

Short Communication

When Doctors becomes Frightened

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Received: November 27, 2020; **Accepted:** December 18, 2020; **Published:** December 25, 2020

A research project concludes that doctors need to deal with their personal anxiety if they are to learn to rise to the occasion as team leaders in life-threatening situations.

Newly Trained Doctors are Challenged when the Situation Becomes Chaotic

Doctors are trained to help other people. We see them as calm, well-considered individuals whose main purpose is to examine and treat patients. They have a long education as well as extensive knowledge and do everything based on rational and well-thought-out decisions.

This is how we all want to see the person whose hands we put our life and health in. But is that always right? Or are doctors just as ordinary people are? People who may experience worry, stress and anxiety when they are in a chaotic situation holding another person's life in their hands.

In an article in the journal Heliyon in 2018 [1], we describe how the research for several years described the life-threatening situations in the hospital as a challenge, especially for newly qualified doctors. The situation may cause anxiety in the young doctor.

30 Years of Stagnation in Emergency Situations

In a recent article published in Austin Emergency Medicine (When doctors try to count the uncountable) we described how our first study-a systematic review [2] revealed that young doctors were not prepared to take the lead in emergency situations. In our second study, we reviewed the articles included in the review for descriptions of the challenge young physicians experience in the life-threatening clinical situation.

Like a Duck

Upon closer study of the articles, we found that leadership in acute situations evokes strong emotions in physicians. The acute situation is described as 'unpredictable', 'stressful', 'chaotic' and 'anxiety-provoking'. Doctors respond with 'concern', 'worry', 'lack of confidence', 'anxiety' and 'panic'. They felt unprepared [3].

Doctors can also become afraid - not only of not acting professionally, but also of harming another human being - no matter how extensive their professional knowledge is.

A description of the situation and the emotions was found in the Kolehmainen study from 2014:

Participants explained that the code leader should be the 'chaos control factor' and project a composed demeanor to 'help calm other people down.' They also described often being 'panicked' but trying to appear as the 'calmest person in the room.'

One likened his behavior to a duck, saying: 'If you've ever watched a duck on a pond, it looks as though it's floating effortlessly across the lake. But if you've ever looked underneath at a duck's feet, they're paddling feverishly' [4].

Professionalism is Trained but What about Leadership?

As we did not find any training in leadership in our search, but only medical professional clinical training, it became obvious that the pressure to which the young doctor was exposed in his clinical everyday life had not yet been dealt with.

The clinical training challenged their professionalism how quickly, for example, heart massage was started. But the leadership training was not necessarily noticed and not explicitly trained.

Despite the literature's request for workable leadership training and the description of the strong emotions associated with the situation, the researchers had not taken the initiative to deal with the anxiety the young physicians experienced in the leadership role in the challenged situation [5,6].

The doctor that helps other people seems completely to overlook the need for help in their own ranks?

It seems crucial to find ways to deal with young doctors' anxiety. The strength must come from within, but we cannot expect the young doctors to find it by themselves they need help.

'Am I Doing OK?'

We do not think it is possible to train professional knowledge and leadership simultaneously.

As a newly qualified doctor, you are very focused on the professionalism you show being correct.

Leadership, on the contrary, is an intuitive relationship between people, and it is characterized by fast emotions and sensations [7]. Emotions and sensations we do not talk about being well-considered and calm doctors.

The Power of Body Language

The results of our study suggest that it is necessary to find a way to train the negative emotions that arise in the young doctor, due to the anxiety that he or she may be affected by in particularly stressful situations. This anxiety may paralyze the doctor. The learning goal is therefore to work directly with the young doctors' anxiety as well as body language. If we can train the younger doctors to step up, take

on the 'jacket of authority', become aware of radiating calmness and confidence and deliberately work with their charisma, power and body language, they may be able to avoid panicking their brains [8].

If the team leader calms down in an emergency situation he also creates calmness for the team:

The ability to radiate confidence and calmness was highlighted by several team members. One nurse said that if the leader seems confident she feels confident too. A young surgeon recalled a situation where he experienced a leader who remained calm in a stressful situation and emphasized that this had made a big impression on him [9].

Need New Methods to Deal with Anxiety

When doctors mix professional training and training in relationship to other people at the same time in a tense situation, the professional role will dominate the content of the training. The young doctors do not learn to deal with anxiety when the learning goals are mixed. It is the patient's safety and ultimately death that are at stake when the doctor himself becomes frightened.

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