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Corresponding Author:

Dr. Abeeha Khalid
Jinnah Hospital Lahore
abeehakhalid21@gmail.com

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**BURNOUT AMONG MEDICAL AND
DENTAL STUDENTS**

AUTHORS:

- 1- DR. AATIKA ANWAR, ALLIED HEALTH PROFESSIONAL INSTITUTE BAGH AZAD JAMMU KASHMIR
- 2- DR. AQIBA SANA, INDUS HOSPITAL MANAWAN CAMPUS LAHORE
- 3- DR. ABEEDA KHALID, JINNAH HOSPITAL LAHORE

ABSTRACT:

Occupational burnout is a syndrome resulting from chronic work-related stress, with symptoms characterized by "feelings of energy depletion or exhaustion; increased mental distance from one's job, or feelings of negativism or cynicism related to one's job; and reduced professional efficacy." This survey study was conducted among different medical and dental college students. The Maslach Burnout Inventory - Student Survey (MBI-SS), was used to assess the Burnout syndrome. All the data was analyzed with SPSS Ver. 23.0. A total of 80 medical and dental students participated in the study. There were 49 males and 31 females. The mean age was 22.99 ± 1.187 years. The mean burnout score in case of emotional exhaustion, depersonalization and low personal accomplishments varied greatly with gender, age, hostel life, stress during studies, family support etc.

Keywords: Burnout, occupational burnout, medical students, dental students



INTRODUCTION:

According to the World Health Organization (WHO), occupational burnout is a syndrome resulting from chronic work-related stress, with symptoms characterized by "feelings of energy depletion or exhaustion; increased mental distance from one's job, or feelings of negativism or cynicism related to one's job; and reduced professional efficacy." While burnout may influence health and can be a reason for people contacting health services, it is not itself classified by the WHO as a medical condition.

In 1974, Herbert Freudenberger became the first researcher to publish in a psychology-related journal a paper that used the term "burnout." The paper was based on his observations of the volunteer staff (including himself) at a free clinic for drug addicts. He characterized burnout by a set of symptoms that includes exhaustion resulting from work's excessive demands as well as physical symptoms such as headaches and sleeplessness, "quickness to anger," and closed thinking. He observed that the burned-out worker "looks, acts, and seems depressed." After the publication of Freudenberger's original paper, interest in occupational burnout grew. Because the phrase "burnt-out" was part of the title of a 1961 Graham Greene novel *A Burnt-Out Case*, which dealt with a doctor working in the Belgian Congo with patients who had leprosy, the phrase was likely in use outside the psychology literature before Freudenberger employed it. Wolfgang Kaskcha has written on the early documentation of the subject.

Christina Maslach described burnout in terms of emotional exhaustion, depersonalization (treating clients, students, customers, or colleagues in a distant and/or cynical way), and reduced feelings of work-related personal accomplishment. In 1981, Maslach and Susan Jackson published instrument for assessing burnout, the Maslach Burnout Inventory (MBI). It is the first such



instrument of its kind and the most widely used burnout instrument. Originally focused on human service professionals (e.g., teachers, social workers), the MBI's application has been broadened; the instrument or variants of the instrument are now employed with job incumbents working in many other occupations. The WHO adopted a conceptualization of burnout that is consistent with Maslach's, although the organization does not treat burnout as a disorder.

Many researchers have studied the existence of stress among medical and dental students and a few have studied the prevalence of burnout. In a study aimed at testing the rate of burnout among German dental students at three universities, there were high scores for burnout regardless of the education system used. In a separate study, emotional exhaustion among dental students at seven European schools was significantly higher than among medical students. The perceived stress among dental students had been attributed to factors such as fear of failure, the load of academic and clinical work, nonavailability in some colleges of materials for study and clinical training and performance pressure and self-efficacy beliefs. It has been reported that students who demonstrated high levels of stress tended to show lower grades in clinical competency and contextual understanding (1-4).

Material of Methods:

This survey study was conducted among different medical and dental college students. The Maslach Burnout Inventory - Student Survey (MBI-SS), was used to assess the Burnout syndrome. The instrument consists of 15 questions, which are divided into three dimensions, emotional exhaustion (EH) with 5 items, Cynicism (C) with 4 items and Professional Efficacy (PE) with 6 items. Scores on each scale are added and interpreted as follows. Emotional exhaustion is considered high if the scores is more than 14, medium when score ranges between 10-14 and low for 0-9 score. Cynicism scores ranging between 0-1 are



considered low, 2-6 taken as moderate and > 6 was considered high. On the other hand, professional efficacy was considered low when the scores were greater than 27, moderate for 23-27, and considered high when the score was less than 23. All the data was analyzed with SPSS Ver. 23.0. Relevant statistical analysis was performed. The qualitative variables were presented as frequency and percentages. The quantitative variables were presented as mean and standard deviation.

RESULTS:

A total of 80 medical and dental students participated in the study. There were 49 males and 31 females. The mean age was 22.99 ± 1.187 years. The score range of emotional exhaustion was 32 to 35, depersonalization was 11 to 45, and the score range for low personal accomplishments was 35 to 40. The mean burnout score in case of emotional exhaustion, depersonalization and low personal accomplishments varied greatly with gender, age, hostel life, stress during studies, family support etc.

DISCUSSION:

In 1981, Maslach and Jackson developed the first widely used instrument for assessing burnout, namely, the Maslach Burnout Inventory (MBI). Consistent with Maslach's conceptualization, the MBI operationalizes burnout as a three-dimensional syndrome consisting of emotional exhaustion, depersonalization, and reduced personal accomplishment. Other researchers have argued that burnout should be limited to fatigue and exhaustion. Exhaustion is considered to be burnout's core.

There are, however, other conceptualizations of burnout that differ from the conceptualization suggested by Maslach and adopted by the WHO. Shirom and Melamed with their Shirom-Melamed Burnout Measure (SMBM) conceptualize



burnout in terms of physical exhaustion, cognitive weariness, and emotional exhaustion. An examination of the SMBM's emotional exhaustion subscale, however, indicates that the subscale more clearly embodies Maslach's concept of depersonalization than her concept of emotional exhaustion. Demerouti and Bakker, with their Oldenburg Burnout Inventory, conceptualize burnout in terms of exhaustion and disengagement. There are still other conceptualizations as well that are embodied in these instruments: the Copenhagen Burnout Inventory, the Hamburg Burnout Inventory, Malach-Pines's Burnout Measure, and more. Kristensen et al. and Malach-Pines (who also published as Pines) advanced the view that burnout can also occur in connection to life outside of work. For example, Malach-Pines developed a burnout measure keyed the role of spouse.

In 1999, Wilmar Schaufeli and Arnold Bakker released the Utrecht Work Engagement Scale (UWES). The UWES measures vigour, dedication and absorption; positive counterparts to the values measured by the MBI. In 2010, researchers from Mayo Clinic used portions of the MBI, along with other comprehensive assessments, to develop the Well-Being Index, a nine-item self-assessment tool designed to measure burnout and other dimensions of distress in healthcare workers specifically. The core of all of these conceptualizations, including that of Freudenberger, is exhaustion. Alternatively, burnout is also now seen as involving the full array of depressive symptoms (e.g., low mood, cognitive alterations, sleep disturbance). Marked differences among researchers' conceptualizations of what constitutes burnout have underlined the need for a consensus definition (5-8).

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