

# Burnout and well-being in Obstetricians and Gynaecologists in Hong Kong

A TERRITORY-WIDE CROSS-SECTIONAL SURVEY

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# METHODS

All 665 O&G trainees and specialists in Hong Kong were invited to complete an anonymous voluntary cross-sectional electronic survey between June 2023 and June 2024

- Burnout - Copenhagen Burnout Inventory (CBI)
- Depression - Patient Health Questionnaire-9 (PHQ-9)
- Anxiety - Generalized Anxiety Disorder-7 (GAD-7)
- Ranked sources of stress - work demand, working hours, on-call duties, workplace relationship, examination, family, personal



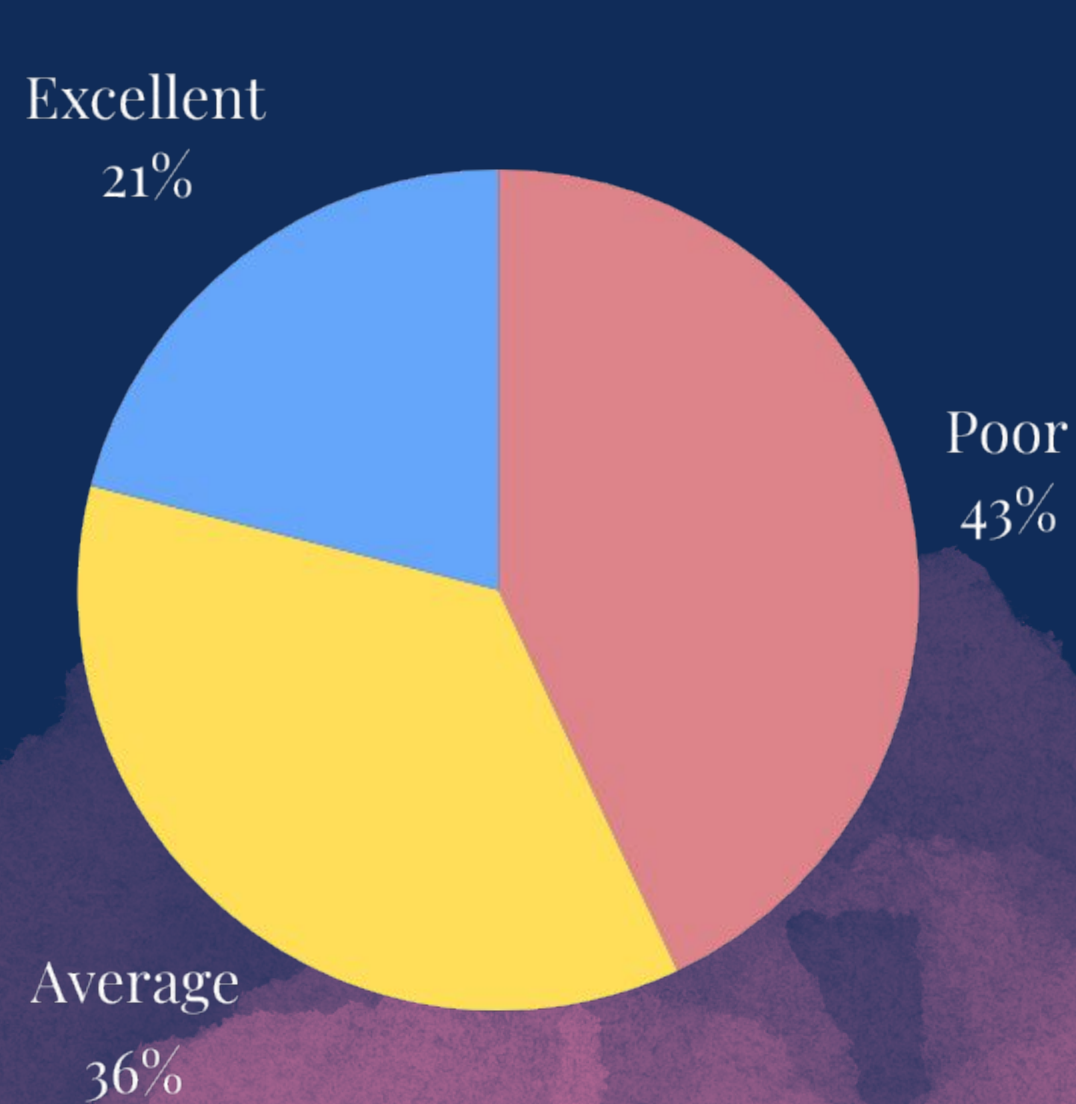
# RESULT

- 218 out of 665 (32.8%) O&G doctors completed the survey
  - 71 (32.6%) residents-in-training;
  - 73 (33.5%) specialists working in public sectors;
  - 74 (33.9%) specialists working in private sectors
- 71 out of 97 (73.2%) residents-in-training completed

