

EC GASTROENTEROLOGY AND DIGESTIVE SYSTEM Research Article

Burnout in the Surgeons of Punta Del Este. Descriptive Study

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Abstract

Background: Burnout syndrome is a state of physical, emotional and mental fatigue characterized by feelings of emptiness and negative attitudes both at work and personally. It is present in all work areas, standing out for its frequency in health workers. This study was carried out taking into account 16 general surgeons who practice in Maldonado.

Objective: It is a descriptive, analytical, cross-sectional study that seeks to describe the risk of burnout in all surgeons in the Department of Maldonado-Punta del Este, Uruguay; using the Maslach Burnout Inventory Questionnaire.

Materials and Methods: Our sample has 16 general surgeons from three different institutions (2 private and 1 public) who agreed to participate in the project. The evaluation was carried out by the Maslach Burnout Inventory Questionnaire with high internal consistency and a reliability close to 90%.

Results: Regarding the results, 37.5% of the surgeons interviewed had low risk burnout, 18.75% had moderate risk burnout and 18.75% had high risk burnout. 25% of the interviewees did not present Burnout elements.

Conclusion: 75% of the surgeons interviewed in the Department of Maldonado, Uruguay, presented elements of Burnout in our work. 37.5% low risk, 18.75% moderate risk and another 18.75% high risk. These values are above the average for international publications. Only 25% did not present Burnout elements.

Keywords: Burnout Syndrome; General Surgeons; Punta del Este

Introduction

Burnout is a syndrome characterized by emotional exhaustion, depersonalization, and low sense of personal accomplishment [1]. Its incidence is related to work and family stress, and it is predominantly diagnosed in human service jobs that have high levels of stress and high emotional demand. A 2009 study by the American College of Surgeons showed that of 7,905 surgeons interviewed: 40% had burnout, and 30% had symptoms of depression [2]. Among the most important risk factors indicated by the study, the following stood out: being young, having a child under 21 years of age, area of specialization, and weekly working hours.

Burnout symptoms can be categorized by the 3 characteristics already described. Emotional or physical exhaustion can include: chronic fatigue, insomnia, decreased concentration and attention, tendency to infections, loss of appetite, depression, anger and physical symptoms such as chest pain, palpitations, polypnea. Depersonalization includes: cynicism, pessimism, and isolation. In relation to the lack of personal fulfillment, you can feel: a feeling of apathy, a decrease in productivity at work and irritability. These symptoms in health professionals can affect the appropriate treatment of patients [3].

Objective of the Study

The objective of this study is to assess the number of surgeons in Punta del este, Maldonado Department, Uruguay who present elements of burnout, using the Maslach Burnout Inventory Questionnaire.

Materials and Methods

It is a descriptive, analytical, cross-sectional study in which 16 surgeons practicing in the Department of Maldonado, Uruguay participated. We carried out the survey during the month of May 2016, in the 3 centers in the area: 2 private and one public. It is an anonymous survey, where the participants were asked to complete the Maslach Burnout Inventory questionnaire, insert it in an envelope and then in an urn. The latter was not opened until after all the forms had been completed to preserve the integrity of anonymity. The participants were given an informed consent document to document that they agreed to participate, being notified of the research bases. The Maslach Burnout Inventory questionnaire is made up of 22 statements about the professional's feelings and attitudes at work and with patients seeking to measure professional burnout. The Maslach questionnaire has a high internal consistency and a reliability close to 90%. It was carried out in 10 to 15 minutes and took into account the 3 aspects of the syndrome: emotional fatigue, depersonalization, and personal fulfillment. High scores for emotional exhaustion and depersonalization, and low scores for personal fulfillment allow diagnosing the disorder.

In order to make our diagnosis we follow the following scheme:

Figures	Diagnosis
3 low figures	No Burnout
2 low figures and 1 medium figure	Low Risk of Burnout
1 low figure and 2 medium figures, Moderate Burnout Ris	
2 low figures and 1 high figure,	
1 low figure and 1 medium figure and 1 high figure,	
3 medium figures	
2 medium figures and 1 high figure,	High Risk of Burnout
2 high figures and 1 low figure,	
2 high figures and 1 medium figure	

The population consisted of 16 surgeons with an age range between 33 and 61 years with an average age of 44 years. 15 male and 1 female surgeons.

None of the surgeons interviewed had acute medical or surgical pathologies or comorbidities. In our population there are 8 hypertensive surgeons, 2 diabetic surgeons, 3 dyslipidemic and 1 with a cerebrovascular event without sequelae.

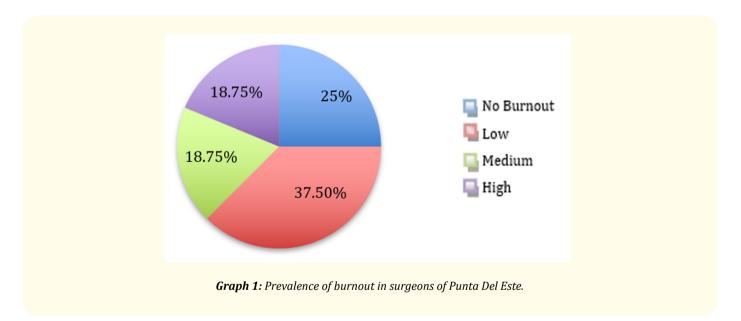
We have 14 General Surgeons and 2 Pediatric Surgeons who were postgraduate and residents of General Surgery. One of the Surgeons in the area refused to conduct our interview. n total 16 surgeons.

