

Occupational burnout



Occupational burnout can have adverse consequences not only at an individual level (eg, physical and mental health problems), but also at an organisational level (eg, absenteeism, poor performance at work, misjudgments and errors, increased job turnover).^[1]

Definition

Burnout is generally referred to as an inability to cope with chronic psychological stress at work because of insufficient resources to cope with job demands. It is defined by the World Health Organization (WHO) in the 11th Revision of the International classification of diseases (ICD-11) as a syndrome resulting from chronic workplace stress that has not been successfully managed. In the ICD-11, burnout is classified as an occupational phenomenon and characterised as having three dimensions:^[2]

- Emotional exhaustion: feelings of energy depletion or exhaustion.
- Cynicism/depersonalisation: increased mental distance from, or feelings of negativism or cynicism related to, one's job.
- Personal accomplishment: sense of reduced professional efficacy and lack of accomplishment.

Physical and emotional exhaustion

This leads to an inability to engage fully with many aspects of the job but, particularly, with those aspects involving interaction. Speech may become flattened and body and facial gestures diminished as the person becomes less responsive to the demands of the situation of a professional interaction.

Depersonalisation

This is a tendency to depersonalise those with whom one is forced to interact so that patients are seen less as individuals and situations become simply part of a routine.

Lack of personal accomplishment

This usually accompanies burnout. The individual will tend to feel little sense of achievement in relation to the job, even if the reality is very different.

How common is occupational burnout? (Epidemiology)

Burnout can occur in any occupation.^[3] However, it has been found to occur most amongst professional people in the caring professions of medicine, nursing, social work, counselling and teaching. It is typically associated with the prolonged and cumulative effects of emotional stress and pressure that arise from personal interaction with members of the public on a daily basis.

Healthcare workers can experience occupational stress as a result of lack of skills, organisational factors, and low social support at work, which may lead to distress, burnout and psychosomatic problems, and deterioration in quality of life and service provision.^[4]

See also the article [Burnout in Primary Care](#).

Causes of occupational burnout^[5]

- Lack of control. An inability to influence decisions that affect work (eg, work schedule, assignments or workload) or a lack of the resources needed to work effectively.

- Unclear job expectations. Uncertainty regarding the degree of authority or what is expected at work.
- Dysfunctional workplace dynamics, eg, bullying, feeling undermined.
- Different personal values from those values in the workplace environment.
- The work doesn't fit a person's interests and skills, causing stress.
- Work that is either always monotonous or chaotic, which can both lead to fatigue and occupational burnout.
- Lack of social support, both at work and when away from work. Work-life imbalance, with insufficient time and energy to spend with family and friends.

Personality plays a crucial role in the ways individuals react to the environment and empirical evidence suggests that certain aspects of personality may affect average stress levels and stress-related disorders such as burnout.^[6]

Symptoms of occupational burnout (presentation)^[7]

The symptoms associated with burnout are variable with each individual but often include:

- Poor memory and concentration, **anxiety** and **depression**, neck/back pain, tingling/numbness, **fatigue**, headache, gastrointestinal problems, respiratory problems, **sleep difficulties**, and pain sensitivity.
- Other symptoms include guilt, denial, loss of libido, becoming uncooperative and resistant to change, resentful, cynical, feeling isolated, paranoia, irritable, aggressive and short tempered.
- These symptoms may progress to or be associated with poor timekeeping, indecision, avoidance behaviour, apathy, appearing withdrawn, alcoholism, drug dependence or other harmful behaviours.

Those experiencing burnout may be more vulnerable to emotional eating and uncontrolled eating and have reduced ability to make changes in their eating behaviour, causing a risk of overweight and obesity.^[8]

Burnout has been shown to be a risk factor for coronary heart disease, including myocardial infarction. It has also been related to decreased capacity to cope with stress.^[9]

Burnout syndrome is also a predictor for developing depression, absenteeism and a decline in working ability.^[10]

Management of occupational burnout^[11]

As with so many diseases, early diagnosis and treatment gives the best prognosis. Many of the work-related variables associated with high levels of psychological ill health are potentially amenable to change.^[12] Institutions should make burnout intervention programmes available to employees.^[13] However, it may be necessary to find a different occupation or a different place of work.

General advice for patients

Talk to others. Seek help if necessary. Do not be afraid to approach someone else to ask for help. They will not see you as weak, pathetic and inadequate but they may be able to offer help and advice as well as moral support.

- Manage the stressors that contribute to occupational burnout. Identify the causes of occupational burnout in order to develop a plan to overcome them.
- Evaluate options. Discuss specific concerns with an appropriate colleague, supervisor or manager. Consider possible solutions, such as a change of expectations, a compromise arrangement or a workplace solution.
- Possible beneficial changes may include job sharing, working from home, flexible work hours, use of a mentor, or considering continuing education or professional development.
- Adjust attitude. Consider ways to improve outlook, rediscover enjoyable aspects of your work, recognise co-workers for valuable contributions or a job well done. Take short breaks throughout the day. Spend time away from work doing things that are enjoyable. Control unreasonable and unrealistic demands.

- Seek support. Use colleagues, friends, partners or any other appropriate person to provide support to help cope with job stress and feelings of burnout.
- Assess interests, skills and passions. An honest assessment can help to decide whether an alternative job should be considered, such as one that's less demanding or one that better matches interests and core values.
- Develop outside interests.
- Regular physical exercise, such as walking or cycling, can help a person improve the way they deal with stress.

Interventions

Effective management is dependent on addressing the underlying causes of burnout, including the workplace environment. Further interventions will depend on individual needs and options include relaxation techniques, counselling, cognitive behavioural therapy, mindfulness training or stress management training.

A Cochrane review stated the following conclusions:^[4]

- There is low-quality evidence that CBT and mental and physical relaxation reduce stress more than no intervention but not more than alternative interventions.
- There is also low-quality evidence that changing work schedules may lead to a reduction of stress.
- Other organisational interventions have no effect on stress levels. Organisational interventions need better focus on reduction of specific stressors.

One review found that evidence for any previously established risk or protective factor did not reach a high level. There was moderate quality of evidence for only four predictors:^[1]

- The harmful effects of job demands (overall) and negative job attitudes.
- The protective effects of adaptive coping and leisure.

- Low quality of evidence was found for the harmful effects of quantitative demands, work–family conflict, and stress from work conditions.

In addition to addressing the negative emotional reactions to the aggressive behaviour encountered at work, it is also important to foster positive work factors which may be protective against emotional exhaustion.^[14]

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Originally Published: 20/11/2023	Next review date: 15/05/2023	Document ID: doc_639

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