ACGME Feels Heat on Work Hours Restrictions

BY ALICIA AULT

A new advocacy coalition is putting pressure on the Accreditation Council for Graduate Medical Education to speed up its process of developing new recommendations on work hour restrictions for residents, and to closely follow the Institute of Medicine's recommendations by further reducing hours.

The coalition, led by Public Citizen, sent a letter to Dr. Thomas J. Nasca, ACGME's executive director, urging the accrediting body to adopt rules that aim to reduce sleep deprivation and to better protect patients, Dr. Sidney Wolfe, director of Public Citizen's Health Research Group, said in a briefing with reporters. "The available evidence suggests that the public is deeply concerned about the current work hours of medical residents," as stated in the letter to Dr. Nasca. The letter is posted at www.wakeupdoctor.org.

At the briefing, Dr. John Ingell, a surgical resident at the University of New Mexico, Albuquerque, said that he noticed he became less compassionate when severely fatigued. Concentration also suffered, said Dr. Ingell, who is on the board of the Service Employees International Union's medical resident section.

Dan Henderson, a medical student at the University of Connecticut, Farmington, said that at the time, he was proud to work 12 hours or more a day or a 30-hour continuous shift on his surgical rotation. Now, he feels "ashamed," because he realizes that such efforts did not improve his education and also had a negative effect on his feelings for patients.

He said he supported the limit on work hours recommended by the IOM in 2008. The IOM urged a reduction from 30-hour shifts to shifts lasting no longer than 16 hours. "I really think medicine needs a wake-up call and needs to move into the 21st century," said Mr. Henderson.

The ACGME had planned on reviewing the work hours 5 years after they were first reduced, which happened to coincide with the IOM's report, said Dr. Nasca in an interview. The 16-member Duty Hours Task Force has been meeting since last July. New draft standards

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are likely to be issued by late April, and will then be available for public comment for 45 days, he said.

At the briefing, Dr. Charles A. Czeisler, professor of sleep medicine at Harvard Medical School, Boston, said that the current ACGME standards are widely flouted. He said confidential surveys of residents have shown "widespread falsification" by trainees on their actual work hours. Dr. Nasca responded that his organization was an educational accreditor, "not an employment regulator."

Added Dr. Nasca, "Our goal is to ensure substantial compliance with the regulations."

There is a tension between the educational mission, safety, and other factors, acknowledged Dr. Nasca, adding that this is why the Duty Hours Task Force had gathered evidence and opinions from more than 140 organizations.

"There's a constant balance we have to take between setting realistic expectations for how residents are scheduled for duty and the expectations that programs comply with those, coupled with the desire to inculcate in physicians a sense of personal responsibility for the safety and care of each individual patient," said Dr. Nasca.

The risk of fatigue also has to be balanced against the risk of increased errors when patients are handed off to an increasing number of caregivers, he said. The evidence is conflicting on whether reduced work hours improves patient safety, added Dr. Nasca.

However, he said he welcomed the new group's attention to work hours. "This is an important issue for the public to understand," Dr. Nasca said. ■