

The Success Trap: When Achievement Becomes Your Prison

How high-achieving podiatrists sabotage their own freedom.

BY SHARON GROSSMAN, PHD

A successful podiatrist with 28 years in practice sits in his office at 3pm on a Thursday. The patient schedule is clear. All documentation is complete. Revenue is up compared to last year, despite working fewer hours. Logic says: go home. His nervous system says: you're abandoning your practice.

This is the achievement paradox that traps top performers in health-care. The same drive that built a thriving practice becomes the prison that prevents enjoying it. The rules that created success now sabotage freedom.

The Pattern That Built Success

Consider the typical trajectory of a successful podiatric practice. The early years require relentless effort—long clinical hours, evening documentation, weekend catch-up, saying yes to every patient. This grinding

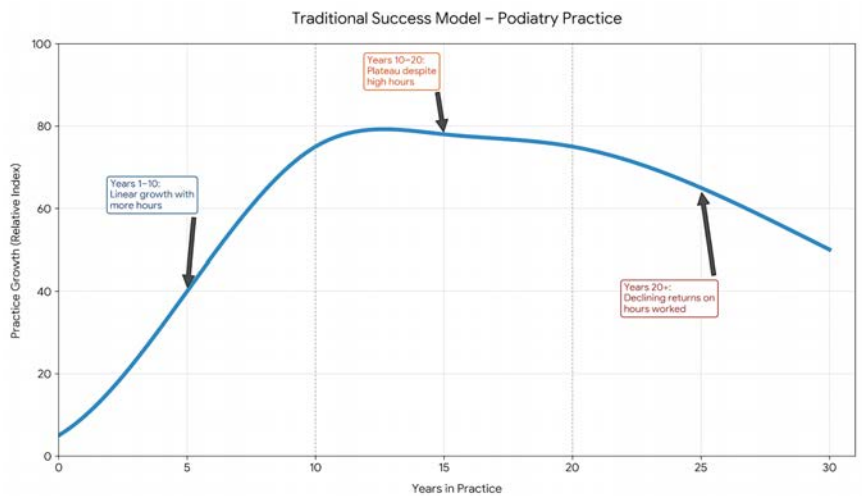


Figure 1: Graph showing traditional success model trajectory across career stages

When the Formula Stops Working

High-achieving podiatrists eventually reach a point where the old formula produces diminishing returns. Working more hours doesn't

Yet the internal voice refuses to update its programming. It still insists that leaving at 3pm represents professional failure, even when staying until 6pm adds no value. It generates guilt about taking a weekday off, even when the schedule is clear and coverage is arranged. This creates a bizarre situation: podiatrists who have proven they can maintain successful practices with less effort continue working as if they're still proving themselves. They've already won but keep playing like they're losing.

The Colleague Who Gets It

The contrast becomes obvious when comparing two podiatrists with similar practices. Both have built

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produces results. The practice grows. Revenue increases. Reputation solidifies. The pattern becomes reinforced: hard work equals success. More hours equal better outcomes. Constant availability demonstrates commitment. For years, maybe decades, this equation holds true. Until it doesn't (Figure 1).

increase patient satisfaction. Seeing more patients doesn't improve outcomes. Grinding harder doesn't grow revenue. In fact, the opposite often occurs. Exhaustion leads to mistakes. Overwork creates irritability that patients can sense. The inability to disconnect prevents strategic thinking about practice evolution.

PERSONAL DEVELOPMENT

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successful businesses over similar timeframes. Both face the same slow Thursday afternoon with no scheduled patients.

Podiatrist A finishes documentation, checks tomorrow’s schedule, and leaves at 2pm without a second thought. When asked about guilt, the response is simple: “Why would I feel

guilty? When it’s busy, I work. When it’s not, I leave. It’ll get busy again.”

Podiatrist B finishes the same tasks but cannot leave. Instead, they find busywork—reorganizing supply closets, reviewing old charts, checking email repeatedly. When finally leaving at 4pm, guilt accompanies them home. The internal narrative runs constantly: “Real professionals don’t leave early. What if an emer-

gency walks in? What if staff think I’m lazy?”

The difference isn’t work ethic. It’s trust. Podiatrist A trusts that taking time off during slow periods won’t destroy what has been built. Podiatrist B operates under an outdated rule that equates physical presence with professional value (Figure 2).

The Data Nobody Believes

When high-achieving podiatrists experiment with working less—starting later, leaving when work is done, taking full days off—something unexpected happens. Practice metrics improve.

Patient satisfaction scores go up because the podiatrist arrives more present and engaged. Clinical decision-making sharpens because exhaustion no longer clouds judgment. Staff morale improves because the leader models healthy boundaries.

Revenue often increases despite fewer hours because energy gets directed toward high-value activities rather than dispersed across low-value busy work. Yet when confronted with this evidence, successful podiatrists dismiss it. “That was just luck. An anomaly. It won’t last.” The mind generates elaborate explanations for why working less and getting better results represents a temporary aberration rather than a sustainable model.

