



Radiologists' isolation as a cause of burnout

One of the articles in this issue of the journal, entitled "Qualitative investigation of the expectations of general practitioners and specialists on the role of the radiographer", highlights that non-radiographer physicians consider the isolation of radiographers in their daily practice as a negative factor. On the other hand, the authors point out how this is one of the causes of burnout.

Isolation as a cause of burnout has been described in professions such as pilots, with consequences not only in job performance, but also as a cause of lawsuits to airlines.

It has also been identified as a negative factor in the lives of deans, researchers and professors in universities, and it is considered a factor that influences physical and emotional exhaustion, so that teachers are encouraged to be less isolated in order to improve the quality of teaching.

Isolation also has advantages: it provides support for work by favoring independence; in addition, it contributes to concentration, with a lower rate of noise situations and a decrease in time considered useless, such as that used for commuting.

The pandemic has generated an increase in isolation in a large part of the workforce, particularly in the area of diagnostic imaging, which has favored the practice of teleradiology.

At the same time, the growth of artificial intelligence is perceived as a threat, as some believe that it could replace the work of the radiographer.

Considering that technology is advancing rapidly and at a faster rate in our area compared to other areas of medicine, these technological advances and artificial intelligence can be used to improve workflows, leaving free time for greater communication with colleagues from other disciplines, participating in decision-making meetings on the diagnosis and treatment of patients in each specialty. This participation of the radiologists will make it possible to publicize new technologies that improve the diagnosis of both common and complex diseases. To give an example, non-invasive methods for the diagnosis of heart disease, whose technology has advanced enormously, can be known and adopted by medical groups with the advantages that this entails in terms of lower risks of contagion and, of course, lower morbidity, since they are non-invasive techniques.

Another no less important point is to achieve a better rapprochement with patients, who are the *raison d'être* of the medical profession. It is advisable to return to direct contact with them to inquire about their disease and to communicate directly with them the results of the imaging, when it is relevant or unexpected, or to explain clearly the objectives and methods of an imaging intervention.

Let us think that this is a very important mission of the radiologist for the benefit of patients and that it can be carried out not only individually, but also collectively, by participating in meetings or in portals for patients and their families, with clear and truthful information, in appropriate language, about the different aspects of diagnostic imaging.

Therefore, the invitation today is to include or increase in our daily workflow direct communication with referring physicians and patients; to increase participation in interdisciplinary meetings, which is seen as a great advantage by our non-physician colleagues and by our patients; and to decrease our isolation, as this reduces one of the sources of burnout in our profession.

References

1. Canon C, Beecham Chick J, DeQuesada I, Gunderman R, Hoven N, Elizabeth Prosper A. Physician burnout in radiology: Perspectives from the field. *AJR*. 2022;218:1-5. doi.org/10.2214/AJR.21.26756

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