

Dear Resident Doctors,

Welcome back to another post from *Everything Wellbeing* =

🔥 Let's Talk About Burnout

Today, I want to talk about something that affects so many of us: **burnout**. While researching the topic, I came across some interesting data that I think you'll find useful. It might get a little technical but stick with me it's worth it!

The **GMC 2024 National Training Survey** shows that *over a fifth of trainees* are at **high risk of burnout**, and **over half** describe their work as emotionally exhausting to a high or very high degree. Unsurprisingly, Emergency Medicine, my speciality, tops the list, with **32% of trainees** reporting high burnout risk.

And it's not just trainees. The same survey suggests that *half of all trainers* are at high or moderate risk of burnout.

💰 The Hidden Cost of Burnout

Beyond its personal toll, burnout has a massive financial impact on the healthcare system. A rapid evidence review by the **International Public Policy Observatory (IPPO)** estimated that poor mental health and well-being cost the NHS **£12.1 billion annually**. That includes:

- £6.07 billion from presenteeism
- £3.79 billion from staff absences
- £2.24 billion from reliance on bank and agency staff¹

The **Royal College of Emergency Medicine (RCEM)** and the **University of Bath** also recently published a study highlighting how burnout is threatening the safe delivery of emergency care. (*I've linked the full report—it's worth a read.*)

❓ So, What Is Burnout?


We throw the term around a lot, but what does it really mean?

The **World Health Organization** defines burnout as:

“A syndrome conceptualised as resulting from chronic workplace stress that has not been successfully managed. It is characterised by three dimensions:

- Feelings of energy depletion or exhaustion

- Increased mental distance from one's job, or feelings of negativism or cynicism
- Reduced professional efficacy”

 *Important note:* Burnout refers *specifically* to workplace stress. It's not a catch-all term for general life stress.

My Story: Falling Into, and Then Choosing, Emergency Medicine

This isn't new. Almost every day when I start a shift, I hear colleagues say they're exhausted—and most of the time, I just nod and say, “Me too.”

More and more residents are considering leaving the profession because it's becoming too much. And I'll be honest—I've felt that way too at times.

Medicine wasn't even my first choice. Like many from South Asian families, it was more or less decided for me. Emergency Medicine wasn't planned either—I ended up in it because it was the only specialty hiring when I first applied to the NHS.




But through a series of rotations and fellowships, I discovered I actually loved it—the chaos, the leadership, the high-stakes decision-making. It gave me purpose.

So why was I feeling burnt out?

Why Burnout Happens

Looking around, I saw the same story everywhere: brilliant, motivated people who were now feeling exhausted, disillusioned, and unsure if it was all worth it.

Some key reasons I've noticed:

-  **Overstretched systems:** Increasing patient loads, limited resources, and moral injury when we can't deliver the care we want to.
 -  **Post-pandemic trauma:** COVID left emotional scars that are still healing.
 -  **Relentless training pressures:** CV-building, portfolio demands, and competition for jobs.
-

The Million-Dollar Question: How Do We Fix It?

Here's the truth: I don't know.

I've been trying to find the answer myself. I've read a lot, talked to colleagues, and done some deep reflection. And while I don't have all the answers, I do know this:

Burnout is real. And it's serious.






Until we acknowledge that, we can't fix it.

When I took on this wellbeing fellowship, some colleagues didn't really understand why. Some even hinted it was a "soft" choice. That speaks volumes. We're so good at planning for exams, audits, and training, but we don't give the same effort to looking after ourselves.

What If the Answer Is... Well-being?

I know it sounds cheesy—but maybe the answer to burnout *is* well-being.

To me, well-being means doing the basics right:

-  Eat properly
-  Sleep enough
-  Move your body
-  Stay connected
-  Care for your mental health

Simple? Yes. Easy to stick to? Not at all—especially in our line of work.


But I truly believe that if we want to keep doing what we love—and do it well—we need to *intentionally* prioritise our well-being.

Final Thoughts

I got into Emergency Medicine for reasons that might not make sense to everyone. I thrive in chaos, intensity, and leadership. I love that my work has meaning. And I want to keep doing it—and enjoying it—for years to come.

But to do that, I've realised I need balance. And I'm still figuring out what that looks like.

I hope this blog gives you a little nudge to think about your own well-being too. Maybe start treating it like the essential part of your job that it truly is.

 You're all doing amazing work—even if it doesn't always feel that way.

That's it from me for now. I really hope you found this post helpful—or at the very least, not boring!

In the next few blogs, I'll be sharing some practical tips on:

- 🌙 Rest and recovery
- 🌃 Handling night shifts
- 😊 Boosting team morale

As always, thank you for reading and for everything you do.

💙 Take care of yourself—so you can keep taking care of others.

Warm regards,

Junaid

Your Friendly Neighbourhood Wellbeing Fellow

Resources

1. 📄 [GMC Training Survey 2024](#)
2. 📄 [RCEM Burnout & Retention Report](#)
3. 🎥 [YouTube – Laurie Santos on Burnout](#)
4. 📄 [BMA Article on Burnout](#)
5. 📄 [IPPO Report – Economic Cost of Poor Wellbeing](#)