This reveals the real problem: the issue isn’t knowledge. Most high-achieving podiatrists intellectually understand that not all hours provide equal value. They know rest improves performance. They recognize that strategic focus beats exhaustive grinding. But intellectual understanding doesn’t override emotional programming. The nervous system still sounds alarms when leaving early. The body still generates guilt when prioritizing personal time. Knowledge exists in the head while the old operating system runs the show.

The Voice That Won’t Let Go

That internal voice—the one insisting on constant work, generating guilt about rest, creating anxiety about delegation—served a critical function

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Feature	Trust-Based Model	Fear-Based Model
Work Patterns	Strategic, focused, and balanced. Prioritizes high-value work and delegation. Encourages time off and rest, leading to sustained energy and output. Work is seen as a means to achieve specific goals, not an endless performance metric.	Reactive, chaotic, and driven by volume. Focuses on long hours and busyness, often conflating effort with results. Discourages breaks and time off, leading to exhaustion and diminishing returns. Work is done to avoid failure or judgment.
Guilt Levels	Low. Guilt is primarily associated with failing to meet internal standards or commitments. Taking time off or stepping away from work is viewed as necessary for sustainability, not as a moral failing.	High and constant. Guilt is weaponized, both internally and externally. There is guilt over not working enough, guilt over taking a break, and guilt over not being “successful” enough. The feeling of being “not enough” is the primary motivator.
Outcomes	Sustainable growth, high loyalty, and strong leadership development. Achieves better long-term results through engaged, empowered, and rested employees/team members. Higher client and team retention. Growth is additive and compounding.	Short-term bursts of activity, high turnover, and dependence on the leader. Results are fragile and often achieved at the expense of well-being and team morale. Burnout is common for both the leader and the team. Growth is linear and capped by capacity.

Figure 2: Comparison table contrasting trust-based versus fear-based practice management approaches

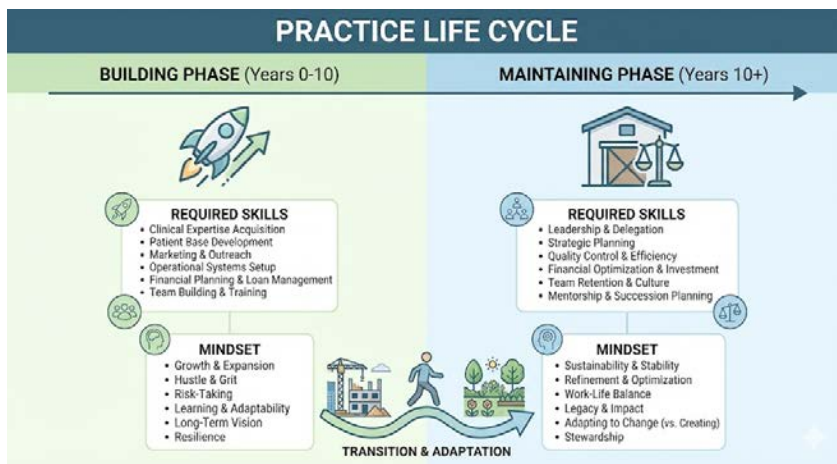


Figure 3: Practice lifecycle diagram distinguishing building phase from maintaining phase

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during practice building. It pushed through difficult early years. It maintained momentum when results came slowly. It protected against complacency when competition threatened. The problem isn't that this voice exists. The problem is that it doesn't know when its job is complete.

Building a practice and maintaining an established practice require fundamentally different approaches. Building demands proving yourself repeatedly. Maintaining requires confidence that you've already proven yourself. Building needs a guard dog that never sleeps. Maintaining needs strategic oversight that knows when to engage and when to rest.

Many podiatrists try to silence this protective voice entirely. They shame themselves for feeling guilty. They attempt to forcefully override anxiety about taking time off. This approach fails because that voice developed for valid reasons—it genuinely kept the practice safe during vulnerable early years (Figure 3).

The Reassignment Conversation

Rather than attempting to eliminate the protective voice, successful podiatrists learn to reassign it. This

