Enhancing Clinicians’ Well-Being and Patient-Centered Care Through Mindfulness
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Background: We pilot tested novel methods i.e. independent ratings of clinicians following Mindfulness-Based Stress Reduction (MBSR) to determine if they were feasible and acceptable to clinicians and patients.

Objectives: A decade of research at McGill Programs in Whole Person Care resulted in self-reported positive outcomes for clinicians following a Mindful Medical Practice course. The Paris extension study addressed two questions: Do clinicians relate better to their patients following a mindfulness course? If so, what changes in clinicians explain improved patient-centered care?

Methods: In a longitudinal study of 25 clinicians (MDs and allied health care professionals), MBSR was taught by a certified instructor. Pre- and post-MBSR online questionnaires assessed: burnout, depression, stress, meaningfulness, and mindfulness. Patients independently rated their clinicians using the Rochester Communication Rating Scale (RCRS) following a consultation before and after their clinician took the MBSR course. Nine medical doctors audio-recorded consultations pre- and post-MBSR; the audiotapes were coded and analyzed by an independent team using the Roter Interaction Analyses System.

Results: Consistent with outcomes in Montreal, significant reductions in stress, depression, and burnout were found, as well as increases in mindfulness and meaningfulness, in Paris. Decreases in stress were correlated with less judgmental attitudes and less reactivity – two facets of mindfulness. Decreases in emotional exhaustion were correlated with more acting with awareness and less judgmental attitudes – two facets of mindfulness. Patients’ perceptions of the clinical encounter showed significant increases in: “interest in patient as a person”; “understanding the patient’s experience”; “attention to context” post-MBSR. Decreased depersonalization (clinician report) was significantly associated with the RCRS subscale (patient report), “understanding of the patient’s experience of illness” (rho = -.66, p = .005). Audiotape data suggested that doctors spoke with more encouragement, agreed more; their patients, in turn, spoke more post-MBSR. Both time periods reflected patient-oriented care.

Discussion: While going beyond self-report requires extra training and incurs considerable costs, it is worth the endeavor. Patients willingly completed forms. Employing an experienced team for rating audiotapes was feasible and acceptable to clinicians.

Conclusions: Mindfulness has a direct and positive impact on clinicians’ well-being. When clinicians experienced less depersonalization their patients reported being better understood.