ABSTRACT

Objective: to quantify, among the professionals who work in the hemodialysis sector, those who are affected by Burnout Syndrome. Method: quantitative, descriptive, cross-sectional and prevalence study with hemodialysis health professionals. Data was analyzed using SPSS statistical software and presented in tables.

Results: in Emotional Exhaustion, 76.2% were identified as low; 20.2%, classified as average and 3.6%, classified as high. In Depersonalization, 96.4% were classified as low; 2.4%, classified as average and 1.2%, classified as high. Finally, in the Low Professional Performance, 2.4% were classified as low; 4.8%, classified as average and 92.9%, classified as high.

Conclusion: there is considerable vulnerability of hemodialysis health professionals to Burnout Syndrome and its dimensions, in addition to the prevalence of certain conditions. Descritores: Chronic Renal Insufficiency; Professional Exhaustion; Health professionals; Emotional Stress; Health services; Hemodialysis.

RESUMO

Objetivo: quantificar, dentre os profissionais que atuam no setor de hemodiálises, os que são acometidos pela Síndrome de Burnout. Método: estudo quantitativo, descritivo, transversal e de prevalência, com profissionais da saúde de hemodiálises. Os dados foram analisados por meio do software estatístico SPSS e apresentados em tabelas. Resultados: na Exaustão Emocional, 76,2% foram identificados como baixa; 20,2%, classificados como média e 3,6%, classificados como elevada. Em Despersonalização, 96,4% foram classificados como baixa; 2,4%, classificados como média e 1,2%, classificados como alta. Por fim, na Baixa Realização Profissional, 2,4% foram classificados como baixa; 4,8%, classificados como média e 92,9%, classificados como alta. Conclusão: há vulnerabilidade considerável dos profissionais de saúde das hemodiálises para a Síndrome de Burnout e suas dimensões, além de que há prevalências ligadas a algumas condições. Descritores: Insuficiência Renal Crônica; Esgotamento Profissional; Profissionais da Saúde; Estréss Emocional; Serviços de Saúde; Hemodiálise.

RESUMEN

Objetivo: cuantificar, entre los profesionales que actúan en el sector de hemodiálisis, los que son acometidos por el Síndrome de Burnout. Método: estudio cuantitativo, descriptivo, transversal y de prevalencia, con profesionales de la salud de hemodiálisis. Los datos fueron analizados a través del software estadístico SPSS y presentados en tablas. Resultados: en la Extracción Emocional, el 76,2% fue identificado como baja; El 20,2%, clasificados como promedio y el 3,6%, clasificados como elevada. En Despersonalización, el 96,4% se clasificó como baja; El 2,4%, clasificados como promedio y el 1,2%, clasificados como altos. Por último, en la Baja Realización Profesional, el 2,4% se clasificó como baja; El 4,8%, clasificados como promedio y el 92,9%, clasificados como altos. Conclusión: hay vulnerabilidad considerable de los profesionales de salud de las hemodiálisis para el Síndrome de Burnout y sus dimensiones, además de que hay prevalencias ligadas a algunas condiciones. Descritores: Insuficiencia Renal Crónica; Agotamiento profesional; Profesionales de la Salud; Estrés Emocional; Servicios de Salud; Hemodiálisis.

12*Nursing undergraduate student, Universidade do Norte Colégio / FUNORTE. Montes Claros (MG). Brazil. E-mail: nathanychristine@gmail.com ORCID iD: http://orcid.org/0000-0002-6304-9114; E-mail: marianery96@yahoo.com.br ORCID iD: https://orcid.org/0000-0002-6304-9114; E-mail: leonice Rodrigues Dutra, Master (Doctorate student), University of Montes Claros / UNIMONTES. Montes Claros (MG). Brazil. E-mail: gregtec@hotmail.com ORCID iD: http://orcid.org/0000-0001-6381-2063; *Specialist, Ibiruruna Health Colleges / FASI Health Colleges. Montes Claros (MG). Brazil. E-mail: nanac_rocha@hotmail.com ORCID iD: http://orcid.org/0000-0001-3681-2063; *Specialist, Mário Ribeiro da Silveira Clinical Hospitals. Montes Claros (MG). Brazil. E-mail: gregtec@hotmail.com ORCID iD: http://orcid.org/0000-0002-1417-5237; 6,7,8 Master (Doctorate student), University of Montes Claros / UNIMONTES, Montes Claros (MG). Brazil. E-mail: jaquelineveronalive@gmail.com ORCID iD: http://orcid.org/0000-0001-2383-2523; E-mail: clauidadiaylen@hotmail.com ORCID iD: http://orcid.org/0000-0001-8650-8064
INTRODUCTION

