally reluctant to share feelings with others or to seek help for themselves, sued physicians often attempt to handle the massive emotional and physical symptoms by ignoring them and working harder at being perfect.

We would never recommend this strategy to a patient undergoing major stress, but of course our judgment is compromised by our own lack of objectivity in analyzing what is actually happening to us in the moment.

Here is a more effective strategy.
Take a look at all of the articles available at MDMentor.com, especially the excellent document, "So, You Have been Sued" (SYHBS) from the Medical Legal Committee of ACEP. Some articles will be of use to you, others perhaps to your spouse or partners.

Attend first to your defense:
Notify your carrier and Risk Manager so that appropriate steps can be initiated such as sequestering the records and obtaining counsel for you.

Collect copies of all of the available records, and write down as much of the unwritten detail as you can in a document that is clearly labeled "attorney correspondence" (Obviously, don't change anything in the medical record, NO MATTER WHAT!) and take this to your first visit with your attorney.

Interview your attorney as soon as one is assigned to make sure that they are competent to represent you, and that they know you intend to be an active participant in the process. SYHBS and other available resources on how to take an active approach, including techniques for dealing with deposition, trial, and the verdict are available, some of them online at www.mdmentor.com and www.physicianlitigationstress.com.

Share with your significant other the fact that you have been sued, and that you cannot discuss any details about the case until and unless cleared by your attorney. If you are experiencing any symptoms of malpractice stress (you can test yourself at MDMentor), consider the need for supportive intervention.

Find out if your group practice, hospital or state medical society has resources for litigation support such as an Employee Assistance Program, Wellness committee or support group. ACEP has an informal litigation peer support network through the Practice Management department for an initial step. Seek out other sources of support, such as a trusted professional counselor, trial coach, or personal legal counsel. There is practically no stressor which is more significant in the life of a physician than malpractice litigation, and no better time to seek out well deserved assistance in dealing with it.

No matter how effective a healer, you are a PHYSICIAN, not a MAGICIAN, and you cannot just make this go away. Like learning a new medical procedure, seek out the assistance that is available to deal with litigation. It might even save a life---yours.

Make a list of your accomplishments and successes in life, and refer to them often to counterbalance the allegations that will be made about the deficiencies in your care. As you read over this list (which you should do frequently), remind yourself that THIS document is a true indicator of your worth, while every document involving the malpractice case is instead a strategic attempt to gain money, NOT a valid commentary on your life or your work.

Schedule time for more exercise, family activities, or creative endeavors completely unrelated to medicine or to the case, such as a class in aikido, photography or cooking.
Investing THIS time will actually afford you more energy and time for the rigorous task of participating in your defense.

Prepare for the long haul. Four years is the average time required for a case to wend its way through the courts in most states. Anticipate that there will be fits and starts of activity, over which you have no control. Learn to be flexible in dealing with them, since there is no other option! Trust that the situation will end.

Remember that malpractice litigation is now a completely predictable event in the career of any practicing physician. Use it as an opportunity to learn and practice exemplary care for yourself in time of crisis, and you will become a stronger person, a better doctor, and a model for colleagues who will follow in your footsteps.