Burnout is the daily crises in our lives—at work, home and among family members and friends—all combined. It is our fears and frustrations concerning life’s continuing problems. When these problems multiply faster than we can handle them, we move into a state of emotional and mental exhaustion, unable to cope with it ourselves.

Paramedicine is in its embryonic stages. Because of so many medicolegal questions, limited advancements within the field and little or no releases, the paramedic is left vulnerable to emotional disaster.

There are many kinds of jobs, some with more stress than others. Working in a large city—especially San Francisco, with over a 1 million population and so many different types of lifestyles—creates interesting problems.

Paramedics trying to solve other people’s problems often forget about themselves. We get a double dose. It is difficult dealing constantly, day after day, with the sick and injured, emotionally distraught and death and the dying patient. Yet, we deal with them during every call, every shift, every day, year by year.

I get rid of a lot of my stress by telling jokes, teaching emergency prehospital care, talking about my inner thoughts to my wife, friends and other paramedics. Sometimes, a hot bubble bath, a good book, sex, a health exercise program, hobbies and other outside interests—all of these help. But are these true answers to solve our problem? For some, yes, and for others, no. When I find myself eating or sleeping poorly, cranky with patients, friends and family, I realize I’d better take a vacation—and do so before it’s too late.

Some paramedics are digusted with parts or all aspects of their work. Stress is the biggest factor. If the paramedic cannot or will not deal with the job’s stress, he or she will burn out. Burnout is the feeling of great emotional stress—stress that has been dealt with for years, but now the subconscious mind takes over and communicates to the conscious, resulting in bad thoughts that cause great depression. If the person continues these though patterns, he’ll usually end up telling himself that the job stinks.

How do we deal with the burnout of job stress? We each deal with it in our own way every day.

For example, a 72-year old male is found dead on arrival in the kitchen of his home with his 68-year old wife at this side. As you arrive, you find there is nothing you can do for the man in the prehospital setting. Your patient now is the wife. She needs psychological and emotional care and support. She asks you to do something but you say there is nothing you can do for the man. And now she says to you, “I’ve lived fore more than 53
years with the man.” And you say to yourself, “What do I do now? What do I say to her?” And she says, “Why? Why now?”

A four-year old boy is stabbed in the upper left chest, and as you stabilize him and go code 3 to the hospital with the sirens screaming the child turns to you and says, “Why? Why did Mommy stab me?” And as a tear trickles down his face, you quickly hide yours.

There are the screaming cries of burned children, crushed bodies of abused children found locked in closets filled with feces, a 91-year old man who has lived 26 years in an apartment, who runs out of money three days before Christmas and is being thrown out onto the rainy streets by the manager—and I find him hanging. We see lonely people.

When I have a patient in pain, I want to take the pain away myself. It hurts me, too. When I see bleeding, I want to stop it. When a bone is broken, I want to mend it. When a person needs me, I’m there. When a patient dies in my arms, and I can’t stop it, a part of me dies too. How do we deal with these feelings? Do we drink; take drugs to wash away the pain we have? Paramedics are people, too. These are but a few reasons why paramedics burn out. Feeling emotionally sick, we may give up, unable to take it any more. It’s probably easier to be a truck driver and the pay is probably a lot better too.

Why do some of us continue to work in the field? Because we love it. Because we care about people and have compassion for them. And just maybe, we can save a life—by stopping that bleeding, clearing that airway and stopping the pain.

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