

Medics learn that signalling stress, that is, an inability to cope, is failure. Where does this leave us when faced with untenable circumstances? Suffering from severe burnout before COVID-19, I fell into a void, hopeless, guilt ridden, and angry. The term 'resilience' fanned the simmering embers of my self-perceived inadequacy. Clinical work became unendurable as anxiety spiralled. I felt overwhelmingly alone, and yet I know that cannot be. To learn from each other, we must talk honestly about challenging experiences, and map out how we found a way through.

When I eventually sought medical help, long postponed by disillusionment and self-blame, my expectation of hopelessness was confirmed. I was advised to relax. My body had no physical memory of relaxation, my mind no blueprints. I was offered a short course of CBT and encouraged to take medication. CBT is a well-evidenced therapeutic tool, but for me it would never have sufficed. If one has experienced trauma, which we understand now is not defined by cause but by the experience of the person who suffers it, the neurological system can begin to function differently.

Renowned trauma expert Dr Bessel van der Kolk explains:

*'No matter how much insight and understanding we develop, the rational brain is basically impotent to talk the emotional brain out of its own reality.'*¹

Also, CBT does not often delve into the why of habitual thinking patterns, affective associations, or deeply held beliefs about how one should be.

THE LIMITS OF MEDICATION

Though medication can contribute to stability, helping one to take action promoting recovery or maintenance, it has similar limitations. It will not treat self-



hatred, for example, unexpressed rage, or appease unmet needs. If medication is purposed to diminish psychic pain without any attempt being made to understand its true nature, the pain may grow in proportions.

My ongoing recovery has involved a gradual acquisition of understanding. While I believed myself deeply defective and valueless, I was stuck. I needed to appreciate the reality of my travelled path, to identify and reject toxic and limiting narratives, and to recognise aspects of the 'false self',² whose unconscious fears and drives can otherwise hijack a conscious project of recovery, for example, perfectionism or a need to please others. Insight offers powerful scope for liberation, but, beyond this, I needed to learn to bear reality, to recognise and offer care to the tiny child residing in memory, sleepless with fear.

THE ELEMENTS OF WELLBEING AND BEING OF SERVICE AS A DOCTOR

Recognising the pain I had endured and cultivating self-compassion were transformative, and helped me to nurture the compassion for others I feared lost. Rather than my internal world representing a battleground, learning to experience and

validate my emotions without judgement or resistance was invaluable. Developing simple insight into my core character traits was also beneficial — I am an idealistic, highly sensitive, conflict-avoidant introvert. We each inevitably have weaknesses as well as strengths; we naturally find some things easier or more challenging than others. I have tentatively started learning to ground myself in the tangible world of the present, to inhabit my body, calm my over-worked nervous system, and to feel safe.

I have not learned to transcend the daily struggles of a human with a full spectrum of emotions in an uncertain world. My beliefs about 'mental illness' are both clarified and unravelled. I am not 'fixed' but never now aspire to be: I no longer feel profoundly broken.

There are societal, cultural, and spiritual wellbeing elements that will never be within the remit of medicine, but many struggling doctors are likely to need more than a prescription and a short course of CBT. To be of true service, medicine must find a way to navigate the new terrains of need. Burnout offers us a powerful opportunity to stop and listen to the quiet and frequently subjugated voices of our minds and bodies, and to each other, to re-define our concept of success and to re-imagine how we want to be.

I believe that only through recognising and validating our humanity and our lack of resilience are we likely to seek appropriate support or begin to effectively change underlying systems.

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