Psychological and Emotional Growth after Adverse Events and Malpractice Lawsuits

A pathway to integration and meaning-making.

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Overview

- A word about “The Second Victim”
- Psychological and emotional impact of adverse events
- Impact of Malpractice Litigation
- How to respond to minimize negative impact, to improve wellbeing, to create a pathway to integration and meaning-making
- How your malpractice insurance can be supportive: The CRICO and Coverys Emotional Support Programs

“The Second Victim”

“Medical error: the second victim. The doctor who makes the mistake needs help, too.” (Wu, BMJ 2000)

- 2019 Editorial in BMJ: family members calling for ending use of the term
- 2021 study revealed healthcare and legal professionals’ discomfort with the term.

Tumelty 2021; Clarkson et al. 2019; Wu et al. 2017

New Term Needed

After preventable harm:

- Responsibility
- Accountability
- Empathy for patients who are harmed and support for their needs

"Victim" mindset is incompatible with patient safety and accountability.

Clarkson et al. 2019

Surgical Complications & Errors

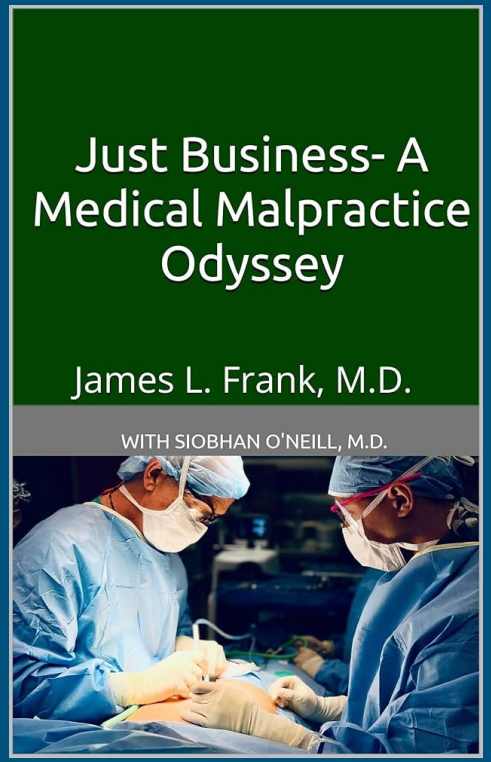
Complications will occur; errors are preventable.

Importance of culture of patient safety and support.

“Patients and professionals may be affected in two ways after an adverse event: first by the incident itself, and second, by the manner in which the incident is handled.”

