

Winter Conference 2023, 5-6 December 2023, Diet and lifestyle strategies for prevention and management of multimorbidity

## Doctors' and nurses' eating practices during shift work: Findings from a qualitative study

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Doctors' and nurses' (DNs) wellbeing in the National Health Service is important for safe healthcare for those in need. However, their demanding duties, including irregular shift work, can significantly impact their health. Unfortunately, irregular working patterns are associated with higher sickness rates and stress among healthcare professionals due to the inherent challenges of the work<sup>(1,2)</sup>. For example, shift work disrupts sleep and impairs cognitive function and performance, leading to poorer physiological and cardiovascular health<sup>(3)</sup>, workforce shortages and difficulties adapting to a consistently demanding workload, which can impact patient care delivery<sup>(4)</sup>. Despite the importance of workplace health and nutrition for DNs, our understanding of their dietary practices during shift work remains limited. Therefore, gaining insights into DNs' eating habits during shifts is imperative to supporting their health. Our research aimed to understand DNs' eating practices during their work, including the types of food consumed throughout the day.

Online semi-structured interviews (n=16) were conducted with a convenience sample of current practising medical doctors (n=11) and nurses (n=5) in England. This provided an opportunity to compare and contrast the research data between DNs on workplace nutrition. All participants did shift work, encompassing varied working patterns, including day and night shifts, short and long days and weekends. Following Braun and Clarke's<sup>(5)</sup> approach, an inductive thematic analysis presented the findings.

Results elucidate six areas of DNs' eating practices and dietary intake: before and during shifts, on long shifts, after shifts, during night shifts, and on non-working days. Our data suggests that DNs prioritise their clinical responsibilities over their dietary intake at work. Consequently, they often miss eating opportunities and consume caffeine to stay alert during their shifts. Furthermore, DNs viewed night shifts as involving less healthy food choices. While participants expressed their intention to eat healthily during their shifts, their clinical responsibilities made maintaining regular and nutritious dietary practices throughout the day challenging. Nevertheless, DNs value their meal after a shift as the most important, as this could be the only meal they eat throughout the day.

Our results suggest that DNs' eating practices and dietary intake are sub-optimal to recommended dietary guidelines. It also suggests that eating practices are varied, individualised and not applicable to all, considering the many environmental and occupational factors contributing to DNs' nutritional behaviours. Therefore, dietary workplace interventions are recommended to improve DNs' dietary behaviours at work. Future research should explore DNs' eating practices through follow-up interviews at various time points. This approach will provide valuable insights into DNs' dietary and nutritional behaviours during shift work, helping to uncover additional barriers and challenges beyond DNs' daily experiences.

### References

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