Predictors of Physicians’ Discontent

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Physicians’ attitudes toward changes in the United States health care system are important factors in determining their content or discontent with their profession. In a recent study of practicing physicians, only 18 percent indicated that they held a positive view of the changes in the health care system. Similar results were found in a study of fourth year medical students. These findings suggest that a considerable number of physicians and medical students are concerned about the changes in the health care system. Physicians’ negative perceptions of changes in the health care system can lead to job stress, discontent with the profession, and patient dissatisfaction.

Given the substantial number of physicians who are disenchanted with the health care delivery environment characterized by the expansion of managed care, it is timely and important to investigate factors that can predict physicians’ discontent with medical practice.

Participants in this study were 401 generalist physicians (343 men, 56 women, 2 unspecified gender) who were practicing internal medicine (n=200), family medicine (n=146), or general practice (n=55). They were in practice for at least five years, and were younger than 65 years (mean age=46, range=30-64 years). A structured interview was conducted (using a random digit dialing technique) in which questions were asked addressing a variety of issues related to patient-physician relationships and physicians’ views of the evolving changes in the United States health care system.

Physicians’ negative response to the question, “If you had the opportunity to do things all over again, would you still choose to become a doctor?” was considered as an indicator of their discontent with medicine.

Of the interviewed physicians, 288 (72%) indicated that they would choose medicine again, 91 (23%) would not choose medicine again, and 22 (5%) were not sure. In a stepwise logistic regression model controlled for gender and age, three variables were found to significantly predict physicians’ discontent. Those who would not choose medicine again were more than twice as likely (odds ratio=2.1, p=.01) as those who would choose medicine again to believe that the health care environment will deteriorate more in the near future. These discontented physicians were less than half as likely as their contented counterparts to agree that doctors nowadays share more responsibility with a health care team (odds ratio=.42, p=.01) and to confirm that patients understand their health insurance better than before (odds ratio=.46, p=.01).

These findings are important because physician discontent has an impact on patient care. The underlying reasons for the link between satisfaction of physicians and their patients deserve further empirical scrutiny. Do the dissatisfied physicians practice more defensive medicine? Do they communicate differently with their patients? To what extent can physicians’ perceptions of the practice environment influence the quality of care rendered to their patients? Understanding factors that have impact on physicians’ discontent can help in improving the quality of professional and personal life of the physician, as well as the quality of care rendered.
to the patients, and hopefully increase patients’ satisfaction and their compliance behavior.

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References


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