Erikson, M. 2021; Ullstrom et al. 2013

One Surgeon's Experience

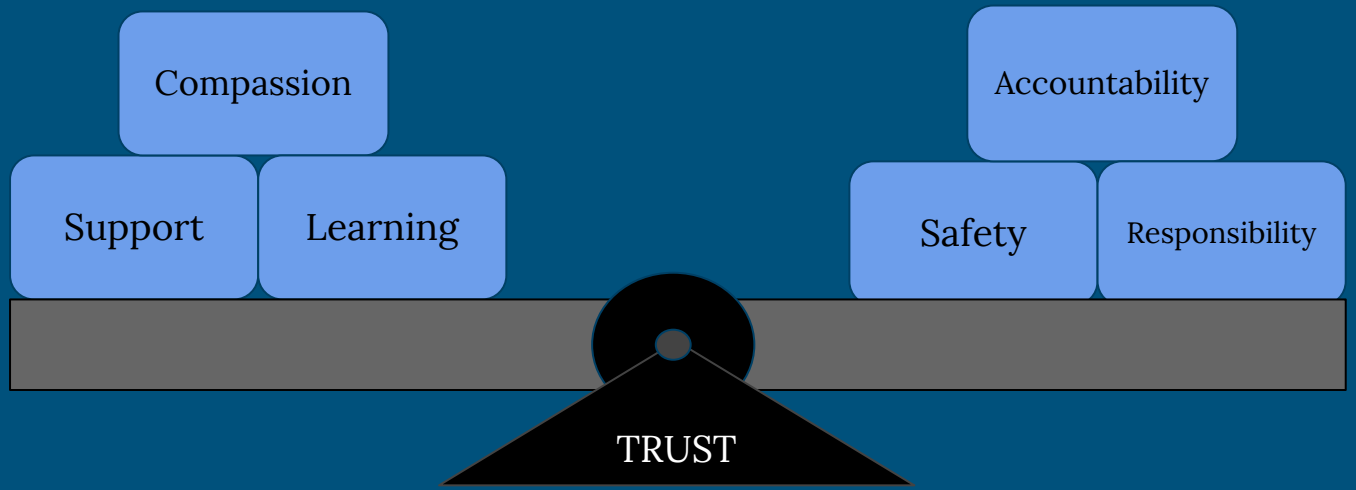


Devastating complication

Malpractice suit

An example of integration and meaning-making

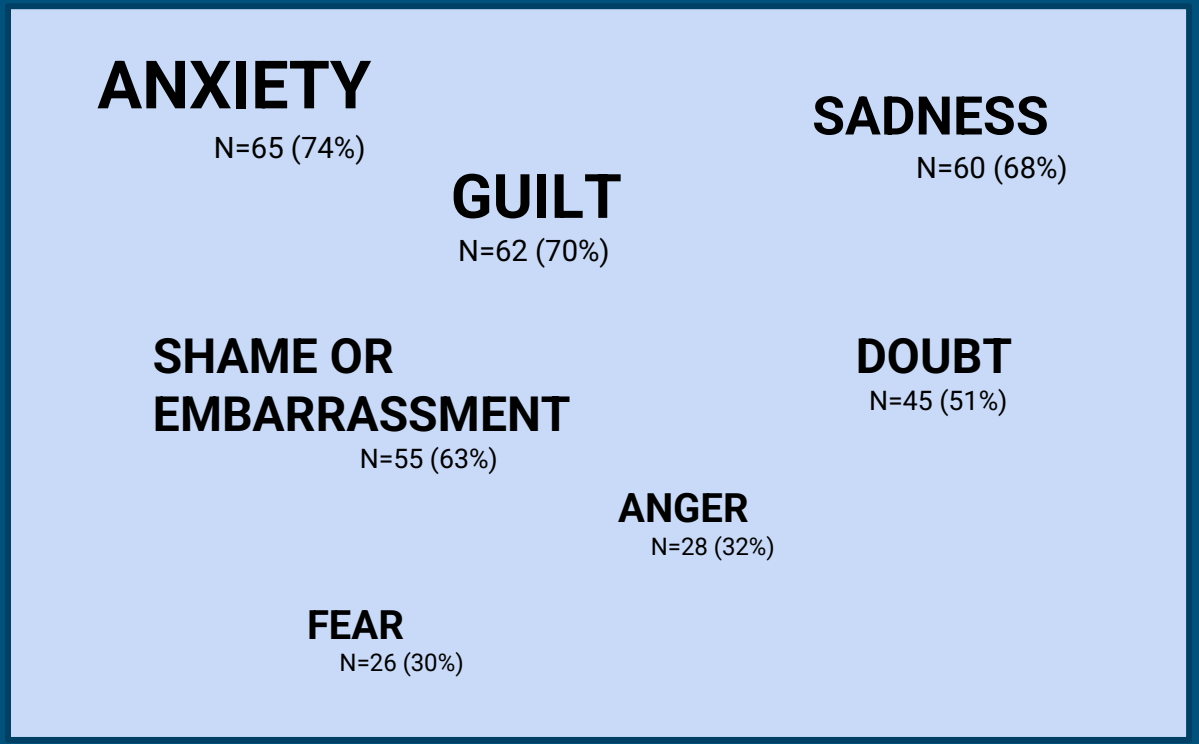
Just Culture



Impact of Errors on Surgeons

- Worry for patient
- Increased anxiety about future errors
- Decreased confidence
- Decreased job satisfaction
- Negative impact on interactions with colleagues
- Worry about reputation, disciplinary action
- Decreased sleep
- Negative impact on family life

Biggs et al. 2020; Waterman et al. 2007



Studer et al. 2025

Stages of Response to Adverse Surgical Events

1. “The Kick” a visceral blow to the core, shock, failure, “Am I good enough?”
2. “The Fall” free fall, chaos, spiralling out of control; guilt, “was it my fault?”
3. “The recovery” what can be learned? How can I move on?
4. Long -term impact- prolonged and cumulative effects on personal and professional identity and clinical judgement

Luu, Patel et al. 2012; Luu, Leung et al. 2012

Importance of Support

Most helpful measures:

- Discussion with colleagues
- Peer support
- Involvement with patient and family

Waterman et al. 2007; Studer et al. 2026; Biggs et al. 2020; Ullstrom et al. 2013

Most Critical Needs

- To talk with colleagues about what had happened to share emotional burden.
- To understand the event and to learn from it through discussion with others.
- When these needs not met: isolation, suffering in silence, lost opportunities for learning on individual and organisational level.

Ullstrom et al. 2013

Central Features of Effective Systems

- A culture of safety and support: Just Culture
- Stable and transparent procedures for investigation and analysis of adverse events
- Timely and continuous emotional support from managers and peers
- Professional psychological and emotional support where needed

Ullstrom et al. 2013

Barriers to Seeking Support

- "Macho culture"
- Blame culture
- Lack of understanding by person from whom seeking support
- Seniority
- "No time" /High workload
- Not wanting to burden others
- Confidentiality concerns

Biggs et al. 2020

How to Respond?