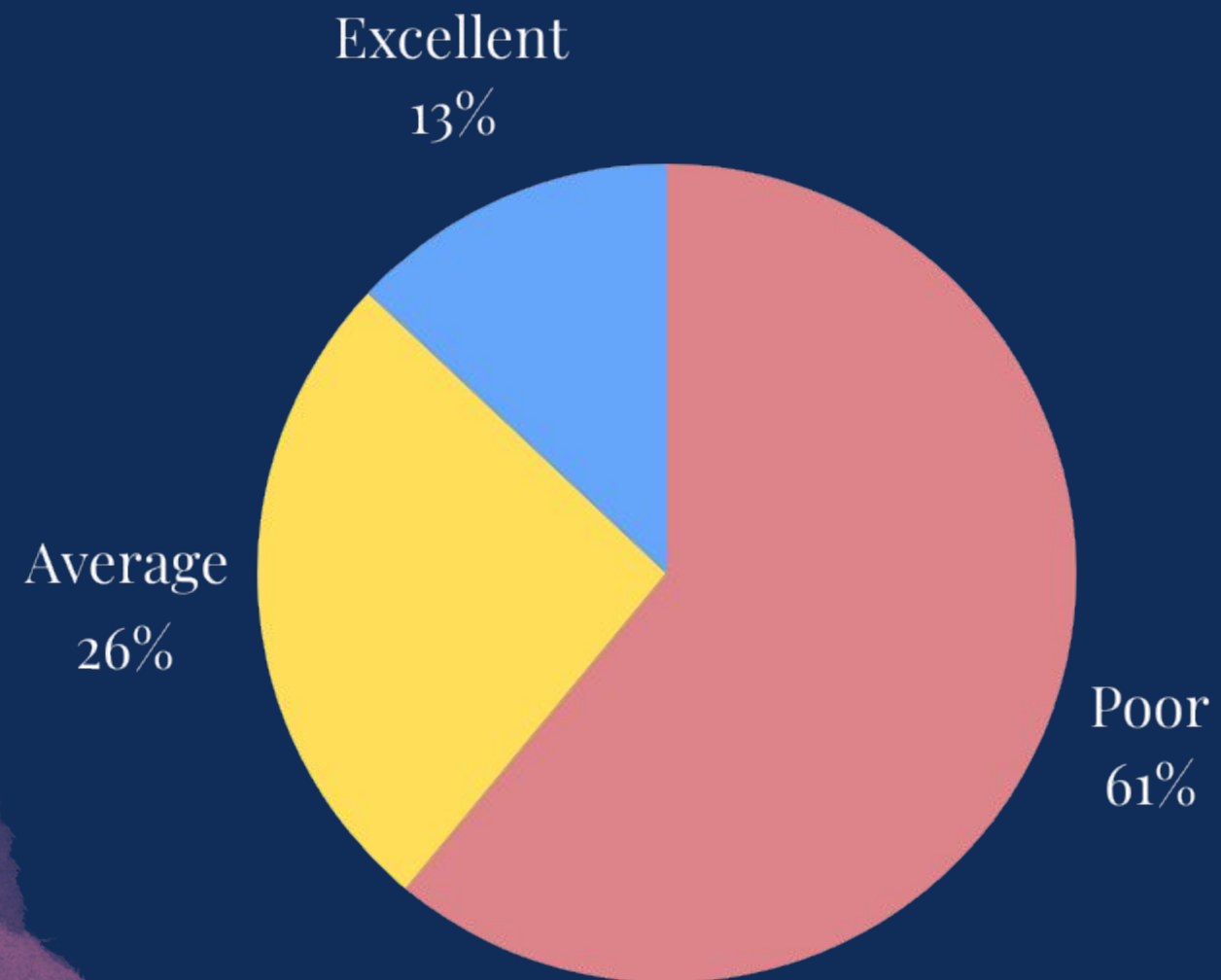




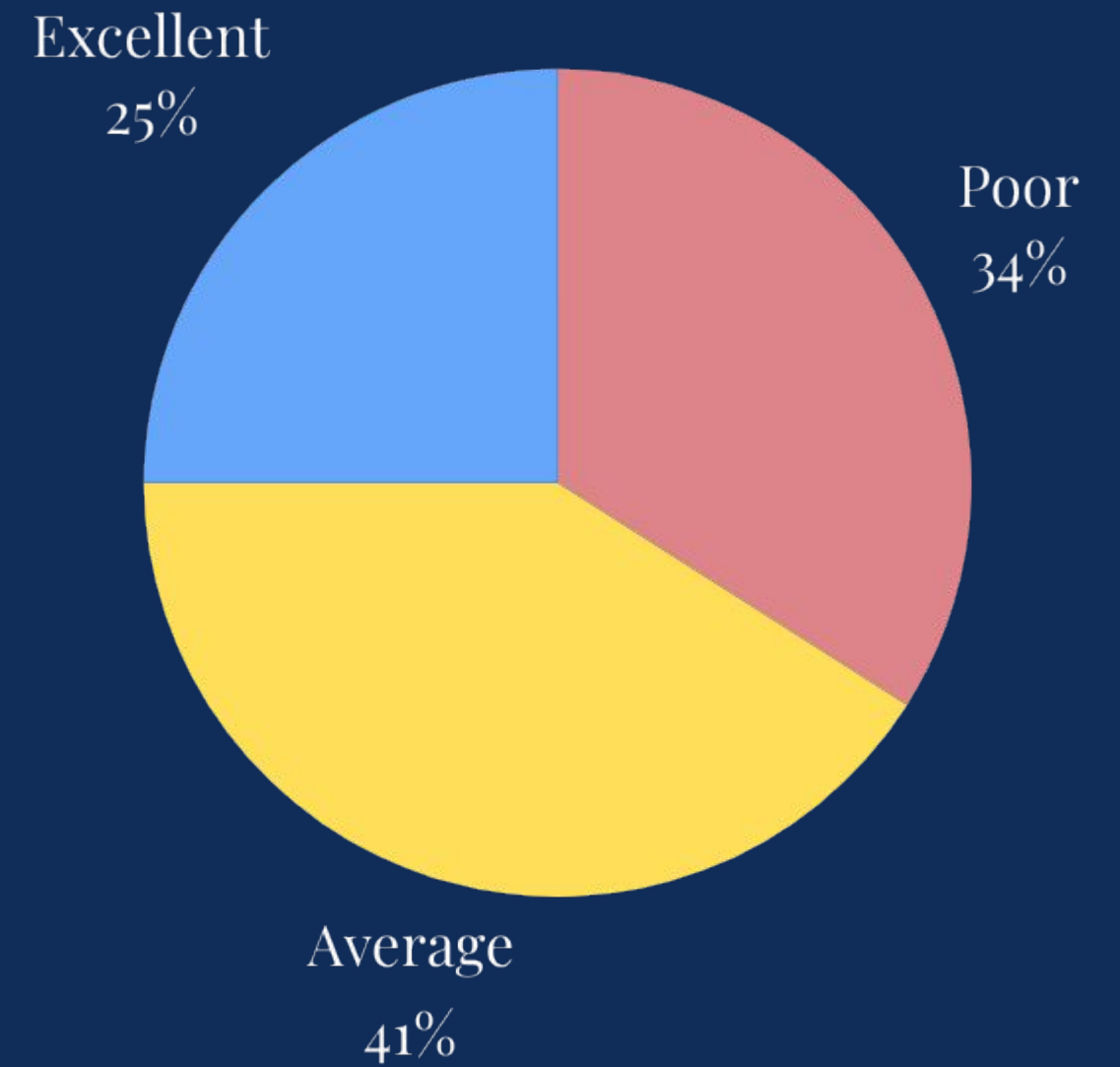
# General well-being status of O&G doctors