It is known that chronic kidney disease (CKD) arises from changes in renal structure and function caused by a variety of factors, being a silent and irreversible disease that develops gradually. Because it is an increasingly incident illness and which provides high rates of lethality, the CKD has taken a place in the epidemiological context of Brazil, becoming an important problem in the health of the population. The progression of the disease is gradual, leading to an often delayed diagnosis, and therefore does not have a good prognosis, necessitating hemodialysis, which interferes with the patients’ life practice.

The hemodialysis service is a performance sector of many tasks, as well as relevant requirements regarding the practices performed there. This environment is not just an assistant to an ordinary patient. In it, there are people with a disease with impossibility of cure, becoming the place hopeless. The professionals are exposed to many risks and, mainly, to biological contamination, a fact that makes the work worrying and leaves them unsatisfied with what they do, since it is a repetitive work activity, full of risks, that does not cure the patient and where professionals are still underpaid for what they do. The mentioned aspects and / or feelings refer to the fact that they can interfere negatively in the professional bringing risks of acquisition of diseases related to work.

However, the hypothesis is that hemodialysis professionals develop Burnout Syndrome, which is a result of the chronic emotional stress that can affect professionals who work continuously with people. The syndrome is formed by three different interconnected manifestations: emotional exhaustion, in which the professional ceases to present mood when developing his functions; the depersonalization, which is characterized by the fact that professionals come to address their colleagues and patients with coldness and insignificance, and professional dissatisfaction, which represents discontent with the product of their work. It is observed that the professionals affected by the syndrome can present multiple symptoms that vary from the emotional phenomena, to the behavioral ones.

It is also possible to take into account the particular goals and the concern of professionals to offer a quality service and to succeed positive results, which is often not possible, leading them to discontent with the work activity that they perform. This fact is even more evident in units that provide care to patients affected by chronic diseases, such as hemodialysis.

In this reasoning, this study is justified by the fact that it is well known that hemodialysis is a specialty of health that causes a great emotional overload and commitment, and knowing that the health professional has a duty to provide the recovery of health to the patients, it is thought that the service in this area becomes frustrating and exhausting, since it assists patients with an inability to cure. Therefore, it is relevant to analyze whether Burnout Syndrome affects professionals working in this sector so that possible interventions are carried out in this area.

OBJECTIVE

- To quantify, among the professionals who work in hemodialysis in the north of Minas Gerais, those who are affected by Burnout Syndrome.

METHOD

This is a quantitative, descriptive, cross-sectional and prevalence study. It was performed with hemodialysis health professionals from Salinas-MG, Brasília de Minas-MG and Montes Claros-MG, as: doctors, nurses, nursing technicians, pharmacists, nutritionists, psychologists and social workers. The sample was of census trait.

The professionals included in this survey were those who were willing to participate and still had more than a year of service in the sector, excluding professionals who were, for some reason, away from service, whether for leave or vacations, in addition to those who refused to participate.

Some instruments were used to carry out this study. The ProQOL-V (Professional Quality of Life Scale version V) contains 30 questions answered according to the experience of the professional in their work in the last 30 days. Another instrument applied was the MBI (Maslach Burnout Inventory), which is used to investigate Burnout syndrome evaluating three aspects: Emotional Exhaustion, Depersonalization and Low Professional Achievement. A sociodemographic questionnaire was also applied, with its own authorship, based on studies related to the area of knowledge / research. Data was analyzed using Statistical Package Social Science (SPSS) statistical software, version 20.0.
Progress was made with this study, through the authorization of the institutions by the IAT (Institution Agreement Term) and the approval of the REC (Research Ethics Committee), with the participants being given the questionnaire and the FICT (Free and Informed Consent Term).

