

# Beyond Everest

Reflections on life in the mountains and neurosurgery

Douglas Brockmeyer MD  
University of Utah  
Salt Lake City, UT







“Because it’s there”



















I still had a long, long way to go...

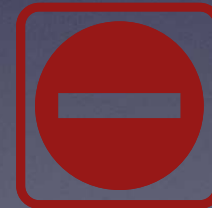


Why Everest?  
Is it for me?  
Is it for anybody?  
Or everybody?

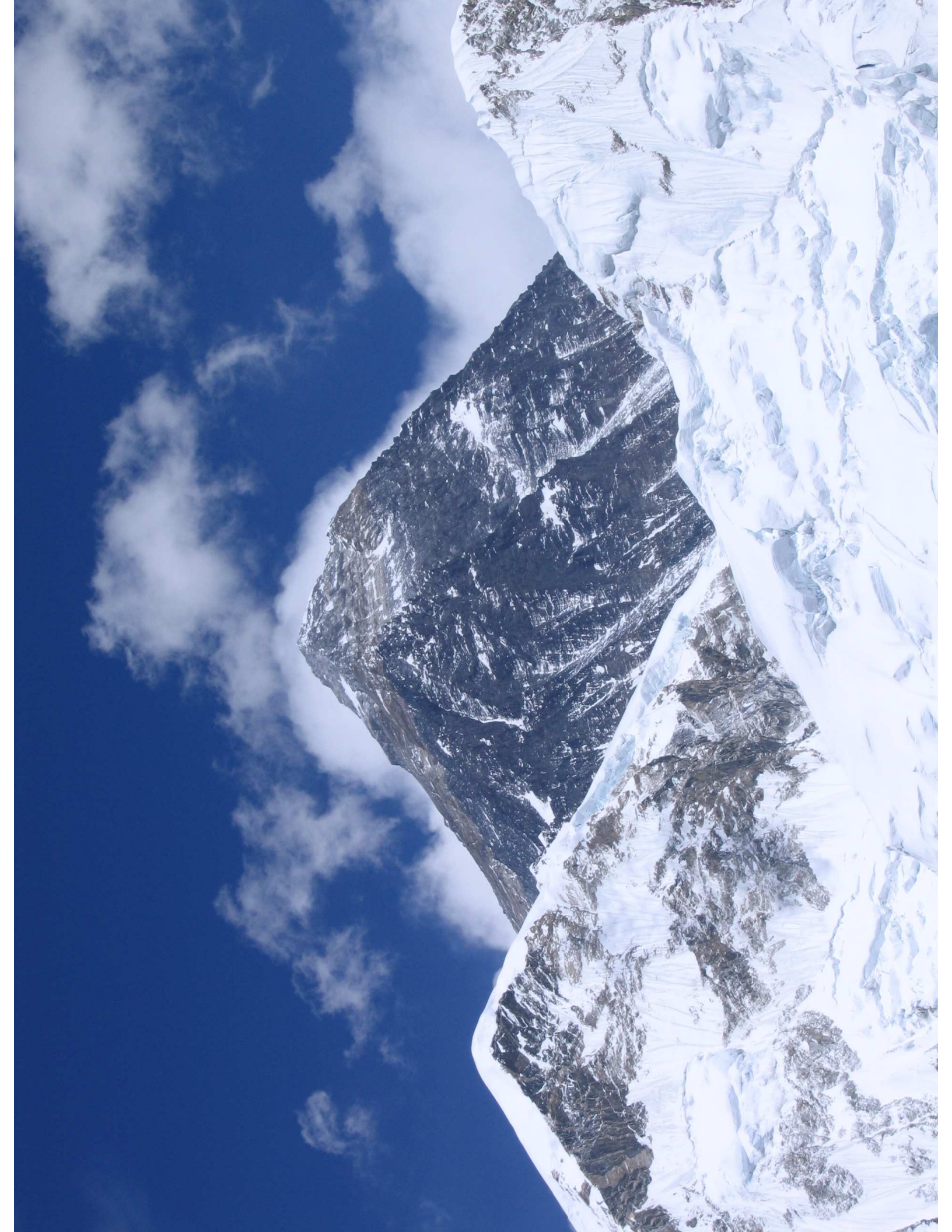
Alaska  
Europe  
Equador  
Peru



Himalaya



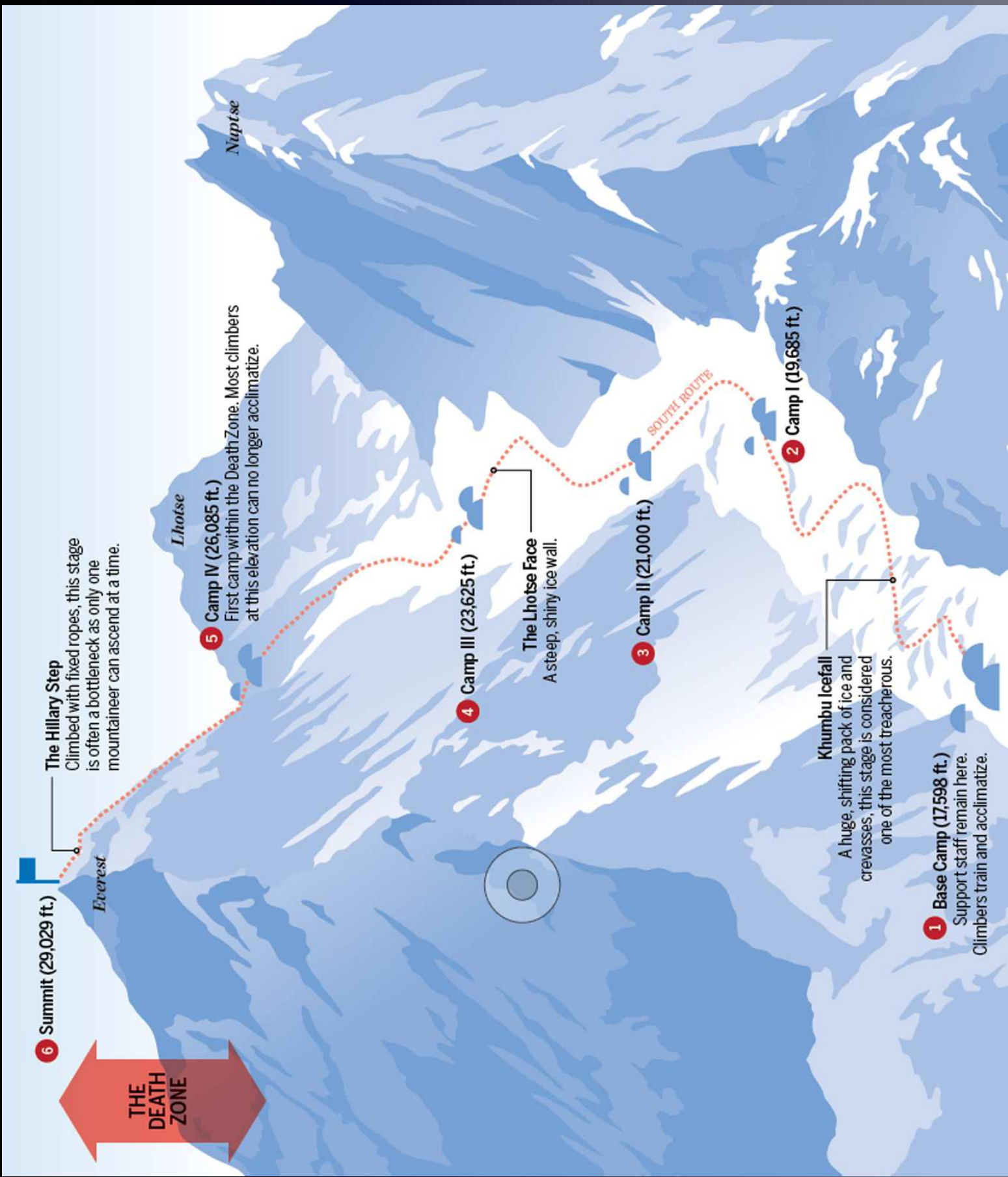












6 Summit (29,029 ft.)

#### The Hillary Step

Climbed with fixed ropes, this stage is often a bottleneck as only one mountaineer can ascend at a time.