Overall



Residents-in-training



Specialists



# Prevalence of burnout, depression, anxiety

Personal burnout (CBI $\geq 50$ )	56.4% (n=123)
Work-related burnout (CBI $\geq 50$ )	52.8% (n=115)
Client-related burnout (CBI $\geq 50$ )	45.4% (n=99)
Depression (PHQ-9 $\geq 10$ )	21.1% (n=46)
Presence of suicidal ideation	13.3% (n=29)
Anxiety (GAD-7 $\geq 10$ )	20.2% (n=44)



# Association of factors for burnout

	Personal burnout		Work-related burnout		Client-related burnout	
	Odds ratio (95% CI)	P value	Odds ratio (95% CI)	P value	Odds ratio (95% CI)	P value
Male	Ref	-	Ref	-	Ref	-
Female	0.95 (0.47-1.93)	0.890	0.77 (0.36-1.61)	0.480	0.72 (0.35-1.49)	0.377
Single / separated / divorced	Ref	-	Ref	-	Ref	-
Married / common law	1.45 (0.59-3.60)	0.418	1.43 (0.57-3.59)	0.441	1.04 (0.44-2.43)	0.932
Without children	Ref	-	Ref	-	Ref	-
Have children	0.42 (0.17-1.03)	0.059	0.35 (0.14-0.89)	0.028	0.28 (0.11-0.69)	0.006
Specialists	Ref	-	Ref	-	Ref	-
Residents-in-training	2.93 (1.22-7.05)	0.017	2.05 (0.85-4.92)	0.108	2.09 (0.91-4.84)	0.084
Public	Ref	-	Ref	-	Ref	-
Private	1.27 (0.58-2.76)	0.548	0.83 (0.37-1.86)	0.652	1.43 (0.62-3.29)	0.406
Working for <= 50 hours per week	Ref	-	Ref	-	Ref	-
Working for > 50 hours per week	2.17 (1.02-4.60)	0.044	2.88 (1.31-6.31)	0.008	1.45 (0.65-3.24)	0.361

# Association of factors for depression, suicidal ideation and anxiety

	Depression		Suicidal ideation		Anxiety	
	Odds ratio (95% CI)	P value	Odds ratio (95% CI)	P value	Odds ratio (95% CI)	P value
Male	Ref	-	Ref	-	Ref	-
Female	0.82 (0.32-2.10)	0.674	0.26 (0.09-0.76)	0.013	1.82 (0.56-5.91)	0.320
Single / separated / divorced	Ref	-	Ref	-	Ref	-
Married / common law	1.15 (0.42-3.11)	0.787	2.06 (0.66-6.42)	0.212	0.79 (0.26-2.39)	0.674
Without children	Ref	-	Ref	-	Ref	-
Have children	0.31 (0.09-1.07)	0.064	0.103 (0.02-0.46)	0.003	0.43 (0.11-1.77)	0.243
Specialists	Ref	-	Ref	-	Ref	-
Residents-in-training	2.48 (0.90-6.88)	0.080	5.21 (1.21-22.5)	0.027	3.97 (1.24-12.7)	0.020
Public	Ref	-	Ref	-	Ref	-
Private	1.46 (0.42-5.13)	0.557	2.52 (0.58-10.9)	0.216	1.49 (0.33-6.65)	0.605
Working for <= 50 hours per week	Ref	-	Ref	-	Ref	-
Working for > 50 hours per week	2.17 (0.62-7.60)	0.224	0.407 (0.09-1.78)	0.232	1.63 (0.37-7.10)	0.519



