International Journal of Health Science

CLINICAL ASPECTS OF BURNOUT SYNDROME: INTEGRATIVE REVIEW

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Abstract: Goal: to carry out a survey of the existing scientific production on the clinical aspects of Burnout Syndrome in health professionals. Methods: integrative review with a search in Medline databases; Pubmed and Scielo of articles published in English, Portuguese and Spanish available online. The sample consisted of 09 articles. Results: there are many problems that affect the worker's life, thus creating a blockage and preventing him from following the natural course of his professional life. Psychological, social, cultural, physiological aspects, among others, have shown a direct relationship with Burnout Syndrome. Conclusion: It is extremely important to change the review of values that govern institutions, rescuing human values at work, to ensure the physical, mental and social security of the professional, this does not depend exclusively on the employer, but simultaneously on the worker himself. and the organization. It is necessary to outline programs to improve the environment and its organization, through effective worker health policies, thus contributing to the improvement of workers' quality of life.

Keywords: Burnout syndrome; Professional Exhaustion; Mental health; Worker's health.

INTRODUCTION

The term Burnout was first applied in 1974 by Herbert Freudenberger, an American psychoanalyst, who describes this phenomenon as a feeling of failure and exhaustion caused by an excessive use of energy and resources (FRANÇA, 1987; PERLMAN & HARTMAN, 1982 apud CARLOTTO; GOBBI, 2000).

The first studies were based on the authors' personal experiences, case studies, exploratory studies, observations, interviews or narratives based on specific programs and populations (LEITER & MASLACH, 1988; CORDES & DOUGHERTY, 1993 apud

CARLOTTO; CÂMARA, 2004).

The epidemiologies of Burnout Syndrome have a very curious aspect, with a predominance in women due to the double workload that reconciles professional practice and family work. Regarding marital status, it is more associated with people without a stable partner. Showing that in the early years of their professional career they would be more vulnerable to the development of Burnout (MARTINEZ, apud BALLONE, 2002).

Often, we don't notice it in the early stages, because most burnout sufferers are competent, self-sufficient men and women who hide their weaknesses well. However, it can affect many professionals, from any area and in any age group, although there are some occupations that present a high rate of Burnout. They are, in general, those who need a high degree of interpersonal contacts, such as professionals in the health, education, social services, among others.

Codo and Batista (1999) emphasize the Burnout Syndrome in a multidimensional concept that involves three components of the syndrome: emotional exhaustion, characterized by lack of motivation, feeling that they cannot give more of themselves, a depletion of energy and emotional resources.; Depersonalization, development of negative feelings and attitudes, affective hardening, "thingification" of accomplishment. Lack of personal involvement at work: people feel dissatisfied with themselves, affecting the ability to perform the work and service.

The Burnout process is individual. Its evolution can take years and even decades. Its appearance is gradual, cumulative, with a progressive increase in severity, not being noticed by the individual, who usually refuses to believe that something is wrong with him (FRANÇA, 1987; DOLAN, 1987; RUDOW, 1999 apud CARLOTTO, 2004).

Burnout Syndrome can cause serious damage, leading people to abandon work as a result of Burnout, others may even stay, however, productivity is below the real potential, causing problems in the quality of work. Generally, high levels of Burnout make professionals count the hours for the workday to end, often think about the next vacation and use countless medical certificates to relieve the stress and tension of work (CARLOTTO; GOBI, 2000).

The purpose of this study is to present aspects and concepts of Burnout Syndrome, a phenomenon still little known by professionals, in addition to the need to deepen studies and strategies to prevent it, contributing to a better quality of life for professionals.

METHODOLOGY

Integrative review whose methodological approach allows the inclusion of experimental and non-experimental studies for a complete understanding of the analyzed phenomenon. Therefore, this research method allows the synthesis of multiple published studies and allows general conclusions regarding a particular area of study (MENDES, SILVEIRA & GALVÃO, 2008).

For the elaboration of the review process, six steps were followed (MENDES, SILVEIRA & GALVÃO, 2008). The first is the definition of the research problem: What is the scientific production about the clinical aspects of Burnout Syndrome?

The next step is to establish criteria for inclusion and exclusion of studies and a search in the literature. The choice of keywords was made by selecting the terms inserted in the Health Sciences Descriptors (Decs): Burnout Syndrome; professional burnout; mental health; worker's health, in order to try to restrict the amount of articles found as little as possible. Consequently, for searching in English-language databases, the terms

Medical Subjects Headings (Mesh) were used: Burnout Syndrome; professional burnout; mental health; worker's health.

By means of an electronic search, the following databases were consulted: Latin American and Caribbean Literature on Health Sciences (Lilacs) through the Virtual Health Library, the Pubmed portal managed by the US National Library of Medicine / National Institutes of Health and the Cummulative Index to Nursing and Allied Health Literature (CINAHL) database by Portal Periódicos Capes. The research was carried out in May 2022. In CINAHL, the association of the descriptors Burnout Syndrome and mental health with the Boolean term "and" was used, and, thus, 195 potential articles were found. At Lilacs, the search was also carried out using the Boolean term "and" among the following indexed descriptors and their replicas in English Burnout syndrome and mental health. In the end, eight potential articles were found.

The following inclusion criteria were applied for selection: articles published in Portuguese, English and Spanish; only complete articles from indexed journals available on the Portal Periódicos Capes. The exclusion criteria used were: articles with limited access. For contemplation of the third stage, the selected articles were read in full and a form was used, containing the information: title, authors, main objective, type of methodology, sample, subjects, main results and conclusions for evaluation. For critical analysis and completion of the fourth and fifth stages, which correspond to the evaluation of the studies and interpretation of the results, discussions of the articles were carried out among the researchers, reaching, in the end, a consensus on the presented content.

