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Job Stressors and Mental Health

Aristotle is quoted as having a medical aphorism ‘the treatment of the part should never be undertaken without consideration of the whole person; that is the error of our day, the separation of the body from the soul’. One cannot open any recent academic occupation journal without at least a cursory appreciation of literature associating work stress with absence or at least pre-senteeism. In their latest consolidated work, Drs. Belkic and Savic have provided a concise treatise worthy of exploring this psychological bridge. With growing persistence, the authors have laid a foundation into a field using techniques drawn primarily from their work, though citing literature support for the avenues chosen. The relation of Job Stress to Mental Health, their stated aim for publication, has benefited from their efforts.

Many areas of strength from this resource become apparent as one advances through the chapters. Discussion on retirement impacts is a good reminder to physicians caring for this population. Silent work awareness can only help improve a more comprehensive discussion. Mechanisms of disease, in particular the qEEG, can help both clinician and researcher. The section on automatic vs controlled processes harkens to the Nobel work of Kahneman and Twersky in the latter System 1 vs System 2. Chapter 4 has an excellent overview on return to work considerations from the stress perspective. Chapter 5 begins a more hands-on understanding of the OSI questionnaire. With the case example chapters, a working knowledge and comfort with the instrument seems minor in the hands of our authors, though many of us would want more support to process this important paradigm. Their call for Occupational Neuropsychiatry specialization is an important academic debate as many specialties including Internal Medicine have the breadth of patient experience to participate in this field without the necessity of formal neurologic training.

The text and its organization makes the read a pleasure. For those of us with highly organized traits, which is most medical professionals, the authors lead us in a commendable highly organized fashion. Minor publishing shortcomings do exist in this first printing. Typographical errors are found on pages 42, 132 and 170. The Panel figures can be hard to read. The book is so well organized, that the more limited indexing section does not present a barrier-though most are used to greater referencing from the back of the book.

Limitations of their good work need to be addressed in upcoming years. For example, what are we to make of the changed definitions for all psychological processes with the advent of Diagnostic and Statistical Manual V? Literature exploring the psychological realm was based on case definitions which technically no longer apply. Much of their work has been looking at job stressors, but how is this affected when the patient is now in a medical legal claims process? What happens to the OSI scoring and values with populations embroiled in work site disputes? Could qEEG be used as a diagnostic aid?

The logo for HymanHEALTH features the name 'Hyman' in a green, handwritten-style font, followed by 'HEALTH' in a bold, black, sans-serif font.

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This work helps complement other major attempts at advancing the discussion on approaches to the work environment. The American Medical Association Guides series, especially on Return to Work and Disease and Injury Causation highlight the converging runway of ideas. Clinicians and researchers interested in divining signals from patient presentation that aids in encircling the whole person will want to read this work. Evolution of integration across disciplines are needed by both patients and society. Quality care and money well spent demand this action.

Sincerely,

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