- Join with our patients, attending to their suffering and our own (the original intent of the Wu's editorial)

- Basics: sleep, exercise, meditation/stress management practices, personal relationships/supports

- Access support resources

Support Facilitates Integration and Recovery

-normalize the experience

-decrease isolation and shame

-Increase adaptive coping and functional response

-decrease maladaptive responses (negative narratives, depression, substance use, suicidality)

-Integration and meaning making, learning and growth

Personal Consequences of Malpractice Lawsuits on American Surgeons

90% of surgeons may be sued in career

Recent lawsuit strongly associated with:

- Burnout
- Depression
- Recent thoughts of suicide

Balch et al. 2011

Physician Suicide

Physicians are at higher risk of death by suicide than other professionals, and have 40% higher risk of suicide than the general population (higher for females than males).

- 300-400 US Physicians per year
- Physicians facing civil litigation were 61% more likely to commit suicide than the general population.
- Burnout and medical error appear to increase the risk of suicidal thoughts for surgeons
- Physician suicidality rising in recent years: 15% of physicians in 2024

Campbell, Darrell, 2010; Dyrbye et al. 2011;
Shanafelt et al. 2010; Dutheil, Frédéric, et al. 2019; Ji, Y. D., et al. 2020

Physician Suicidality

Protective Factors:

- Strong social connections and support
- Access to mental health services
- Safe and supportive environments
- Skill development: mindfulness and stress reduction
- Religious/spiritual beliefs

Medscape Physicians and Suicide report (2025)

Litigation Stress Syndrome

- Anxiety
- Depression
- Isolation
- Hopelessness
- Irritability
- Difficulty Concentrating
- Burnout
- Difficulty Sleeping
- Other Somatic Symptoms

Charles, *Adverse* (2005); Charles, Pysokty et al.

Risk Factors for LSS

1. Am I a loner?
2. Do I assign control of my destiny to others?
3. Am I a perfectionist?
4. Do I tend to beat up on myself when I miss the mark?
5. Is my primary identity that of physician?
6. Do I lack a community of support?
7. Do I lack stress reduction practices?
8. Do I suffer from burnout? 62.8% of physicians in 2021 (AMA 2025)
9. Do I have a history of serious trauma?

Bub et al. 2005

How Can Your Malpractice Insurance be Supportive?

Coverys - National, non-profit. Emotional Support Program >30 years. Individual and Peer Group Support.

CRICO- Eastern MA, non-profit. Emotional Support > 30 years. Peer Group Support for past 12 years.

Private, confidential, protected.

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Goals of Support Programs

To enhance clinician wellbeing

To increase effective collaboration with legal team

- increasing awareness of psychological and emotional responses
- cultivating a receptive mindstate- mind training
- managing reactivity/affect regulation
- integrating experience (integration is hallmark of wellbeing)

How Support Helps

Basic Psychological Needs:

Autonomy- increase capacity to exercise agency

Competence- increase knowledge base, confidence, mastery of new skills

Relatedness- mobilize existing social supports, form new ones - Peer Group

Restoring Meaning- narrative, reframing

Ryan and Deci (2000)

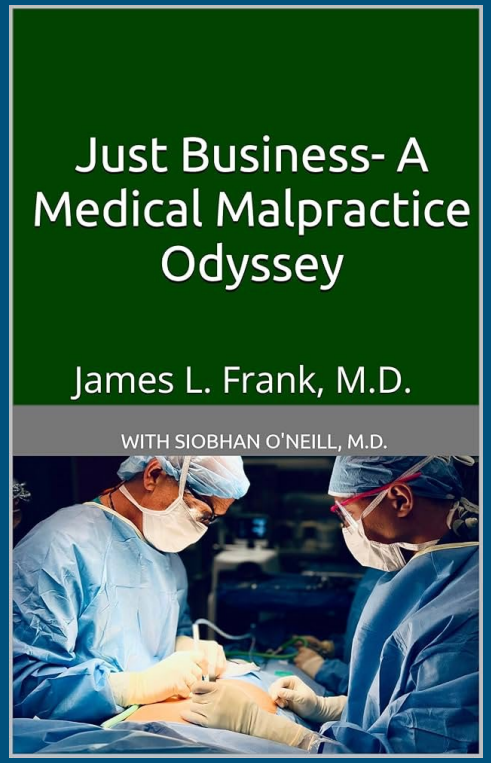
How Peer Groups Help

- Validation of emotions/safety to express
- Normalization of experience
- Reduces Shame
- Offers Hope
- Perspective/Cognitive framework
- Reduces isolation/restores belonging, relatedness
- Altruism- supporting others is healing

How to Engage in Support?

- Institutional support resources
- Medical malpractice insurance companies
- Talk to each other. Build community.
- PHS: Physician Health Services of State Medical Societies
- Physician Support Line: Volunteer Hotline 1-888-409-0141
- Suicide Hotline: 988 available 24/7/365 to call or text

One Surgeon's Experience



James Frank: "The trial is over, we await the jury verdict and I can now sleep well at night, knowing I did my best and I always told the truth. These past three weeks have been the most painful and draining part of a 40-year career in medicine and surgery. But, perhaps, a most beautiful experience in my personal life."

The Path to Integration and Meaning Making

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Questions?

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