THE  
DEATH  
ZONE

5 Camp IV (26,085 ft.)

First camp within the Death Zone. Most climbers at this elevation can no longer acclimatize.

4 Camp III (23,625 ft.)

#### The Lhotse Face

A steep, shiny ice wall.

3 Camp II (21,000 ft.)

SOUTH ROUTE

2 Camp I (19,685 ft.)

#### Khumbu Icefall

A huge, shifting pack of ice and crevasses, this stage is considered one of the most treacherous.

1 Base Camp (17,598 ft.)

Support staff remain here. Climbers train and acclimatize.

Nuptse

Lhotse

Everest











# “Right Mind, Right Intent”

Right View  
Right Resolve  
Right Speech  
Right Conduct



Right Livelihood  
Right Effort  
Right Mindfulness  
Right Practice

The Noble Eightfold Path





















































2005





2009





2019















Meaning  
Is  
Everywhere



Humility  
Gratitude  
Patience  
Serenity

But for how long???



Selflessness  
vs.  
Selfishness



Why Ride?    Why Swim?  
Why Hike? Why Meditate?  
Why Play?    Why Pray?  
                Why Climb?  
Why Cook?    Why Dive?  
Why Read? Why Dance?  
Why Run?      Why Knit?



“Because It’s There”

Because You’re Here



How do we take  
care of ourselves?



# Balance vs. Burnout

## ....or worse



Addiction  
Depression  
Dishonesty  
Mental Illness  
Suicide



## The Prevalence of Burnout Among US Neurosurgery Residents

Hakeem J Shakir, MD, Matthew J McPheeters, MD, MBA, Hussain Shallwani, MD, Joseph E Pittari, BS, Renée M Reynolds, MD ✉

*Neurosurgery*, Volume 83, Issue 3, 1 September 2018, Pages 582–590,

[Ann Thorac Surg](#). 2017 Oct;104(4):1117-1122. doi: 10.1016/j.athoracsur.2017.08.009.

## Physician Burnout: Are We Treating the Symptoms Instead of the Disease?

Squiers JJ<sup>1</sup>, Lobdell KW<sup>2</sup>, Fann JJ<sup>3</sup>, DiMaio JM<sup>4</sup>.

## The Modern Neurosurgical Leader as a Cure for Team Burnout FREE

Youssef J. Hamade, MD, MSCI, Rami James N. Aoun, MD, MPH, Richard S. Zimmerman, MD, Bernard R. Bendok, MD, MSCI

*Neurosurgery*, Volume 77, Issue 2, 1 August 2015, Pages N13, <https://doi.org/10.1227/01.neu.0000467292.26010.c3>

**Published:** 01 August 2015

[World Neurosurg](#). 2016 Jun;90:380-384. doi: 10.1016/j.wneu.2016.03.024. Epub 2016 Mar 19.

## The Importance of Exercise in the Well-Rounded Physician: Dialogue for the Inclusion of a Physical Fitness Program in Neurosurgery Resident Training.

Fargen KM<sup>1</sup>, Spiotta AM<sup>2</sup>, Turner RD<sup>2</sup>, Patel S<sup>2</sup>.

## Letter: How to Combat the Burnout Crisis in Neurosurgery? Cathedrals and Mentorship FREE

Alejandro M Spiotta, MD, Stephen P Kalhorn, MD, Sunil J Patel, MD

*Neurosurgery*, nyy611, <https://doi.org/10.1093/neuros/nyy611>

## Impact of a Residency-Integrated Wellness Program on Resident Mental Health, Sleepiness, and Quality of Life

Alejandro M Spiotta, MD ✉, Kyle M Fargen, MD, MPH, Sunil Patel, MD, Thomas Larrew, MD, Raymond D Turner, MD

*Neurosurgery*, Volume 84, Issue 2, 1 February 2019, Pages 341–346,

[Dis Colon Rectum](#). 2017 Jun;60(6):567-576. doi: 10.1097/DCR.0000000000000844.