Results

Regarding the results, we observe that 75% of the surgeons evaluated at work present elements of Burnout syndrome. Within these, 37.5% of the surgeons presented low risk burnout, 18.75% moderate risk burnout and 18.75% high risk burnout. The remaining 25% did not present Burnout elements according to the survey used (Table 1 and Graph 1).

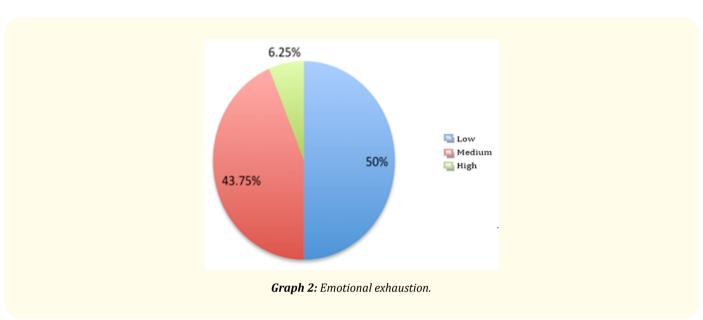
Classification	#	Percentage
No Risk	4	25%
Low Risk	6	37.50%
Medium Risk	3	18.75%
High Risk	3	18.75%

Table 1

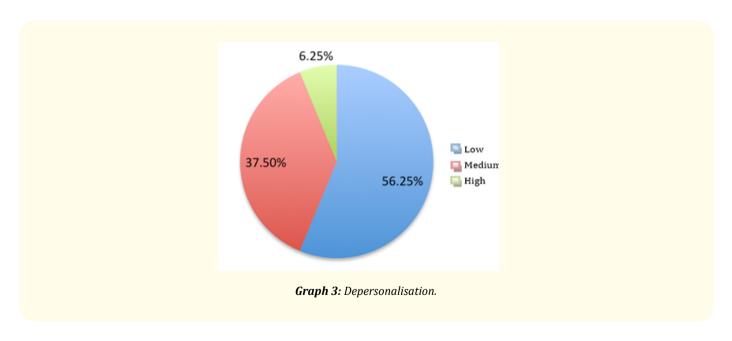


The Maslach Burnout Inventory questionnaire assesses the 3 aspects of the syndrome: emotional exhaustion, depersonalization and personal fulfillment.

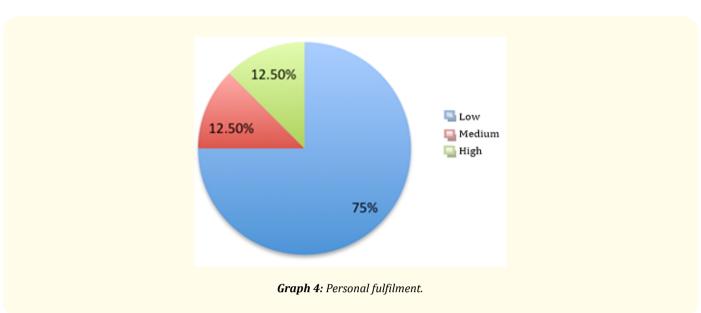
According to what was obtained, 50% of the respondents present a mild emotional exhaustion, 43.75% moderate and 6.25% a high emotional exhaustion (Graph 2). Of the three characteristics, it was seen that emotional exhaustion was the area with the most pathological figures.



According to depersonalization, 56.25% of the participants belong to the mild range, 37.5% to the moderate range and 6.25% to the high range (Graph 3).



According to personal fulfillment, 75% of the participants are at low risk, 12.5% are at medium risk, and 12.5% are at high risk (Graph 4). Of the three categories, personal fulfillment was the area with the least pathological figures.



Discussion

The purpose of this research is to identify and describe the prevalence of burnout syndrome in doctors specialized in general surgery practicing in the department of Maldonado. Our work did not take into account variables such as age, sex, or time of graduation of the study subjects.

The results obtained in the investigation allow us to deduce that the majority of the interviewees present elements of burnout to a greater or lesser degree. This could be due to the fact that each surgeon in a winter season is in charge of around 12,500 inhabitants, a figure that quintupled in the summer season, which brings us to a hypothetical result of 62,500 potential users per professional. This figure increases even more if we take into account that several of these professionals work in other departments. Besides this; Surgeons in the public services of the area deal with patients urgently with a suboptimal surgical team operating frequently with inexperienced assistants, medical interns, colleagues from other specialties, even highly complex patients. This increases the personal demand and stress of the surgeon, working frequently with 24-hour guards and continuing with surgical coordination or other tasks after these days. Except for 5 surgeons, the rest work in at least 3 different centers, so multi-employment is the most frequent in this group of surgeons.

In previous studies [4,5] it has been shown that in this medical specialization, professionals are more susceptible to developing burnout syndrome but even more so are newly received surgeons, a variable that was not considered in this investigation.

With the aforementioned, we can think that the burnout syndrome occurs in professionals who move in an over-demanded context with regard to psycho-physical, emotional and temporal dexterity.

Conclusion

75% of the surgeons interviewed in the Department of Maldonado, Uruguay, presented elements of Burnout in our work. 37.5% low risk, 18.75% moderate risk and another 18.75% high risk. These values are above the average for international publications. Only 25% did not present Burnout elements.

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