# Subgroup analysis - trainees vs specialists

	Residents-in-training (n=71)	Specialists (n=147)
Personal burnout score	<b>66.1</b> ± 21.5	<b>48.1</b> ± 21.3
Personal burnout (CBI ≥50)	78.9% (n=56)	45.6% (n=67)
Work-related burnout score	<b>63.3</b> ± 22.2	<b>42.1</b> ± 23.0
Work-related burnout (CBI ≥50)	76.1% (n=54)	41.5% (n=61)
Client-related burnout score	<b>55.8</b> ± 24.6	<b>38.9</b> ± 20.1
Client-related burnout (CBI ≥50)	64.8% (n=46)	36.1% (n=53)
Depression (PHQ-9 ≥10)	35.2% (n=25)	14.3% (n=21)
Presence of suicidal ideation	19.7% (n=14)	10.2% (n=15)
Anxiety (GAD-7 ≥10)	36.6% (n=26)	12.2% (n=18)



# Subgroup analysis - working hours > 50 vs ≤ 50

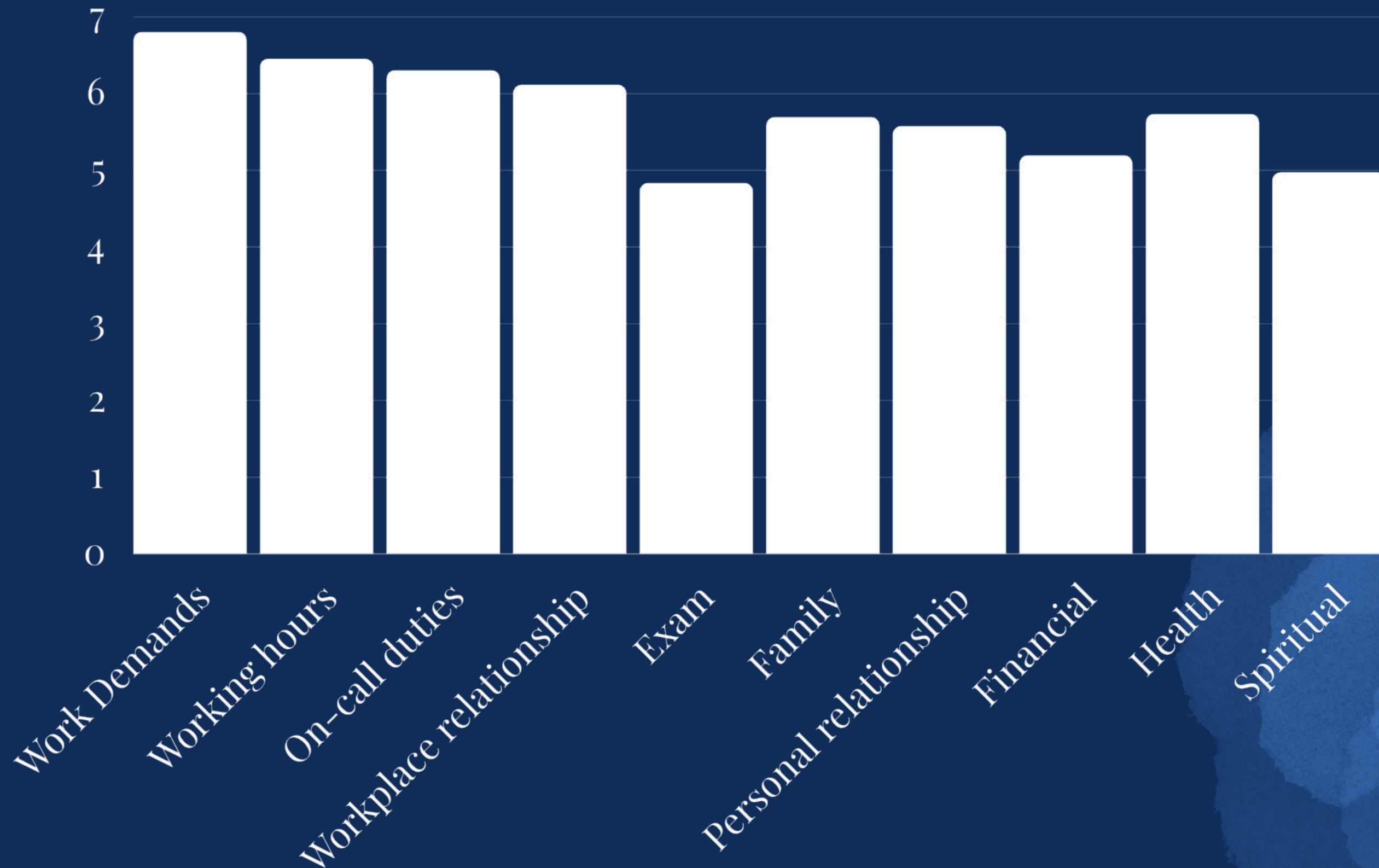
	Working hours > 50 (n=146)	Working hours ≤ 50 (n=72)
Personal burnout score	60.7 ± 21.4	40.4 ± 19.7
Personal burnout (CBI ≥50)	67.8% (n=99)	33.3% (n=24)
Work-related burnout score	57.0 ± 23.0	32.8 ± 19.9
Work-related burnout (CBI ≥50)	66.4% (n=97)	25% (n=18)
Client-related burnout score	49.5 ± 23.1	34.0 ± 19.1
Client-related burnout (CBI ≥50)	54.1% (n=79)	27.8% (n=20)
Depression (PHQ-9 ≥10)	27.4% (n=40)	8.3% (n=6)
Presence of suicidal ideation	13.7% (n=20)	12.5% (n=9)
Anxiety (GAD-7 ≥10)	26.7% (n=39)	6.9% (n=5)

