Physician empathy is correlated to better patient compliance, medical outcomes, and reduced physician burnout. It is widely accepted that empathy is a vital component in the professional development of physicians and impacts quality of care and patient outcomes. Knowing if and when empathy changes from osteopathic medical student to resident to practicing physician can help pinpoint opportune times to enhance/maintain empathy levels and could be informative for medical education efforts.

The 2011 systematic review by Neuman et al. concluded there is a decline in empathy during medical school and residency, which is especially evident in longitudinal studies. Most studies however are conducted on allopathic students and residents. Although osteopathic freshmen reportedly start with lower baseline empathy than allopathic students, their empathy does not appear to decline in the 3rd year, as is often noted in their allopathic counterparts.

Missing in this field are studies following students from their training time in medical school to residency programs and into their professional fields. We started this study with goal of obtaining data from IL MWU medical students who continue into MWU OPTI residency programs to obtain such longitudinal data but are only reporting on data from residents.

Results

95 (85 DOs) residents completed the survey. Average empathy score for MDs was 118.8 (sd 11.61; range 100-134) compared to 115.41 (sd 12.5; range 95-134) for DOs. 70 percent of MD residents were male compared to 48.9 percent of DO residents. The majority of residents were in PGY 2 and PGY 3 (70 percent of the MD trained residents;77.6 percent of DO residents). All MD trained residents and 69 percent of DOs were in a Family Medicine residency program. 19 percent of DOs were in an Emergency Medicine and 11 percent in an OB/GYN program.

No statistically significant differences were found between MDs or DO residents, Year in Program, or Program Type. A statistically significant difference was found in Specialty type with Emergency Medicine residents scoring lower compared to Family Medicine or OB/GYN residents. The average Empathy scores for EM residents was 106.93 (sd 9.93) compared to 117.89 (sd 10.4) for Family Medicine and 115.2 (sd 10.12) for OB/GYN.

Several questions assessed attitudes with respect to volunteering, type of patients deserving health care, comfort with diversity and decisions to enter chosen profession. Statistically significant correlations were found for the Emergency Medicine residents between empathy and volunteering (.6; I do not volunteer because it hinders my ability to get ahead), medical authoritarianism (.58; Conscientious patients deserve better health care than those with self-inflicted problems) and medical egalitarianism (.5; We should do what we can to equalize health care for different groups). Statistically significant correlations were found for the Family Medicine residents between total empathy score and volunteering (.34), openness (.26; Even after I made up my mind about something, I am willing to consider other opinions), medical authoritarianism (.36), medical egalitarianism (.48) and conflict with diversity (.47; I am comfortable helping others who are different from me culturally).

DOs also completed several questions related to osteopathic philosophy and their current use of OMM. Moderate significant correlations were found for the total sample between empathy score and role of osteopathic philosophy in attending medical school (.3) and choosing to take OMM as an elective if it had not been required (.37). When dividing the sample by subspecialty no significant correlations were found between these variables and total empathy scores for the EM and OB/GYN residents.

Conclusions

We are reporting results of a small, cross-sectional study conducted in a limited number of specialty programs and limited to one geographical area. There were no statistically significant differences in empathy levels between DOs reporting current use of OMM in their clinical encounters and those who did not, a trend can be reported. Of the 85 DOs in the sample 15 did not use OMM in their clinical encounters. Their average empathy score was 111 (sd 10.83) compared to 116 (sd 13.35) for those who do use OMM in their clinical encounters.

Acknowledgements

The authors gratefully acknowledge the funding and support from the American Association of Colleges of Osteopathic Medicine, Midwestern University Chicago College of Osteopathic Medicine, and Center for Research in Medical Education and Health Care, Thomas Jefferson University.

References