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Are Well-Rested Docs Really Best?

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Have you ever worked 30 straight hours? Is it even possible? Apparently it is, as physicians report working these endless shifts whenever circumstances require it.

“There were plenty of nights riding home after being on call, and I would fall asleep at stoplights in downtown Cleveland,” says gastroenterologist Christopher Magiera, MD. “You’d be riding with the windows down in sub-zero air in your face to stay awake, music blaring and sometimes, you wake up to horns honking because you’re stopped at a green light.”

After that kind of experience, you might think Magiera, who now practices in central Wisconsin, would be against long hours for doctors. But he’s not. In fact, he refers to recently passed limits for medical residents as a “candy pants 80-hour work week.”

“The best learning takes place on the fly and under stress, and if you just punch in eight to five and go home, you’re not getting the whole experience,” according to Dr. Magiera.

Magiera’s wife also knows something about long hours. A general surgeon, Pamela Galloway, MD, says it may well be in the patient’s best interest to have his or her doctor work a 20 or 30-hour shift. For appendicitis cases, for example, Dr. Galloway says it may take 8-12 hours of testing to figure out that the lower abdominal pain actually is due to appendicitis and not some other disorder. Being there for the patient throughout this crisis “may not fit into an 80-hour work week.”

Besides, Galloway says these are sporadic shifts. “When I was on call, if I got two hours of sleep, I actually felt pretty good the next day,” she adds. “You aren’t always working those uninterrupted 36-hour shifts.”

But there are specialists who do work consecutive days with little sleep, and maintain it’s reasonable, nonetheless, under the circumstances. Neonatologist Dennis Costakos, MD is among them. The La Crosse, Wisconsin physician has, from time to

time, had to endure two-three straight weeks of being on call and being up at night. Costakos says he may not be safe to drive, but he can resuscitate a patient because it's rote.

"It's so built in, so automatic. Your hands are doing it, and you're dictating the drugs dosages, and it's just done because of the training I've had," Costakos says. Like Magiera and Galloway, he also has reservations about limiting residents' work hours to 80 per week.

"Do you want a situation where the people in training never do more than a 14-hour day and the minute they graduate you ask them to do a week (of 14 hour days) in a row?" Remember, there may not be any limits on work hours once a doctor completes a residency program.

Lu Ann Moraski, DO, is a residency director at the Medical College of Wisconsin in Milwaukee. "I look back at the things I did as an intern and if you asked me today, could I do that? I'd tell you no," says Dr. Moraski, who is an internist and a pediatrician. "You worked hard. It was crazy. I distinctly recall procedures that I did working with people all night, multiple codes. I can't imagine a time of such growth. You're in the thick of it. You do what you're supposed to do."

And that is, like it or not, how doctors learn. "The longer you're around seeing what happens, the more experience you get, and it makes for a greater depth of knowledge and confidence and intuition," explains Adam Dachman, DO, a general surgeon from southern Wisconsin. "It makes you more of a Jedi around the hospital. I was the last of the old school. I did those long two-day things, with no sleep."

Transplant surgeon Munci Kalayoglu, of Istanbul, Turkey is all too familiar with sleep deprivation. And he says sleepless nights are simply part of the job. He recalls his first liver transplant surgery where he got little sleep over 60 straight hours.

"I slept in the intensive care unit. I slept with the patient. You cannot say tired in this business," says Dr. Kalayoglu. "You don't have a right to complain because you start with the patient. The patient needs you. If you do mistake, the patient will die."

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