

# 80-Hour Workweek Survey Yields Mixed Results

BY DOUG BRUNK  
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SAN DIEGO — Most resident and attending physicians expressed ambivalence regarding the 80-hour workweek policy in a survey conducted by Dr. Thomas Esposito and his associates at Loyola University Medical Center in Maywood, Ill.

"The perceptions of both residents and attendings seem to suggest that the policy change may not yet be achieving its intended objectives," Dr. Esposito reported at a congress sponsored by the Association for Academic Surgery and the Society of University Surgeons.

"It may actually be detrimental to attendings," he added.

Studies comparing the views of resi-

dent and attending physicians regarding the 80-hour workweek policy for medical residents, implemented in July 2003 by the Accreditation Council for Graduate Medical Education, "are sparse, and studies comparing surgical and nonsurgical practitioners also have not routinely been done," noted Dr. Esposito, professor of surgery at the university and head of the injury analysis and prevention program at the Loyola Burn and Shock Trauma Institute.

In an effort to determine how residents and attendings from surgical and nonsurgical fields felt about the policy, Dr. Esposito and his associates distributed an electronic survey in August and September 2004 to 375 faculty and 527 residents representing 26 graduate medical education programs at Loyola University Medical Center. Of the 26 programs, 9 were surgical.

The 15-item survey contained questions about perceived benefits of and support for the policy as well as its effect on lifestyle, education, and patient care.

Survey response rates for attending and resident physicians were 57% and 35%, respectively.

Dr. Esposito reported that among the respondents, 60% of residents and 47% of attendings from surgical fields personally support the policy, compared with 79% of residents and 59% of attendings from nonsurgical fields.

In addition, 53% of residents and 69% of attendings from surgical fields agree that continuity of care has declined be-

cause of the policy, compared with 41% of residents and 66% of attendings from nonsurgical fields. (See box.)

The researchers also observed that 64% of residents and 68% of attendings from surgical fields perceive patient errors to be the same or greater under the policy, compared with 65% of residents and 55% of attendings from nonsurgical fields.

As for the policy's impact on lifestyle, 53% of residents and 100% of attendings from surgical fields believe that their time

spent in the hospital has remained the same or increased, compared with 59% of residents and 98% of attendings from nonsurgical fields.

Meanwhile, only 32% of residents and 38% of attendings from surgical fields agree that the residents are less stressed, compared with 53% of residents and 42% of attendings from nonsurgical fields.

The most common off-hour activities that were reported by surgical and nonsurgical resident physicians alike were sleep-

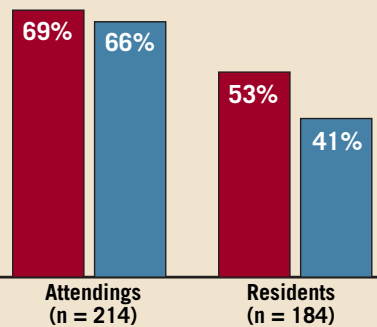
ing (25%) and educational reading (25%).

Regarding the policy's impact on education, 35% of residents and 72% of attendings from surgical fields agree that resident education has declined, compared with 27% of residents and 61% of attendings from nonsurgical fields.

In general, residents and attendings in surgical fields show less support for and see fewer positive attributes of the policy, compared with their counterparts in nonsurgical fields, Dr. Esposito concluded. ■

## Physicians Feel Policy Decreases Continuity of Care

Surgeons Nonsurgeons



Source: Dr. Esposito

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1. McCullough P et al. *Circulation*. 2002; 106:416-422.