

The Iatref study: medical errors are associated with symptoms of depression in ICU staff but not burnout or safety culture.

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<https://psnet.ahrq.gov/issue/iatref-study-medical-errors-are-associated-symptoms-depression-icu-staff-not-burnout-or>

Patients in the intensive care unit (ICU) are [particularly vulnerable](#) to medical errors, and the inherently stressful nature of the work may adversely affect providers as well. A [prior study](#) found a high incidence of burnout in neonatal ICU staff and demonstrated that increased rates of burnout were associated with worsened perceived [safety culture](#). This prospective observational study, conducted in 31 ICUs in France, sought to examine the relationship between [burnout](#), depression, safety culture, and adverse events. The investigators found that more than 30% of staff met objective criteria for being burned out, and more than 15% met clinical criteria for depression, which was an independent risk factor for medical errors. Overall safety culture was only fair, and better perceived safety culture did not attenuate the relationship between depression and medical errors. This study adds support for the belief that enhancing resilience in clinicians is a cornerstone of safety efforts, as articulated by safety expert Dr. J. Bryan Sexton in a past AHRQ WebM&M [interview](#).