Maslach Burnout Inventory

maslach-burnout-inventory.pdf

- A national study of burnout, psychosocial work environment, and moral distress among neurosurgical doctors in Denmark
- Correlation of Burnout Syndrome with Emotional Intelligence among Clinicians at Workplace
- The mediating effect of job burnout on the relationship between practice environment and workplace deviance behavior of nurses in China: a cross-sectional study
- Burnout in Neurosurgery in the Postpandemic Era
- The risk factors for burnout among nurses: An investigation study
- Burnout and career satisfaction in young neuro-oncology investigators: Results of the Society for Neuro-Oncology Young Investigator Survey
- Factors associated with burnout among frontline nurses in the post-COVID-19 epidemic era: a multicenter cross-sectional study
- Burnout in Neurosurgery

Studies

The primary objective of a study of Fernández-Villa de Rey-Salgado et al. is to examine the prevalence of Burnout syndrome within the neurosurgical community and identify the contributing factors.

A prospective observational study was conducted utilizing an anonymous survey format, incorporating the Maslach Burnout Inventory-Human Services Survey (MBI-HSS) questionnaire. Additional inquiries were made regarding demographic characteristics, occupational factors, lifestyle choices, and the Hospital Anxiety and Depression Scale (HADS) questionnaire. The survey was disseminated between March 23rd, 2023, and April 4th, 2023, utilizing the email registries of the Spanish Society of Neurosurgery (SENEC) and the Latin American Federation of Neurosurgical Societies (FLANC). Descriptive analysis was performed, comparing responses between participants with and without burnout syndrome using cross-tabulation and the Chi-square test to assess the presence of dependency.

A total of 282 neurosurgeons completed the survey. The sample comprised 30.1% females and 69.9% males, with a median age within the 30-40 range. Among the surveyed neurosurgeons, 66.7% exhibited a prevalence of burnout, while 23.4% met the criteria for defined burnout. Significantly higher rates of burnout syndrome were observed among residents, specifically those in their fifth year of residency, as well as those whose departments perform a moderate range of surgeries (500-1000), participating in on-call duties, lacking regular physical exercise (at least twice a week), engaging infrequently in social activities with friends, lacking extracurricular hobbies, and obtaining scores exceeding 10 points in any of the HADS subscales.

Burnout syndrome affects nearly a quarter of the neurosurgical specialists included in this study. Moreover, a distinct profile associated with defined burnout among neurosurgeons emerges, encompassing characteristics such as being a fifth-year resident, belonging to departments with a moderate number of surgeries, with few extra-occupational distractions, and exhibiting symptoms of

depression or anxiety [1].

The study of Ujjan et al. aimed to evaluate burnout and associated risk factors in neurosurgical residents and faculty members. Burnout is an occupational risk of emotional exhaustion, depersonalization, and reduced perception of personal accomplishment secondary to work stress. It burdens the individual with immense mental stress causing compromised professional performance. Healthcare workers, particularly surgeons, have been documented to be at high risk of developing burnout, considering the stressful routine and serious impact of their profession.

The modified Maslach Burnout Inventory was filled by fellow neurosurgical residents or consultants. The respondents were classified into burnout and non-burnout groups and then analyzed for the associated risk factors. The data were analyzed using SPSS v26.

One hundred and thirty-eight neurosurgical healthcare workers, including 62 residents and 76 consultants, responded to the questionnaire. The burnout and non-burnout groups comprised 83 (60%) and 55 (39.9%) respondents. Female gender and few kids were observed as significant risk factors for the development of burnout ($p = 0.013$ and $p = 0.006$, respectively). Regardless of its year, residency was a risk factor for overall burnout, as well as in each subsection of the Maslach Inventory ($p = 0.002$). In consultants, recent qualifications and a high number of weekly calls were also associated with a significant risk of burnout ($p = 0.012$ and $p = 0 .027$, respectively). Marital status and national economic status did not reveal any influence on the status of burnout in neurosurgical healthcare workers.

Burnout syndrome is a prevalent and serious, yet overlooked, condition among neurosurgeons. Adequate assessment and steps should be encouraged to ensure physician and patient safety [2].

The objectives of the study of Baumgarten et al. were to report the prevalence and associated factors of burnout within the French neurosurgical community using validated academic and psychological scales.

