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### Summary

Burnout syndrome is a psychosocial condition characterized by emotional exhaustion, depersonalization, and low personal accomplishment, frequently observed in physicians due to high workload and emotional responsibility. This integrative review aimed to analyze the prevalence and factors associated with burnout syndrome in physicians, considering occupational, individual, and contextual aspects. A systematic search was conducted in the PubMed and BVS databases, using MeSH descriptors combined with Boolean operators, and included studies in Portuguese and English that presented empirical data on burnout in active or resident physicians. The results indicate a high prevalence of the syndrome, ranging from 18% to 59.4%, being more pronounced in young professionals, females, and in highly complex environments, such as intensive care units. Risk factors include long working hours, excessive shifts, sleep deprivation, and lack of institutional support, while protective factors include social support, coping strategies, job satisfaction, and self-care practices. In addition to affecting mental health, burnout is linked to decreased job satisfaction, higher turnover, and an increased risk of medical errors, especially in critical contexts such as the COVID-19 pandemic.

These findings reinforce the need for institutional policies, psychological support programs, and occupational health promotion measures for physicians. Understanding the determinants of burnout is essential for preventive strategies that ensure well-being, resilience, and quality in medical practice.

**Keywords:** burnout; physicians; prevalence.

### Abstract

Burnout syndrome is a psychosocial condition characterized by emotional exhaustion, depersonalization, and reduced personal accomplishment, frequently observed in physicians due to high workload and emotional responsibility. This integrative review aimed to analyze the prevalence and factors associated with burnout syndrome in physicians, considering occupational, individual, and contextual aspects. A systematic search was conducted in PubMed and VHL databases using MeSH terms combined with Boolean operators, including studies in Portuguese and English with empirical data on burnout in active or resident physicians. Results indicate a high prevalence of burnout, ranging from 18% to 59.4%, especially in young, female physicians and in high-complexity environments such as intensive care units. Risk factors include long working hours, excessive shifts, sleep deprivation, and lack of institutional support, whereas protective factors encompass social support, coping strategies, professional satisfaction, and self-care practices. Beyond impacting mental health, burnout is associated with reduced job satisfaction, higher turnover, and increased risk of medical errors, particularly in critical contexts such as the COVID19 pandemic. These findings emphasize the need for institutional policies, psychological support programs, and occupational health promotion measures. Understanding the determinants of burnout is essential for preventive strategies that ensure well-being, resilience, and quality medical practice.

**Keywords:** burnout; Physicians; Prevalence.

### 1. Introduction

Burnout syndrome is a psychosocial phenomenon characterized by emotional exhaustion, depersonalization and low personal accomplishment, which mainly affects professionals who deal with

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High workload and great emotional responsibility. Among doctors, the occurrence of this...

The syndrome has attracted significant attention, given its direct link to mental health and quality of life. of patient care and safety (PRESTES, 2025).

International studies indicate that the prevalence of burnout among physicians varies widely. with values ranging from 18% to 80%, depending on the country, medical specialty, and methodology. employed. This variation highlights the need for contextual and rigorous assessments. especially considering the different measurement instruments, such as the Maslach Burnout Scale. Inventory (MBI) (GómezUrquiza et al., 2019).

In the Brazilian context, research indicates that factors such as long working hours and excessive... Shift work, sleep deprivation, younger age, and female sex are associated with a higher risk of Burnout among physicians. Furthermore, the impact of the COVID-19 pandemic highlighted an increase. significant in prevalence, showing that occupational stress and critical events can exacerbate the syndrome (PRESTES, 2025; Tironi et al., 2016).

Several studies also highlight that burnout is not limited to its impact on health. mental health issues are linked to decreased job satisfaction, increased turnover, and a higher risk of burnout. of medical errors, demonstrating the importance of identifying risk factors and preventive strategies. effective (Becker et al., 2021).

Finally, to understand the prevalence and factors associated with burnout syndrome in physicians. It is essential for developing prevention policies, psychological support programs, and improvements in... work environment, with the goal of promoting well-being, reducing occupational stress and ensuring the quality of medical care (Moreira et al., 2018).

## **2. Theoretical Framework / Results**

Burnout syndrome, as a psychosocial construct, has been extensively studied. since the 1970s, with particular emphasis on the Maslach and Jackson model, which describes three central dimensions: emotional exhaustion, depersonalization and low personal accomplishment (Moreira et al., (2018). Emotional exhaustion refers to the burnout resulting from intense professional demands; Depersonalization manifests itself in distant or cynical attitudes towards patients; and low Personal fulfillment involves feelings of ineffectiveness and frustration with professional performance. (PRESTES, 2025).

In addition to individual dimensions, burnout is influenced by organizational factors, such as workload, shift schedule, lack of institutional support and organizational culture (Becker et al., 2021). Professionals working in high-pressure environments, such as intensive care units, They exhibit greater vulnerability due to the constant need to make critical decisions and

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exposure to human suffering (Gómez-Urquiza et al., 2019).

The diagnosis and measurement of burnout syndrome depend on standardized instruments.

The Maslach Burnout Inventory (MBI) is the most widely used internationally. This instrument

It allows for the assessment of the intensity of the three dimensions of the syndrome and the establishment of comparisons between them. different medical contexts and populations (Gómez-Urquiza et al., 2019). Recent studies highlight that, although the MBI is widely validated, methodological and cultural variations may influence it. the results, highlighting the need for contextual adaptation (PRESTES, 2025).