RESULTS

In the present review, 08 articles were

analyzed that met the previously established inclusion criteria. As for the level of evidence and degree of recommendation, the 08 studies consisted of cohorts classified at level 2B. For their presentation, it was decided to divide them into themes: emotional exhaustion, depersonalization, decrease in professional achievement and productivity, depression, intervention studies and others.

After reading the manuscripts, we observed that Burnout Syndrome leads professionals to a deterioration of physical, mental and social well-being, making them exhausted and often leading them to become ill, and may have insomnia, ulcers, headaches, migraines, muscle fatigue. , as well as a number of diseases. We also observed that the same today are increasingly affecting the category or professional groups in the health area, as they have a direct, continuous and highly emotional relationship, which can occur in various professions (FERREIRA, 2005).

Burnout involves negative attitudes and behaviors towards users, clients, organization and work, it is thus a subjective experience, involving attitudes and feelings that cause practical and emotional problems to the worker and the organization. Stress, on the other hand, involves more attitudes and behaviors, it is a personal exhaustion that interferes in the individual's life and not necessarily his relationship with work (FERREIRA, 2005).

DELVAUX apud FRANCE; RODRIGUES (1997) characterizes emotional burnout as follows:

- Emotional exhaustion occurs when the person perceives in himself that he does not have enough resources to give to others. Symptoms of tiredness, irritability, prone to accidents, signs of depression, signs of anxiety, abusive use of alcohol, emergence of psychosomatic diseases appear;
- Depersonalization corresponds to the professional's development of negative and

- insensitive attitudes towards the people with whom he works, treating them as objects.
- Decreased professional achievement and productivity – usually leads to a negative and low self-assessment;
- Depression feeling of lack of pleasure in life, of sadness that affects thoughts, feelings and social behavior. These can be brief, moderate or even severe.

DISCUSSION

There are countless actions that can prevent, mitigate or eradicate Burnout, it is a broad phenomenon that is associated with numerous variables, which is still in the process of study and investigation.

Generally, the intervention is focused on the individual and his symptoms, either linking work to the subject's coping mechanism in the face of pressure situations, believing that this is just a problem of personal qualification, subject to training, or referring to services medical or psychotherapeutic. It is in this space that courses and lectures are organized for the control and management of stress.

The redefinition and reorganization of work processes seeks to take advantage of the skills of those who perform the function, as well as the diversification of activities in order to insert them significantly into the result of the service provided is of relevant importance (BORGES, 2002).

The promotion of a social support network, between groups and managers to exchange information, guidance, experience and feelings on the most diverse issues related to work and organization, is the second important point in terms of interventions. In order to share individual difficulties with coworkers and supervisors within a climate of respect and emotional comfort, it helps the professional to distance himself from clients' problems, which is an essential element in

the prevention of Burnout (MASLACH; CHERNISS, 1986, 1980 apud FERREIRA, 1980). 2005).

Of equal importance is the issue of functional training. Continuous technical and interpersonal training, qualifying the individual to work in a team and in a manner compatible with the needs of the population served, has shown efficiency in reducing Burnout.

Finally, we also highlight the use of continuous feedback on the individual's performance, focusing not only on the negative aspects of their work, but on positive and successful actions. Negative feedback prevails, and the client or supervisor rarely praises what the professional does well (MASLACH; MASLACH; JACKSON, 1976, 1984 apud FERREIRA, 2005).

We agree with Cherniss (1992 apud CARLOTTO; GOBBI, 2000), when he says that the conditions that help people recover from Burnout are the same that prevent them, that is, new situations that promote autonomy at work, organizational support and interest for the job. "Organizational changes are vehicles to alleviate Burnout" It is noteworthy that the change does not necessarily change the organization or work, but rather effect changes in the practice of the same.

Organizational change involves reviewing the values that govern the institution. The rescue of human values at work is fundamental. The meaning and recognition of work and its forms of reward, the feeling of choice and control over it, combined with a sense of community, justice and respect are paths that lead the individual and the organization to a better future with more quality and balance. (MASLACH; LEITER, 1997 apud FERREIRA, 2005).

CONCLUSION

Although the authors surveyed have

presented different opinions about Burnout Syndrome, all of them affirm the undeniable importance for a greater knowledge of the subject, both by Nursing professionals and those from other areas regarding changes in professional behavior related to work.

According to the subject that was studied, it is possible to perceive that there are many problems that affect the life of the worker, thus creating a blockage and preventing him from following the natural course of his professional life. Psychological, social, cultural, physiological aspects, among others, have shown a direct relationship with Burnout Syndrome.

This phenomenon describes a feeling of failure and exhaustion caused by an excessive drain on energy and emotional resources. Associating this with a highly competitive job market, which is the situation we are experiencing today, we can conclude that the tendency of Burnout Syndrome is increasing more and more. This is because the individual who feels threatened by competition, by the pressure of the employer all the time demanding, threatening and persecuting more and more, wants to show that he is competent by working excessively, with the intention of keeping his job, thus exhausting himself, with the passage of time. time, your energies and consequently, harming your health and productivity.

It is extremely important to change the review of values that govern institutions, rescuing human values at work, to ensure the physical, mental and social security of the professional, this does not depend exclusively on the employer, but simultaneously on the worker himself and the organization. It is necessary to outline programs to improve the environment and its organization, through effective worker health policies, thus contributing to the improvement of workers' quality of life.

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