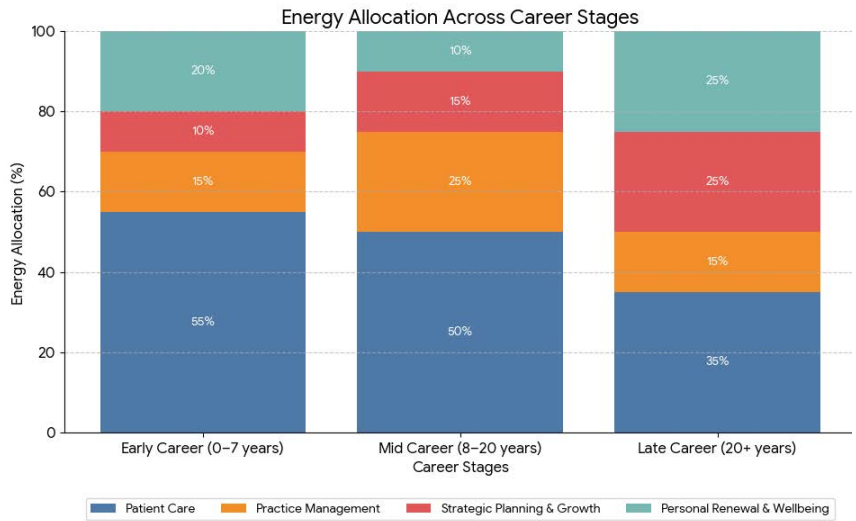


Figure 4: Energy allocation chart showing optimal time distribution across career progression

the voice but teaching it to distinguish between real threats and phantom ones.

Real threat: A systematic decline in patient satisfaction scores over multiple quarters.

Phantom threat: Leaving work at 3pm on a slow Thursday.

Real threat: Multiple staff members quitting within a short timeframe.

Phantom threat: Taking a full week of vacation with proper coverage arranged.

A podiatrist building a practice might reasonably work 60-hour weeks to establish patient base, reputation, and systems. That same podiatrist 20 years later, with an established practice, might maintain superior results with 35 strategic hours. The work doesn't become easier. It becomes different. Less grinding, more directing. Less proving, more refining. Less physical presence, more strategic impact.

Yet the internal programming often fails to update. The 55-year-old podiatrist with a thriving practice still operates under rules designed for the 30-year-old desperate to succeed (Figure 4).

The Questions Worth Asking

For podiatrists recognizing this pattern in themselves, several questions clarify whether old rules still serve or now sabotage:

What evidence contradicts the belief that constant work creates success? When have better results come from strategic rest rather than exhaustive effort? What happens to clinical judgment at hour 50 of the work week versus hour 30?

Which old rules still operate automatically? Does leaving when work is finished still trigger guilt? Does delegating create anxiety about losing control? Does taking vacation require justifying it to oneself, not just to staff?

What would change if trust replaced fear? If the default assumption

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Save your energy for genuine emergencies. A slow Thursday afternoon isn't one.

requires acknowledging its past value while establishing new parameters for current circumstances.

The internal dialogue might sound like: "Thank you for keeping this practice safe. The grinding you pushed me toward building everything I have. But circumstances have changed. The practice is established. Revenue is stable. Reputation is solid. Now I need you to trust the foundation we built together. Save your energy for genuine emergencies. A slow Thursday afternoon isn't one."

This approach honors the protective impulse while establishing boundaries around when it should activate. The goal isn't eliminating

Real threat: Declining clinical skills that affect patient outcomes.

Phantom threat: Not checking email for an entire weekend.

The Maintenance Mindset

Podiatrists who successfully make this transition describe a fundamental shift in how they think about work. The early-career question was: "How do I prove I'm good enough?" The established-career question becomes: "How do I maintain what I've built while preserving my capacity?" This isn't about working less for its own sake. It's about recognizing that different career stages require different energy allocations.

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became “the practice will be fine” rather than “everything will collapse without constant vigilance,” how would daily decisions shift?

Where does energy actually go versus where it should go? How much time gets consumed by low-value busywork versus high-impact activities? What percentage of work hours involve genuine productivity versus filling time to satisfy the internal taskmaster?

The Freedom That’s Already Available

The tragedy isn’t that high-achieving podiatrists lack freedom. It’s that they’ve already earned freedom but won’t claim it. The practice is built. The reputation is established. The systems work. The staff is competent. The revenue is stable.

Everything required for freedom already exists. What’s missing isn’t

external permission. It’s internal acceptance that the rules can change.

This doesn’t mean abandoning the drive that created success. It means directing that drive toward maintenance rather than constant building. It means trusting the foundation that decades of work created. It means acknowledging that not every hour of work provides equal value.

The podiatrist who leaves at 3pm on a slow Thursday isn’t abandoning their practice. They’re honoring their own capacity so they can show up fully when it matters. The one who takes a full week of vacation without checking email isn’t neglecting responsibilities. They’re maintaining the energy required for sustainable excellence.

Success that can’t be enjoyed isn’t freedom. It’s a gilded cage where the bars are built from outdated rules that once served but now imprison. The question for established podiatrists isn’t whether they’ve earned the right to work dif-

ferently. They have. The question is whether they’ll give themselves permission to accept what they’ve already proven. **PM**

***Author’s Note:** The figures in this article are conceptual models, synthesized from research on podiatrist workload, burnout, and practice maturity. The shapes and percentages are illustrative, but they reflect real patterns in the data.*



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