INTRODUCTION

Stephen W. Trzeciak, MD, MPH, is chairman and chief of the department of medicine and medical director of the Adult Health Institute at Cooper University Health Care. He is also a professor of medicine at Cooper Medical School of Rowan University. Along with Schwartz Center CMO Beth Lown, MD, he discussed how we can create compassionate cultures—and what can erode them. Drs. Trzeciak and Lown also covered research on the benefits of compassion, including its positive impact on patients, healthcare workers, and organizational culture and profitability.

WHAT IS THE COMPASSION CRISIS?

“A compassion crisis is here; the question is what do we do about it?” asked Dr. Trzeciak. He cited a study that found that empathy has been declining in the general population over the past two decades, and this decline has been accelerating over time. Another study found that one-third of Americans don’t consider compassion for others to be among their core values. And the crisis doesn’t exclude healthcare – in a Schwartz Center study from 2010 in Health Affairs, Dr. Lown and her colleagues found nearly half of Americans felt that not only is our healthcare system not compassionate, but healthcare providers themselves were not compassionate.

WHAT IS DRIVING THIS?

From the very start of their healthcare careers, the “hidden curriculum” in medical education teaches students to “not care too much” lest they burn out, said Dr. Trzeciak. Not only is it damaging, he says, but it’s not driven by data. There is a measurable association between cynicism and burnout; conversely, research shows that compassion is inversely correlated with burnout. Without compassion, health workers don’t experience the restorative and meaningful positive reinforcement of caregiving.

HOW IS COMPASSION A DRIVER OF OUTCOMES?

He reviewed decades of data when writing his book, “Compassionomics” and found a multitude of studies that show how compassion benefits patients, caregivers, and the bottom line. In one study, patients who were treated with compassion visited the emergency room less frequently than patients who were not. Another study showed that pain centers in the brain were activated when viewing others in pain, and the reward center was activated when treating or reducing pain. The evidence shows that malpractice claims decline when patients believe their caregivers are more compassionate, making it good for the bottom line as well.
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Dr. Trzeciak has studied which specific behaviors are most closely associated with a patient’s experience of compassion. He suggests that we can generate an evidence base that will better inform medical teaching. He also discussed how communication is a learnable skill. One survey found that 56% of health workers said they didn’t have the time to be compassionate, yet a study found that just 40 seconds of additional caring questions from a doctor had a measurable impact in decreasing patient anxiety.

He cited another study that showed a disconnect between a patient’s chief medical complaint versus their primary concern; simply asking, “What worries you the most?” has the power to be a diagnostic and relationship-building tool.

To learn more about the data Dr. Trzeciak cited and hear his personal stories of caregiving, you can view the full webinar at:

theschwartzcenter.org/programs/compassion-in-action-webinars

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