## Physician Burnout and Well-Being: A Systematic Review and Framework for Action.

Rothenberger DA<sup>1</sup>.



## Factors associated with career satisfaction and burnout among US neurosurgeons: results of a nationwide survey

Joseph H. McAbee, BS,<sup>1</sup> Brian T. Ragel, MD,<sup>2</sup> Shirley McCartney, PhD,<sup>2</sup> G. Morgan Jones, PharmD, BCPS,<sup>3,4,5</sup> L. Madison Michael II, MD,<sup>3,6</sup> Michael DeCuyper, MD, PhD,<sup>3</sup> Joseph S. Cheng, MD, MS,<sup>7</sup> Frederick A. Boop, MD,<sup>3,6,8</sup> and Paul Klimo Jr., MD, MPH<sup>3,6,8</sup>

<sup>1</sup>School of Medicine, Wake Forest University, Winston-Salem, North Carolina; <sup>2</sup>Department of Neurological Surgery, Oregon Health & Science University, Portland, Oregon; <sup>3</sup>Departments of <sup>4</sup>Neurosurgery, <sup>5</sup>Neurology, and <sup>6</sup>Clinical Pharmacy, University of Tennessee Health Science Center; <sup>7</sup>Semmes-Murphey Neurologic & Spine Institute; <sup>8</sup>Le Bonheur Neuroscience Institute, Le Bonheur Children's Hospital, Memphis; and <sup>7</sup>Department of Neurosurgery, Vanderbilt University Medical Center, Nashville, Tennessee

**OBJECT** The object of this study was to identify and quantify predictors of burnout and career satisfaction among US neurosurgeons.

**METHODS** All US members (3247) of the American Association of Neurological Surgeons (AANS) were invited to participate in a survey between September and December 2012. Responses were evaluated through univariate analysis. Factors independently associated with burnout and career satisfaction were determined using multivariable logistic regression. Subgroup analysis of academic and nonacademic neurosurgeons was performed as well.

**RESULTS** The survey response rate was 24% (783 members). The majority of respondents were male, 40–60 years old, in a stable relationship, with children, working in a group or university practice, and trained in a subspecialty. More than 80% of respondents reported being at least somewhat satisfied with their career, and 70% would choose a career in neurosurgery again; however, only 20% of neurosurgeons believed that the profession would improve in the future, and 52% believed it would worsen. The overall burnout rate was 56.7%. Factors independently associated with both burnout and career satisfaction included achieving a balance between work and life outside the hospital (burnout OR 0.45, satisfaction OR 10.0) and anxiety (burnout OR 1.04, satisfaction OR 0.32). While the burnout rate for nonacademic neurosurgeons (59.3%) was higher than that for academic neurosurgeons (47.7%), academicians who had practiced for over 20 years were less likely to be satisfied with their careers.

**CONCLUSIONS** The rates of burnout and career satisfaction were both high in this survey study of US neurosurgeons. The negative effects of burnout on the lives of surgeons, patients, and their families require further study and probably necessitate the development of interventional programs at local, regional, and even national levels.

<http://thejns.org/doi/abs/10.3171/2014.12.JNS141348>

**KEY WORDS** neurosurgery; burnout; career; satisfaction; survey; health care reform



# Suggested Methods To Combat Burnout:

Mentorship

Leadership

Sense of Purpose

Physical Activity

“Wellness”

Others...



Balance

Intention/Mindfulness

Gratitude

That's what beyond Everest



“The master in the art of living makes little distinction between his work and his play, his labor and his leisure, his mind and his body, his education and his religion. He hardly knows which is which; he simply pursues his vision of excellence in whatever he does, leaving others to decide whether he is working or playing. To him his is always doing both”

James Michener





The day I joined the 30,440 ft. club

Thank you for your attention