# Subgroup analysis - having children vs no children

	Have children (n=95)	No children (n=120)
Personal burnout score	43.9 ± 19.7	61.5 ± 22.0
Personal burnout (CBI ≥50)	38.9% (n=37)	70% (n=84)
Work-related burnout score	37.1 ± 21.2	58.0 ± 23.3
Work-related burnout (CBI ≥50)	32.6% (n=31)	68.3% (n=82)
Client-related burnout score	34.0 ± 18.0	52.2 ± 23.3
Client-related burnout (CBI ≥50)	25.3% (n=24)	60.8% (n=73)
Depression (PHQ-9 ≥10)	9.5% (n=9)	29.2% (n=35)
Presence of suicidal ideation	7.4% (n=7)	17.5% (n=21)
Anxiety (GAD-7 ≥10)	7.4% (n=7)	30% (n=36)

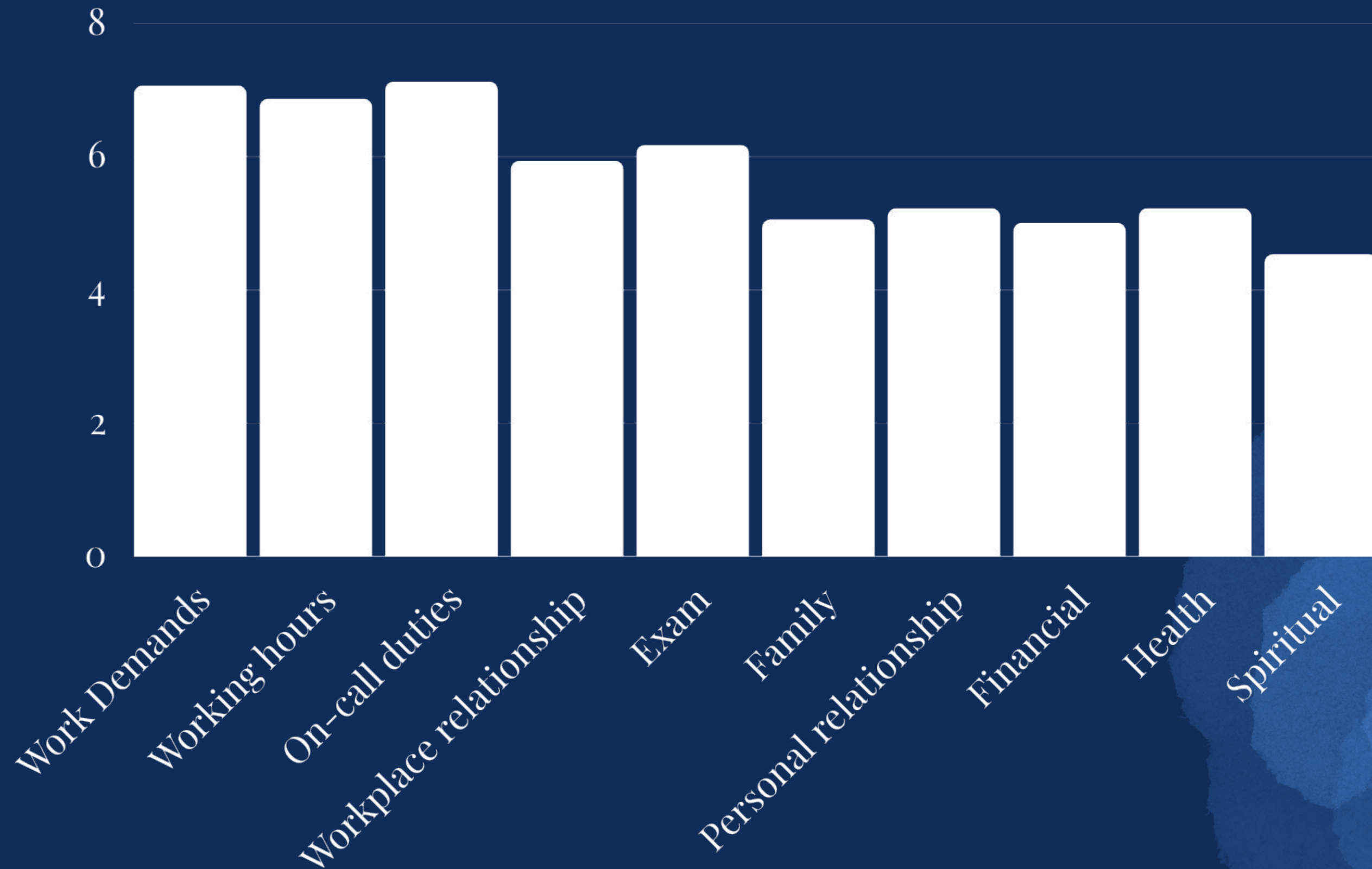


# Sources of stress - overall





# Sources of stress - trainee





# WHAT CAN COLLEGE DO TO IMPROVE WELL-BEING?

Enhance work-life balance  
(59.5%)



Limit excessive working  
hours

Limit on-call duties

Part-time options

Ensure adequate  
staffing

Effective task delegation

# WHAT CAN COLLEGE DO TO IMPROVE WELL-BEING?

Enhance professional development  
(30.4%)



Protected training sessions

Review training  
curriculum

Streamline

logbook

Offer research

collaborations

Reward system



# WHAT CAN COLLEGE DO TO IMPROVE WELL-BEING?

Improve mental health support  
(30.4%)



Confidential counseling

Stress management  
workshops

Peer support  
groups

Mentorship programs

Supportive work  
environment

# WHAT CAN COLLEGE DO TO IMPROVE WELL-BEING?

Improve public education  
& Medical-legal support  
(15.2%)