Another relevant point of the theoretical framework refers to protective factors. Research indicates What coping strategies, social support, job satisfaction, and self-care practices can... to mitigate the effects of burnout on mental health, preventing consequences such as depression, Anxiety and abandonment of the medical career (Moreira et al., 2018; Becker et al., 2021).

### 3. Materials and Methods

This study is characterized as an integrative literature review, designed with the purpose is to outline the prevalence and factors associated with burnout syndrome in physicians. To obtain the relevant scientific material, a systematic search was conducted in the databases. PubMed and BVS, prioritizing articles indexed with Medical Subject Headings descriptors. (MeSH). Specific terms were used, such as "Burnout, Psychological", "Physicians", "Mental Health", "Depression", and "Anxiety", combined using the Boolean operators AND and OR, in order to optimize the accuracy and sensitivity of the search, allowing the capture of publications. that comprehensively address both the occurrence and the determinants of burnout in medical context.

To refine the search and ensure the relevance of the selected articles, the following were established: Inclusion and exclusion criteria. Studies published in English or Portuguese, with full access to the text, that presented empirical data on prevalence, Factors associated with or impacts of burnout syndrome in physicians, encompassing both professional and professional categories. While employed as residents, jobs that consisted of... were excluded. On the other hand, jobs that consisted of... exclusively in case reports, editorials, expert opinions, duplicate articles, or those that addressed non-medical populations, since they did not fall within the scope of the study.

The screening of articles was initially carried out by reading titles and abstracts. followed by a comprehensive analysis of the selected texts, ensuring that only aligned publications are included. The information extracted was organized and incorporated into the objectives of the review. categorized according to aspects related to the prevalence of the syndrome, occupational factors and personal relationships and impacts on the mental health of physicians. This methodological approach

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This allowed for the consolidation of robust and reliable evidence, ensuring consistency and scientific validity.  
of the review.

#### **4. Results and Discussion**

Analysis of the selected studies reveals that burnout syndrome presents high levels of risk factors. prevalence among physicians, varying according to specialty, practice context, and methodology. used. In a sample of 1,201 physicians from the state of Paraná, the prevalence of burnout was estimated at 59.4%, while more than 97% of professionals presented significant symptoms. of psychological stress (Gonçalves, 2023). International studies with intensivists also indicate Prevalence between 18% and 49%, reinforcing that professionals in highly complex roles are more exposed. high emotional and organizational demands (Gómez-Urquiza et al., 2019).

In the Brazilian context, occupational factors such as long working hours, excess of Shift work, sleep deprivation, and lack of institutional support have been consistently associated with Increased risk of burnout. In addition, individual characteristics, including female sex and age, also play a role. younger individuals were associated with higher levels of emotional exhaustion and depersonalization (Prestes, 2025; Tironi et al., 2016).

Further studies highlight that burnout is not limited to mental health, but is strongly linked to other health issues. correlated with decreased job satisfaction, higher turnover, and an increased risk of errors. doctors. National evidence suggests that, during the COVID-19 pandemic, the prevalence of The syndrome has increased significantly, especially among early-career professionals and those working on the front line (Prestes, 2025; Becker et al., 2021).

On the other hand, protective factors such as social support, coping strategies, and satisfaction Professionals have shown a mitigating effect on the syndrome, helping to reduce levels of exhaustion and depersonalization and promoting greater well-being in the work environment (Moreira et al., 2018; Becker et al., 2021). These findings reinforce the need for preventive policies and programs. Psychological support and occupational health promotion measures for physicians.

In summary, the reviewed literature shows that the occurrence of burnout is multifactorial. resulting from the interaction between adverse organizational conditions, individual characteristics and Critical operational contexts, such as highly complex units and pandemic situations. Early identification of risk factors and the implementation of protective strategies are essential. to reduce impacts on mental health, job satisfaction, and quality of care. physician (Gonçalves, 2023; Moreira et al., 2018).

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## Final Considerations

The integrative review conducted shows that burnout syndrome is highly prevalent among doctors, both in Brazil and internationally, being strongly influenced by factors Occupational, individual, and contextual factors. National studies indicate a prevalence greater than 50% in some samples, especially among young female doctors in environments high-demand services, such as intensive care units and emergency services (Gonçalves, 2023; Prestes, 2025).

Furthermore, the literature demonstrates that burnout is not limited to psychological impacts. It affects individuals, but also job satisfaction, quality of care, and safety. patient. Crisis situations, such as the COVID-19 pandemic, exacerbated levels of exhaustion. Emotional distress, depersonalization, and low personal accomplishment, highlighting the need for action. Continuous preventive measures in the medical work environment (Becker et al., 2021; Moreira et al., 2018).

Protective factors include social support, coping strategies, self-care, and satisfaction. professionally, they have proven effective in reducing the intensity of burnout and promoting well-being. This reinforces the idea that individual and organizational interventions are complementary in prevention. of the syndrome (Moreira et al., 2018; Becker et al., 2021).

In light of these findings, the need for institutional policies and programs becomes evident. psychological support that promotes a balance between workload and well-being, offers coping resources and encourage the creation of healthy and collaborative environments. Such These measures are essential not only for preserving the mental health of doctors, but also for maintaining quality and safety in patient care (Gómez Urquiza et al., 2019; Gonçalves, 2023).

In conclusion, understanding the prevalence, risk factors, and protective elements of Burnout syndrome is a fundamental step in guiding preventive and promotional strategies. occupational health, ensuring that medical professionals can perform their duties with Efficiency, resilience, and overall well-being.

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