Methods: A national survey was sent to 141 French residents and 432 neurosurgeons between April and July 2019. Burnout was surveyed using the Maslach burnout inventory. The survey included demographic data and several academic psychological scales. A stepwise multiple regression was used to determine factors that are associated with burnout scores.

Results: The response rate was 100% and 23.6% for residents and neurosurgeons, respectively. The prevalence of burnout within the French neurosurgical community was 49%. There were no significant differences between residents and neurosurgeons. Two categories of factors were associated with the main dimensions of burnout during the stepwise multiple regression: personality and factors related to neurosurgical practice. Personality types such as neuroticism were negatively associated with burnout while agreeableness was protective. Work addictive profile with excessive work and absorption at work were negatively associated. Factors associated with neurosurgical practice such as conflict of work into family life, unbalanced effort to reward ratio, work duration were negatively associated. Pleasure at work was protective.

The prevalence of burnout is high among French neurosurgeons. Predictive models can be used to identify and prevent burnout among profiles at risk [3].

examine the risk for burnout in neurosurgery trainees across the globe to compare work-related factors that may contribute to burnout and to determine if there are international differences.

Methods: A 16-question survey was designed and broadcasted through social media networks of global neurosurgeons. The first half of the survey examined work-related factors that may contribute to burnout. The second half studied the respondents' attitudes and emotional responses toward their training, patients, and work environment.

Results: There were 797 responses to the survey from 93 countries, and 243 of those were from countries designated as low- to middle-income countries. Of respondents, 20.7% scored in the range designated at risk for burnout. Logistic regression analysis showed that frequency of on-call duty and total work hours were drivers for burnout in the global cohort, but operative caseload may have a protective effect. Intercontinental comparisons revealed that the United States and Canada had the lowest proportion of trainees at risk for burnout (11.2%), whereas Europe had the highest (26.9%). Trainees from low- to middle-income countries worked more hours and on-call shifts than their global colleagues, but their average total burnout score (15.8) and proportion at risk for burnout (20.7%) were identical by global comparison.

Risk for burnout in neurosurgery residents and fellows is driven by multiple factors, including personal, demographic, programmatic, and institutional. Among work-related factors, long and frequent shifts were found to contribute to the risk of burnout in the global cohort. The regional variabilities in the impact of these factors are discussed [4)].

Yu et al. in a study aimed to evaluate the difference between academic and non-academic neurosurgeons, focusing on their professional burnout, job satisfaction and work engagement.

Design: Cross-sectional nationwide survey.

Study setting: The survey was conducted in China between 2017 and 2018.

Participants: A total number of 823 academic neurosurgeons and 379 non-academic neurosurgeons participated in this study.

Outcome measures: Professional burnout, job satisfaction and work engagement were assessed using the Maslach Burnout Inventory, the Job Descriptive Index and the Utrecht Work Engagement Scale, respectively.

Results: The majority of respondents were male (92.93%), less than 45 years old (85.27%) and married (79.53%). Chinese neurosurgeons worked 63.91±11.04 hours per week, and approximately 45% experienced burnout. Compared with non-academic respondents, academic neurosurgeons had longer working hours ($p<0.01$), higher income ($p<0.01$) and were less willing to get married ($p<0.01$). In addition, they showed a lower degree of burnout ($p<0.01$), a higher level of job satisfaction ($p<0.01$) and were more enthusiastic at work ($p=0.015$). Multivariate regression analyses indicated that divorced (OR 7.02, 95% CI 2.37 to 15.08) and workplace violence (OR 1.52, 95% CI 1.18 to 2.24) were associated with burnout for both academic and non-academic respondents. Long working hours (≥71 hours per week) and low annual income (<1 00 000 RMB) were risk factors for burnout among academic neurosurgeons. For non-academic neurosurgical surgeons (age 36-45 years), working as attending doctors, serving in public hospitals and having the first house-living child were all closely

related to the incidence of burnout.

Conclusion: Chinese neurosurgeons are under significant stress particularly for the non-academic neurosurgeons. Offering better opportunities for training, promotion, higher income and safer working environments could be solutions to relieve burnout and improve career satisfaction and engagement.

Trial registration number: ChiCTR1800014762 [5].

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