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## Sudden cardiac death in physicians: an alarming problem in China

To the Editor,

The recent revised declaration of Geneva highlights that physicians should attend to their own health, well-being, and abilities in order to provide care of the highest standard (1). Nevertheless, in China, sudden cardiac death has frequently occurred in the past 2 years. In our statistical analysis, the number of physician deaths was 17 and 23 in 2016 and 2017, respectively, which were notably increased compared with the reported 29 deaths from November 2008 to April 2015 (2). The percentage of male physicians was 95.7%. The mean age was 36.30±8.41 years. In this year, sudden cardiac death occurred in nine surgeons, five anesthesiologists, six internal physicians, and three intervention specialists. A 24-h shift or a night shift (11 cases) and preparing a ranking examination (7 cases) were the most common causes.

Male physicians, especially physicians in surgery and operative care, have larger overloads and longer working hours, which may be the primary cause of death. Besides, incorrect stress relief manners also affect physicians' healths, such as excessive alcohol consumption, smoking, and long-term energy drink consumption (3). Lack of exercise and obesity also increase the risk of acute myocardial infarction and stroke. Physicians usually neglect regular medical checkup themselves, which results in some potential diseases not being timely detected, such as hypertension, hyperlipidemia, and hyperuricemia.

The incidence of sudden death was also closely associated with economic and social factors. Middle-aged physicians

have heavy familial responsibilities, such as supporting parents, rearing children, and mortgage payments, which cause them to work harder. Deteriorated working environment, serious violence against doctors, and decreased patient-physician trust also intensified the sense of "burnout" in Chinese doctors (4, 5). Besides, because of the uneven distribution of healthcare resources in China, more than 70% of deaths were of physicians from tertiary hospitals.

We suggest that physicians should take responsibility for their own health. They should regularly perform aerobic exercise or connect with families and friends for support, instead of excessive smoking and drinking. Besides, regular medical checkup is an effective approach to decrease the risk of some potential diseases such as coronary artery disease, hypertension, and stroke. Government and media should help to improve the working environment and re-establish patient-physician trust, which may further decrease the sense of "burnout" for physicians (4, 5). Imperative changes for the assessments of physicians in China are also required to decrease the pressure of publishing papers or frequently preparing professional examinations.

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