

Addressing Burnout in Ophthalmology—A Call for Systemic Change

Ambreen Gul¹

¹Benazir Bhutto Hospital, Rawalpindi Medical University

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Burnout or ‘Syndrome of Professional Wear and Tear’ is an increasingly recognized issue in the field of ophthalmology, affecting both those in training and established practitioners. A study reported that 6.9% of participants experiencing burnout were from ophthalmology, with most being residents (81.4%) working 60–80 hours per week.¹ Burnout rates were higher in females, with 46.3% reporting early burnout and 36.6% advanced burnout, compared to 32.8% and 25% in males, respectively. While general surgeons and gynecologists were more prone to advanced burnout, eye surgeons and residents showed a notable vulnerability to burnout.^{1,2} Ophthalmologists experience notable levels of emotional exhaustion, depersonalization, and a diminished sense of personal accomplishment, representing key types of burnouts in the field. The relentless demands of a highly specialized and technical field of surgery, coupled with administrative burdens and the pressure to maintain a work-life balance, contribute to early career exits and declining mental well-being among professionals.³ To ensure the longevity and fulfillment of ophthalmologists, a multifaceted approach that addresses burnout at both individual and systemic levels is critical.

One of the fundamental strategies for combating burnout is integrating mental health resources into both training programs and clinical practice settings. Encouraging open discussions about mental health, along with reducing the stigma associated with seeking help, should become standard practice. Mental health support must go beyond lip service, providing access to counseling services and implementing wellness programs that focus on stress reduction, mindfulness,

and coping mechanisms. These initiatives are essential in building resilience among ophthalmologists, particularly as they navigate the challenges of an ever-demanding profession.

Work-life balance, long undervalued in many medical specialties, should be a cornerstone of both training and professional practice in ophthalmology. Implementing reasonable working hours and promoting time-off policies are key steps in preventing the onset of burnout. For those in training, the emphasis must shift towards fostering a culture that respects personal time, allowing trainees and practitioners alike to disconnect from work and focus on personal well-being. Achieving this balance will not only benefit the mental health of ophthalmologists but will also enhance their professional performance and patient care.^{4,5}

The culture within ophthalmology must prioritize support, collaboration, and mentorship. Encouraging experienced ophthalmologists to mentor younger colleagues and trainees can ease the transition into practice, providing invaluable guidance and fostering a sense of belonging.⁶ Additionally, establishing channels for open communication and feedback is crucial. Practitioners must feel safe to voice their concerns or share challenges without fear of retribution. By creating an environment where concerns are addressed and support is readily available, we can significantly reduce the stress associated with the profession.⁷

Training programs are often cited as one of the key sources of burnout in ophthalmology. While the rigorous nature of ophthalmologic training is necessary, it is essential to strike a balance that prevents excessive demands on trainees. Training programs must be regularly evaluated and reformed to ensure that they are comprehensive but not overwhelming. Offering trainees support networks, guidance, and mentorship will foster a sense of community and resilience, helping them navigate the inevitable challenges that arise during their education.⁷

*Correspondence: Ambreen Gul
Benazir Bhutto Hospital, Rawalpindi Medical University
Email: amber-gul@hotmail.com*

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Technological advancements offer new ways to alleviate some of the administrative burdens that contribute to burnout. Embracing user-friendly electronic health record (EHR) systems and automating repetitive administrative tasks can free up time for ophthalmologists to focus on patient care and professional development. Reducing the time spent on paperwork is not only a practical solution but also essential in creating a more streamlined and efficient practice environment.⁸

Introducing flexible work arrangements is another potential solution to alleviate burnout. Offering part-time work options, telemedicine opportunities, and other flexible scheduling solutions can help ophthalmologists better manage their personal and professional lives. Flexibility is particularly beneficial for those with family responsibilities or personal health needs, and its adoption can make a significant difference in the long-term career satisfaction of practitioners.

