

workload and time to pursue personal interests and hobbies compared to the current experience of practicing urologists.

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## EDITORIAL COMMENT

Urology is a gem in the surgical subspecialty world, as evidenced by a highly competitive match with increasing numbers of outstanding applicants.<sup>1</sup> This has been attributed to the diversity of patients and pathology, the range of surgical techniques, the generally promising outcomes in many cases, and, additionally, the potential to balance personal and work life. Surprisingly, Urology has recently suffered from increasing job dissatisfaction and we now stand as one of the most burnt out specialties in medicine (references 1–4 in manuscript). Studies designed to understand the causes of job dissatisfaction and burnout in Urology are critical to identify targets for intervention.

In this survey-based study looking at the expectations of urology trainees compared with the experiences of practicing urologists, Cheng et al sought to identify contributions to employee dissatisfaction based on the Range of Affect Theory, which states that discrepancies between expectations and experiences are potential sources of employee dissatisfaction. Although it suffered from a low response rate of 6%, this study did have an important take home message: The major discrepancy between trainees and practicing urologists appears to be the burden of administrative workload and the potential effect on time to pursue personal interests. These differences were significant even when controlling for possible confounders such as trainee level and marital status.

While the study was not designed to correlate administrative workload with job dissatisfaction and burnout, the assumption is intuitive. Although initially intended to facilitate and improve the care of patients, the electronic health record has shifted administrative tasks to physicians, with unexpected and toxic consequences.<sup>2</sup> Administrative tasks generally divert time from care giving and leave physicians with less time and emotional capacity to devote to patients, an effect that can also bleed into home and family life. While as trainees we often lament the burden of these tasks, the sad reality is that practicing urologists' administrative workload is "much more than residency" in nearly 80% of cases. Clearly, setting realistic expectations for trainees and facilitating the development of strategies to manage these tasks is key. Furthermore, appropriate delegation of administrative tasks should be used to allow physicians to focus on direct patient care. Finally, data on how expectations and experiences differ in the subset of trainees who pursue a career with a significant research component is unknown and another potential source of job dissatisfaction, given the current challenges with research funding.

In addition to reducing administrative burden and setting appropriate trainee expectations, physician wellness, both mental and physical, needs to be valued. Fortunately, we are seeing this happen. Physician work-life balance is a trending concept, and hospitals, departments, and training programs recognize the important role this plays in job satisfaction, which can affect productivity and job retention. As surgeons, trainees in Urology will always be required to work long hours in the hospital to learn and develop our craft. Nevertheless, we should ensure that

trainees expect and practicing urologists experience job satisfaction commiserate with the hard work we each put in every day for our patients.

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## AUTHOR REPLY



We appreciate and agree with the editorial comment. Urology is indeed a gem of a specialty. Despite the increasing

recognition of physician burnout in urology, we cannot rely on the healthcare system to change or improve the drivers of dissatisfaction in the near future. Payers and regulators are not likely to substantively decrease the administrative burden of practicing medicine. We will not have less interaction with the electronic health record. In the increasing quest for efficiency, proof of value, and ultimately financial margin, urologists will likely have to cope with more pressure for documentation and administration. Although the effect of the Range of Affect Theory is only 1 component affecting job satisfaction, it is a component that can be addressed. Residency and fellowship programs can help trainees set appropriate expectations for clinical practice. Training programs should teach strategies for managing administrative tasks, maintaining work-life balance, and coping with the current demands of practicing urology. Given the recent understanding of the importance of physician wellness, trainees will need all of these skills to help them sustain job satisfaction as a urologist in spite of the stressors that lie ahead of them.

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