It was a research project approved by the Research Ethics Committee of the State University of Montes Claros - Unimontes, under the number of opinion 1,687,445 / 2016, being part of the doctoral thesis << Compassion fatigue in professionals of the health: related factors >>.

As regards the sociodemographic characteristics of the professionals, it is evident that the female audience is the majority, according to the table 1.

Table 1. Distribution of sociodemographic data of health professionals (n = 84).

<table>
<thead>
<tr>
<th></th>
<th>n</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sex</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>28</td>
<td>33.3</td>
</tr>
<tr>
<td>Female</td>
<td>56</td>
<td>66.7</td>
</tr>
<tr>
<td>Marital status</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Single</td>
<td>21</td>
<td>25.0</td>
</tr>
<tr>
<td>Married/Stable union</td>
<td>59</td>
<td>70.2</td>
</tr>
<tr>
<td>Divorced/ Separated</td>
<td>3</td>
<td>3.6</td>
</tr>
<tr>
<td>Widow</td>
<td>1</td>
<td>1.2</td>
</tr>
<tr>
<td>Religion</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Not religious</td>
<td>2</td>
<td>2.4</td>
</tr>
<tr>
<td>Catholic</td>
<td>56</td>
<td>66.7</td>
</tr>
<tr>
<td>Evangelical</td>
<td>24</td>
<td>28.6</td>
</tr>
<tr>
<td>Spiritist</td>
<td>2</td>
<td>2.4</td>
</tr>
<tr>
<td>Total</td>
<td>84</td>
<td>100</td>
</tr>
</tbody>
</table>

In relation to marital status, married and / or in a stable union were the majority (70.2%) followed by unmarried (21%), divorced (3.6%) and widowed (1.2%). In the given religion, the sample was composed of a large number of Catholics (66.7%), with 28.6% of evangelicals and a tie between spiritists and those who do not have a religion (2.4%).

The classes of each dimension were specified in the table 2.

Table 2. Dimensions of Burnout Syndrome in health professionals of hemodialysis services in the North of Minas Gerais (n = 84).

<table>
<thead>
<tr>
<th></th>
<th>Low</th>
<th>Average</th>
<th>Elevated</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n</td>
<td>%</td>
<td>n</td>
<td>%</td>
</tr>
<tr>
<td>Emotional Exhaustion</td>
<td>64</td>
<td>76.2</td>
<td>17</td>
<td>20.2</td>
</tr>
<tr>
<td>Depersonalization</td>
<td>81</td>
<td>96.4</td>
<td>2</td>
<td>2.4</td>
</tr>
<tr>
<td>Low Professional Achievement</td>
<td>2</td>
<td>2.4</td>
<td>4</td>
<td>4.8</td>
</tr>
</tbody>
</table>

When the prevalence of Burnout Syndrome between male and female is evaluated, it is observed that the highest indices are related to female sex, according to table 3.
It is identified, in terms of dimensions, that 19 (67.9%) of those who have another job have low Emotional Exhaustion, insofar as nine (32.1%) have medium / high Emotional Exhaustion. In the same dimension, those who do not have another service, 11 (19.6%) have medium / high Emotional Exhaustion and 45 (80.4%) have low. Regarding Depersonalization, of the professionals who work in more than one place, two (7.1%) have mean / high, while 26 (92.9%) have low Depersonalization. In this same dimension, in professionals who do not work in another institution, there is predominantly low Depersonalization (98.2%), having only 1.8% with average / high. In the Low Professional Achievement dimension, 100% of those working in more than one institution are well-performing, since they have a low level of Low Professional Achievement. Of those who do not have another job, 50 (89.3%) have low Professional Achievement, while six (10.7%) are little or nothing accomplished, in other words, they are Low to Medium Professional Achievement.

### DISCUSSION

As regards the sociodemographic characteristics of the professionals, the majority of the female public is 66.7%, while the male is equivalent to almost half of the total of female (33.3%). This fact also happened in a study that sought the prevalence of Burnout Syndrome in health professionals at a children's oncohematology hospital in the city of Campinas, where 71.6%...
of nursing technicians represented 78.9% of nurses and 58.3% of physicians.\(^8\)

As for the marital status, where the majority are married and/or in a stable union, it was verified that in the same study of Zanatta\(^9\) there was a cross-referencing of marital status and Burnout syndrome, and the results showed that married couples are those most affected by the disease.

