

RE: Prevalence of Burnout of Residents in Oman Medical Specialty Board: A Cross-Sectional Study in Oman

Sir,

We have read with interest the article by Al Subhi *et al.* entitled, "Prevalence of Burnout of Residents in Oman Medical Specialty Board: A Cross-Sectional Study in Oman."^[1] The original publication of the Maslach Burnout Inventory (MBI) was developed in 1981 as a research tool aiming to assess the individual occupational burnout. Since then, five validated forms have been developed to determine the burnout for different groups of participants. One of these five forms is a specific form that was validated for the use of medical professions called MBI-Human Services Survey (MBI-HSS) for Medical Professionals.^[2] It is not clear from the study by Al Subhi *et al.*, whether this specific form was used or not.

Moreover, the cutoff score of what constitutes a burnout among healthcare professionals was found to be variable. A systematic review showed a significant variation in the cutoff scores used to define the burnout among 41 studies.^[3] The multifactorial dimensions of burnout warrant a careful and specific approach. For example, Al Mutair *et al.* looked at the validity and reliability of the MBI-HSS model for evaluating burnout levels among healthcare professionals in the Arab Gulf Cooperation Council countries.^[4] Their study showed the need to revise the tools for this region, and a revised tool was created and validated on a new cohort. The latest version showed a more satisfactory fit for this region.

Despite the above limitation, which may have affected the study results, this study of Al Subhi *et al.* provides a good insight into an issue that is, not infrequently, overlooked in medical schools and residency programs. This study allows us to dig further into the issue of burnout and explore its root causes and ramifications. Therefore, in addition to the authors' recommendations, we would like to make further recommendations for emergency medicine program, in particular.

First, we recommend an institutional approach, in comparison to an individual- or program-specific approach, to foster the well-being of residents. Promoting well-being includes empowering residents with soft skills that help them not only coping with stressors but also boosting their overall well-being. These skills include communication, self-management, and resilience skills. Mari *et al.* published a step-by-step approach toward developing a resident-led wellness program where residents identified their potential source of stress and a program was created specifically to address these causes.^[5] This program has led to a significant reduction in the burnout rate among psychiatric residents.

Second, residents must have readily accessible professional well-being support services. These services should include psychological, social, as well as personal help and support. Self-support groups can also be initiated within training bodies. Third, we need further qualitative exploration of the root causes

of burnout among residents. Focus group studies conducted by a third party not involved in the program management might be ideal for this purpose. The findings of these studies will help guide further actions and planning. We should always remember that investing in our residents is investing in the future of healthcare in the region.

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Conflicts of interest

There are no conflicts of interest.

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REFERENCES

1. Al Subhi AA, Al Lawati HA, Shafiq MO, Al Kindi SS, Al Subhi MA, Al Jahwari AS. Prevalence of burnout of residents in Oman medical specialty board: A cross-sectional study in Oman. *J Musculoskelet Surg Res* 2020;4:136.
2. Maslach C, Jackson SE, Leiter MP, Schaufeli WB, Schwab RL. *Maslach Burnout Inventory Manual*. Menlo Park: Mind Garden; 2016.
3. Doulougeri K, Georganta K, Montgomery A. "Diagnosing" burnout among healthcare professionals: Can we find consensus? *Cogent Med* 2016;3:1237605.
4. Al Mutair A, Al Mutairi A, Chagla H, Alawam K, Alsalmán K, Ali A. Examining and adapting the psychometric properties of the Maslach burnout inventory-health services survey (MBI-HSS) among healthcare professionals. *Appl Sci* 2020;10:1890.
5. Mari S, Meyen R, Kim B. Resident-led organizational initiatives to reduce burnout and improve wellness. *BMC Med Educ* 2019;19:437.

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