Continued professional development is key to maintaining enthusiasm and passion in the field. Encouraging ophthalmologists to engage in ongoing education and training not only keeps them at the forefront of their specialty but also reinvigorates their sense of purpose. Professional growth and the pursuit of knowledge are powerful antidotes to burn out, keeping practitioners engaged and committed to their careers.

Addressing burnout also requires advocacy for broader systemic changes within the field. At the institutional and hospital levels, regulatory burdens and inefficient administrative processes need to be streamlined. Policies that prioritize physician well-being and reduce unnecessary stress must be promoted. By addressing these structural issues, we can create a more sustainable environment for ophthalmologists to thrive in their careers.

Finally, regular assessments and feedback mechanisms are essential to understanding and addressing the evolving needs of ophthalmologists. Conducting surveys and collecting feedback on burnout levels will allow institutions to identify specific stressors and areas for improvement. Continuous adjustments to training programs and workplace policies based on feedback will ensure that burnout prevention strategies remain effective and relevant.

Preventing burnout in ophthalmology is a

collective responsibility that requires the combined efforts of individuals, institutions, and the profession at large. By prioritizing mental health, work-life balance, supportive work environments, technological solutions, and systemic reforms, we can foster a more sustainable and fulfilling career path for ophthalmologists. The well-being of practitioners is not only vital for their own health but also for the quality of care they provide for patients. Addressing burnout is not a luxury—it is a necessity for the future of ophthalmology.

Keywords: Ophthalmology, Mental health, Burnout, work-life imbalance, Professional development.

Conflict of Interest

The author declared no conflict of interest.

REFERENCES

1. **Zaman BS, Ghorri RG, Ali MM, Ahmed RM.** Impact of burnout among surgeons and residents at a Tertiary Care Hospital of Pakistan. *Prof Med J.* 2020;**27(11)**:2523-2528. Doi:10.29309/TPMJ/2020.27.11.4555
2. **Cheung R, Yu B, Iordanous Y, Malvankar-Mehta MS.** The prevalence of occupational burnout among ophthalmologists: a systematic review and meta-analysis. *Psychol Rep.*2021;**124(5)**:2139-2154. Doi:10.1177/0033294120954135
3. **Garrido-Hermosilla AM, Soto-Sierra M, Díaz-Ruiz MC, Gutiérrez-Sánchez E, Franch ER.** Syndrome of professional wear and tear or «burnout» in Andalusian ophthalmology. *Archivos de la Sociedad Española de Oftalmología (English Edition).* 2021;**96(2)**:63-68. Doi: 10.1016/j.oftale.2020.08.001
4. **Feng S, Yi JS, Deitz G, Ding L, Van Gelder RN, Menda S.** Relationships Between Sleep, Activity, and Burnout in Ophthalmology Residents. *J Surg Educ.* 2021;**78(3)**:1035-1040. Doi: 10.1016/j.jsurg.2020.09.003.
5. **Sealey KN, Blatt SA, Legault GL, Godfrey KJ, Syed MF.** Job Satisfaction, Well-Being, and Burnout among Ophthalmology Educators. *J Acad Ophthalmol.* 2023;**15(01)**:e11-15. Doi: 10.1055/s-0042-1758566.
6. **Nair AG, Jain P, Agarwal A, Jain V.** Work satisfaction, burnout, and gender-based inequalities among ophthalmologists in India: A survey. *Work.* 2017;**56(2)**:221-28. Doi:10.3233/WOR-172488
7. **Honavar SG.** Healing the healer: Burnout prevention and rescue strategies. *Indian J Ophthalmol.* 2018;**66(5)**:611-613. Doi:10.4103/ijo.IJO_612_18
8. **Van Dam A.** A clinical perspective on burnout: diagnosis, classification, and treatment of clinical burnout. *Eur J Work Org Psychol.* 2021;**30(5)**:732-741. Doi: 10.1080/1359432X.2021.1948400