Doctors' Stress in the Emergency Departments

In *Mustansiriya Medical Journal*, Tamara Abdulzahra *et al*.[1] present the interesting subject of doctors' stress in the emergency departments (EDs), which sheds light on the burden experienced by doctors working in the emergency units, who are exposed to high level of stress in their work. Iraqi doctors are currently facing numerous challenges, including a lack of medical and support staff, insufficient medications and medical supplies, and ongoing security instability in the country, which has led to increasingly aggressive behavior from patients and their families. These factors collectively add to the workload, resulting in heightened stress and anxiety among healthcare professionals. This situation is particularly concerning as many of the doctors in emergency units are junior practitioners with limited experience and, at times, short tempers. Such conditions may significantly contribute to the rising incidence of violence against medical staff, ultimately impacting their performance, and have led to a high prevalence of anxiety and depression among Iraqi physicians, especially junior doctors.[1,2]

The results of this study indicated that nearly three-quarters of the participants experienced moderate stress levels, while 11.5% reported high perceived stress, with gender and job level identified as the primary risk factors. Notably, male doctors and board candidates demonstrated higher stress levels.

The findings of the study are significant as they establish a baseline understanding of the conditions in emergency units; these units are critical for providing life-saving services during both conflict and peacetime. The high incidence of trauma in low- and middle-income countries underscores the necessity for improved emergency care to reduce associated mortality and morbidity. Unfortunately, these nations often lack the proper planning, organization, trained personnel, and resources needed to effectively assess and treat emergency situations. EDs are essential to public health, offering access to care for all patients, irrespective of their ability to pay. However, the COVID-19 pandemic in 2020 disrupted multiple aspects of the healthcare system, diminishing access to medical services even in urgent cases.[3,4]

In Iraq, the healthcare system continues to struggle to recover after decades of conflict and sanctions. A significant number of skilled health workers and young graduates have emigrated to regional or Western countries to escape the risk of overwhelming violence. Despite extensive rebuilding efforts, the health system and its infrastructure are still faltering. According to the 2020 annual statistical report from the Iraqi Ministry of Health, there were 8,695,182 visits to emergency units (with 1,266,432 in Baghdad alone), resulting in an ED bed ratio of 1.3 per 1000 population.[5]

A 2017 study noted that one hospital's ED received an average of 20,000 patients per month (approximately 700 patients per day). This high volume can be attributed to various factors, including inadequate healthcare services in the outpatient clinics and health centers, limited equipment availability, staffing shortages, increasing accident rates, and a greater disease burden, compounded by the fact that primary healthcare centers often close in the afternoons, leading patients to seek care in the ED where they believe they will receive more advanced treatment.[6] This overload creates an additional burden on the medical staff, urging them to work longer hours, and contributing, indirectly or indirectly, to the increasing stress.

The primary takeaway from this study is the urgent need for concerted efforts to enhance the standards of EDs and to raise public awareness about the appropriate use of these services, rather than relying on them as the primary source of care. This shift could help alleviate the workload on doctors and, consequently, reduce their stress levels. Addressing this escalating challenge requires practical planning, the implementation of new strategies and skills to continuously assess and analyze the situation, and the development of effective control measures.

Additionally, further research with comprehensive analysis and ongoing monitoring is necessary to gain a complete understanding of the situation. The findings could serve as a reliable and sensitive indicator of the challenges faced by doctors in emergency units, which may contribute to elevated stress levels that ultimately impact their ability to provide critical and sensitive care to patients.

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