

Occupational Burnout Outbreak

Do little tasks on your to-do list sometimes seem like insurmountable challenges? Are you sometimes overcome with dread on Sunday evening, contemplating the start of another workweek? Are you beginning to take on a cynical view of all things work-related? Do you feel tired all the time? If so, you may be experiencing occupational burnout.

Burnout defined

Occupational burnout is the state in which you've exhausted all your resources but can't rid yourself of the nervous compulsion to go on.¹ Its hallmarks are emotional exhaustion, a sense of lack of accomplishment and depersonalization. When burnout is work-related, it is referred to as occupational burnout. Common symptoms include chronic indecision, lack of motivation, frequent mistakes, irritability and a sense of physical, psychological and mental overload.

Occupational burnout is not the same as depression, but those with burnout may also have depression. Generally speaking, burnout is usually work-related, whereas depression pervades all areas of life without necessarily having a specific origin.²

Psychological effects from burnout include insomnia, depression, use of psychotropic and antidepressant medications, higher incidence of hospitalization for mental disorders, and other psychological symptoms.³

Studies show that workplace burnout is a significant risk factor for coronary heart disease. Other studies found similar patterns for high cholesterol, type 2 diabetes, increased hospitalization due to cardiovascular disorders, musculoskeletal pain, prolonged fatigue,

headaches, gastrointestinal issues, respiratory problems, severe injuries and early mortality (before age 45).

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History of burnout

The symptoms and concept of occupational burnout are not new. Even in the Bible, the book of Ecclesiastes describes melancholic world-weariness. The term burnout was also found to be documented throughout the annals of occupational medicine.⁴

The term *neurasthenia* was first used as early as 1829 to describe nervous exhaustion in patients run down by the “pace and strain of modern industrial life.”⁴ Americans were particularly prone to neurasthenia, and resulted in the nickname “*Americanitis*.”⁵

In 1974, psychoanalyst Herbert J. Freudenberger became the first clinical researcher to publish the term “burnout” in a psychology-related journal. The paper was based on his observations of the volunteer staff at a free clinic for drug addicts.⁶

Psychoanalyst Herbert J. Freudenberger’s definition of burnout

“Burnout is a state of exhaustion and frustration caused by unrealistic expectations. It is a consumption of energy – exhaustion due to excessive demands by family, work, friends, lovers, value systems or society – that robs a person of all energy, coping mechanisms and inner strength.”²

Physician burnout: the canary in the coal mine?

A national survey published in the Archives of Internal Medicine in 2012 reported that U.S. physicians suffer more burnout than other American workers. Medscape’s 2019 survey reports that physician burn-out has reached extreme levels at 59%. Note that colloquial depression refers to feeling down, blue or sad, while clinical depression is chronic severe depression not caused by a grief-associated event.⁷

Physician burnout causes financial strain on the U.S. health care system. Cost-consequence analysis estimates that in the healthcare field, approximately \$4.6 billion

Are Physicians Burned Out or Depressed?

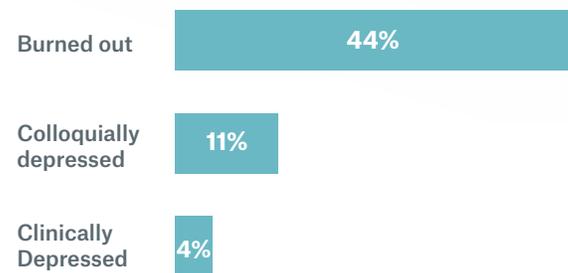


Figure 1. “Medscape National Physician Burnout, Depression & Suicide Report 2019.” January 16, 2019.

in costs related to physician turnover and reduced clinical hours is attributable to burnout each year. On an organizational level, the annual economic cost associated with physician burnout related to turnover and reduced clinical hours is approximately \$7,600 per employed physician each year.⁸

Physicians are not the only high stress position at risk for burnout. In the general workforce, other job burnout accounts for an estimated \$125 billion to \$190 billion in health-care spending annually.⁹ One could assume that an occupational burnout epidemic might first manifest itself in the higher stress professions. Other industries where occupational burnout is becoming more prevalent are social work, emergency response, design, business development and sales, retail, public accounting and law.¹⁰

The Effects of Employee Burnout

Employees who say they very often or always experience burnout at work are:

- 63% more likely to take a sick day
- Half as likely to discuss how to approach performance goals with their manager
- 23% more likely to visit the emergency room
- 2.6 times as likely to leave their current employer
- 13% less confident in their performance

Figure 2. Wigert, Ben and Agrawal, Sangeeta. “Employee Burnout, Part 1: The 5 Main Causes. Gallup, 7/12/2018.

