

10 FACTS ABOUT PHYSICIAN SUICIDE AND MENTAL HEALTH

1. Suicide generally is caused by the convergence of multiple risk factors — the most common being untreated or inadequately managed mental health conditions.
2. An estimated 300 physicians die by suicide in the U.S. per year.¹
3. Physicians who took their lives were less likely to be receiving mental health treatment compared with nonphysicians who took their lives even though depression was found to be a significant risk factor at approximately the same rate in both groups.²
4. The suicide rate among male physicians is 1.41 times higher than the general male population. And among female physicians, the relative risk is even more pronounced — 2.27 times greater than the general female population.³
5. Suicide is the second-leading cause of death in the 24–34 age range (Accidents are the first).⁴
6. Twenty-eight percent of residents experience a major depressive episode during training versus 7–8 percent of similarly aged individuals in the U.S. general population.⁵
7. Among physicians, risk for suicide increases when mental health conditions go unaddressed, and self-medication occurs as a way to address anxiety, insomnia or other distressing symptoms. Although self-medicating, mainly with prescription medications, may reduce some symptoms, the underlying health problem is not effectively treated. This can lead to a tragic outcome.
8. In one study, 23 percent of interns had suicidal thoughts. However, among those interns who completed four sessions of web-based cognitive behavior therapy, suicidal ideation decreased by nearly 50 percent.⁶
9. Drivers of burnout include workload, work inefficiency, lack of autonomy and meaning in work, and work-home conflict.
10. Unaddressed mental health conditions, in the long run, are more likely to have a negative impact on a physician's professional reputation and practice than reaching out for help early.

SOURCES

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