Public awareness campaigns

Referral for expert  
opinion

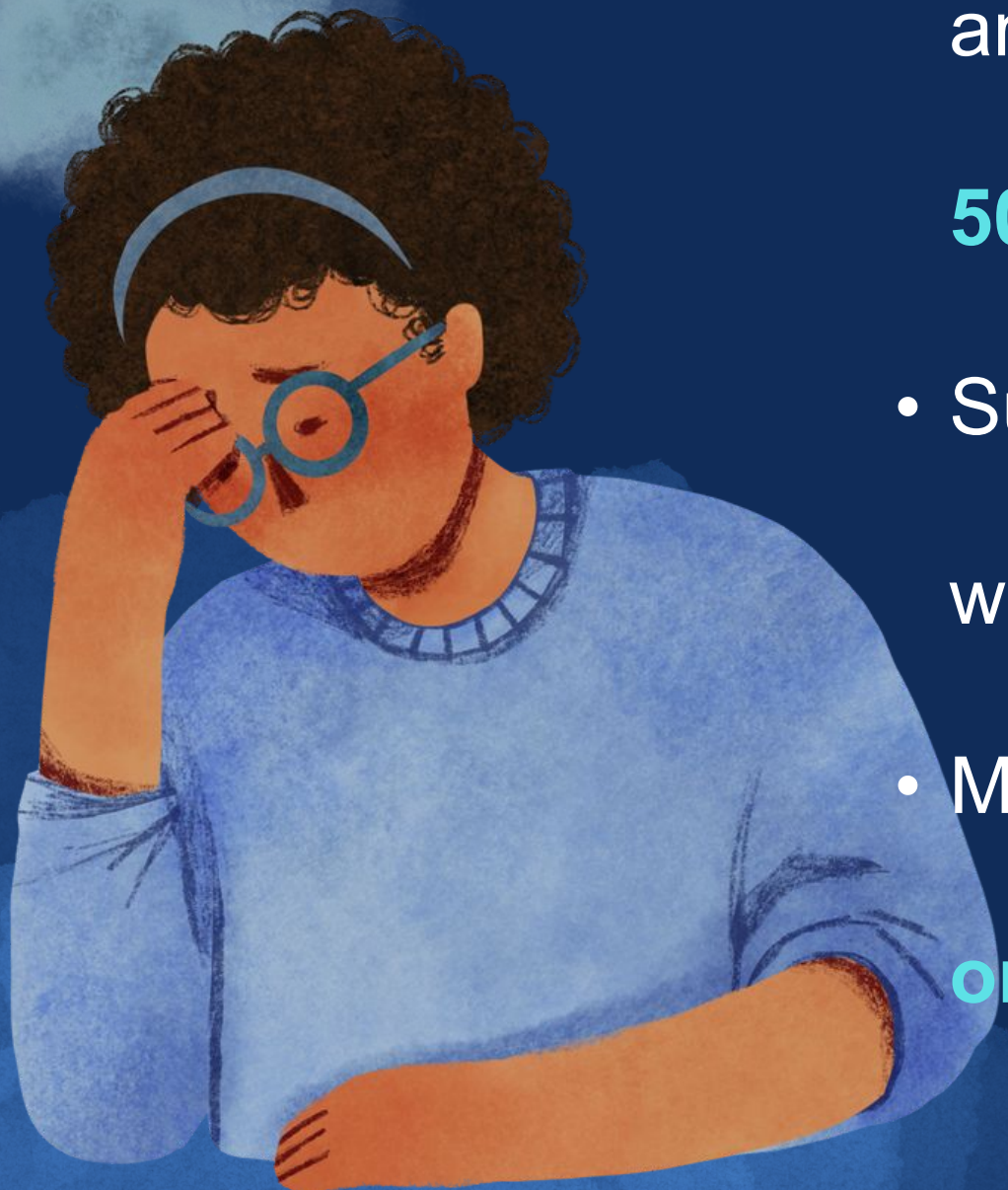
Counselling by senior  
physicians with similar  
experiences



# CONCLUSIONS

- High level of burnout, depression, suicidal ideation and anxiety among O&G doctors esp. among **trainee** and **doctors working for > 50 hours a week**
- Substantial proportion of respondents were **dissatisfied** with their well-being status
- Most cited sources of stress: **work demands** → **working hours** → **on-call duties**

**"It is important to pay attention to our mental health"**





Thank you