

# Priority Topic: **STRESS**

## Key Features:

I think this Priority Topic is about “chronic stress”. (In contrast to “acute stress reaction, Post-traumatic stress disorder, and other Anxiety disorders)

### For yourself:

- ✓ [4-minute Body Scan Audio Clip](#)
- ✓ To know about McGill WELL Office - they provide **FREE HIGH-QUALITY counselling to residents!** [www.mcgill.ca/thewelloffice/well-office-homepage](http://www.mcgill.ca/thewelloffice/well-office-homepage)
- ✓ **Check out the app:** Insight Timer - free guided meditations
- ✓ [Physician Burnout AAFP 2015](#)

1. In a patient presenting with a [symptom](#) that could be [attributed to stress](#) (e.g., headache, fatigue, pain) [consider](#) and [ask about stress](#) as a cause or contributing factor.

### *What you should study:*

- ✓ [Chronic Stress AFP 2013](#)

2. In a patient in whom stress is identified, [assess the impact of the stress on their function](#) (i.e., coping vs. not coping, stress vs. distress).

### *What you should study:*

- ✓ [Distress thermometer NCCN](#)
- ✓ [The 5 steps of Psychosocial Distress Screening 2015](#)

3. In patients **not coping with stress**, look for and **diagnose**, if present, **mental illness** (e.g., depression, anxiety disorder).

**What you should study:** see **Priority Topics Anxiety, Depression**

4. In patients **not coping with the stress** in their lives,

- a) **Clarify** and **acknowledge** the **factors** contributing to the stress,
- b) Explore their **resources and possible solutions** for improving the situation.

**What you should study:**

✓ **CBT approach to stress reduction CMA**

✓ **Meditation: Mayo clinic**

5. In patients experiencing stress, **look for inappropriate coping mechanisms** (e.g., drugs, alcohol, eating, violence).

**What you should study:** see **also Priority Topic Substance Abuse**