It can be seen that, in relation to the specific classes of each dimension, in Emotional Exhaustion, 76.2% identify themselves as low; 20.2%, on average and 3.6% are classified as high. In Depersonalization, 96.4% were classified as low; 2.4%, on average and 1.2% are classified as high. Finally, in the Low Professional Performance, 2.4% are classified as low; 4.8%, mean and 92.9% are classified as high. Data are common in other studies, such as the research "Burnout: the impact of work satisfaction on nursing professionals", performed in the public hospital of the Southeast region of Vitória / ES, where 33.96% were obtained for Professional Realization, 23.67% for Emotional Exhaustion and 8.53% for Depersonalization, and it can be observed that in both studies, Low Professional Achievement leads in comparison to other dimensions. However, it is noted that some individuals are vulnerable to the syndrome.\(^7\) This truth is also significant, since the syndrome can be dissipated through social interactions of work.\(^10\)

It is observed that, when evaluating the prevalence between the male and the female, the highest indices are related to the female sex, a fact that can be explained because the samples have a prevalence of women and the predominant female and nursing professionals in the area explored, fact observed in scientific studies and also verified in developed researches.\(^11\)

It can be seen, when analyzing the individualities of dimensions in relation to sex, that both sexes have low prevalence in the three dimensions. Burnout Syndrome is characterized by high levels of Emotional Exhaustion and Depersonalization or low levels of Low Professional Achievement where MBI indicates the presence of the syndrome, being this fact verified by the research, where it obtained low levels of Low Professional Achievement.\(^7\)

Burnout was related to work in more than one institution. Of the 84 professionals, 28 (33.3%) had more than one job and 56 (66.7%) had only one. Of the 28 professionals working in more than one institution, 27 (96.4%) have a medium / high possibility of having Burnout Syndrome, while 56 (100%) of those who do not have another service have the same possibility.

It is complemented, in terms of dimensions, that the majority of those who have another job have a low Emotional Exhaustion in that, in the same dimension, of those who have no other service, the minority surveyed has Medium / High Emotional Exhaustion, who has no other job, is low. Regarding Depersonalization, of the professionals working in more than one place, only two (7.1%) had mean / high, however, 26 (92.9%) showed low Depersonalization. Already in this same dimension, professionals who report not working in another institution have predominantly low Depersonalization and only 1.8% have it as average / high. In the dimension of Low Professional Achievement, all (100%) those who work in more than one institution are well achieved. Those who do not have another job have Low Professional Achievement.

Therefore, the fact that only hemodialysis work allowed a greater propensity to develop Burnout Syndrome for the professionals in this study, since those who did not work in another service presented 100% of average / high possibility for the syndrome. As for the dimensions, it is found that there is a relevant percentage of professionals who have more than one job being emotionally exhausted, compared to those who only have one. On the other hand, professionals who have employment (s) in addition to hemodialysis are more accomplished than those who do not. These findings may be related to the current economic scenario in which those who have more possibilities to work are more satisfied since there are no job opportunities and there is still an expressive economic crisis.\(^12\)

**CONCLUSION**

It is understood, with the accomplishment of this study, that there is a considerable vulnerability of hemodialysis health professionals to Burnout Syndrome and its dimensions, besides that there is prevalence related to some conditions such as: sex, marital status and work in more than a job. In view of this, further investigation can be made as to the motive of this predominance. Policies should be created to improve working conditions in health, and there should be better valuation of health professionals by companies, through financial incentives and hiring more professionals, in order to reduce the overload of work and adhere to

---

Burnout syndrome in hemodialysis professionals.

Therefore, there is a need for dissemination in relation to the syndrome, since it is becoming more frequent in the population, developing new scientific productions in order to know the main factors that cause it and emphasizing how important are the institutional interventions in the face of the syndrome.

REFERENCES


Submission: 2018/07/02
Accepted: 2018/08/06
Publishing: 2018/10/01

Corresponding Address
Fernanda Cardoso Rocha
Rua São Roberto, 55
Bairro Todos os Santos
CEP: 39400-121 – Montes Claros (MG) Brazil