Origins of American burnout

It is theorized that in the future, burnout will affect more than just workers in acutely high-stress environments. Burnout has also been viewed as a *generational condition*. The term “burnout” is sometimes used interchangeably with “Millennial burnout.”

As American business became more efficient, the working environment became more competitive. American workers feel they have been conditioned to believe that they should be working all the time. Generational groups such as Gen X and Millennials, were optimized from a young age to be the best workers possible.¹¹ Unlike previous generations, they did not have clear demarcations between when they were on and off the clock.

Additionally, individuals did not enjoy typical forms of leisure activity, as they instead felt guilty for not working. Thus, there is no respite from the workplace.¹² Unfair treatment at work, unreasonable deadlines, unmanageable workload, lack of support from managers and having to respond to emails and texts during off hours are primary drivers of job burnout.⁹

During this era of COVID-19, we have seen many stories of burnout among hospital employees; however, it is affecting many more workers outside of the medical community, sometimes with serious consequences. Countless office workers have been suddenly thrust into a remote work environment. With no dedicated office space and no childcare available, employees are forced to juggle being present and productive at work with being available to care for and often entertain their children. Stretched-thin parents are working longer and non-conventional hours. According to a recent monster.com survey of those working from home, more than 50% are experiencing burnout and 52% of respondents don't have any plans to take time off to decompress, which can lead to further burnout and additional health complications.¹³

Burnout as a diagnosis

The ICD-10-CM code 273.0 is used to code Occupational Burnout

Burnout is a type of psychological stress. Occupational burnout or job burnout is characterized by exhaustion, lack of enthusiasm and motivation, feelings of ineffectiveness, and also may have the dimension of frustration or cynicism, and as a result reduced efficacy within the workplace.¹⁴

The World Health Organization (WHO) recognizes work-related burnout as an occupational phenomenon. WHO stressed that “burnout” is not classified as a medical condition but as an *occupational syndrome*. Symptoms of burnout include:

1. Feelings of exhaustion
2. Cynicism about one's job
3. Difficulty doing the job successfully.

WHO now includes burnout in their International Classification of Diseases (ICD) Handbook. The ICD-10-CM Code Z73.0 is the billable ICD code used to specify a diagnosis of burnout. A “billable code” is detailed enough to be used to specify a medical diagnosis.¹⁵

According to WHO, doctors can issue a diagnosis of burnout if a patient exhibits three symptoms:

1. Feeling depleted of energy or exhausted
2. Feeling mentally distanced from or cynical about one's job
3. Problems getting one's job done successfully.

WHO notes that burnout is to be used specifically “in the occupational context” and that it “should not be applied to describe experiences in other areas of life.” They recently announced plans to update the definition of burnout for the next edition of WHO's ICD-11 Handbook, which will come into effect in January 2022.¹⁴ It is worth noting that occupational burnout is still *not* listed in the *Diagnostic and Statistical Manual of Mental Disorders Fifth Edition* (DSM-5) from the American Psychological Association (APA).

Currently, there is no neat or universal way to isolate symptoms of burnout from symptoms of other mental health conditions, such as depression. This makes it extremely difficult for doctors to recognize and treat the syndrome, and in some professions like healthcare and law, it's considered an epidemic.¹⁶

Burnout solutions and treatment

Burnout prevention programs have usually focused on cognitive restructuring, didactic stress management, and relaxation. Cognitive-behavioral therapy (CBT), relaxation techniques and schedule changes are often used for reducing or preventing burnout. A multi-directional approach, combining both organizational and individual-level activities, may yield the greatest results.¹⁷

Maslach and Leiter postulated that burnout occurs when there is a disconnection between the organization and the individual with regard to what they called the six areas of work life: workload, control, reward, community, fairness, and values. Assuring that a worker has adequate resources to meet job demands as well as ensuring

a satisfactory work–life balance can help revitalize employees’ energy.¹⁸

Clearly stated ethical organizational values are important for ensuring employee commitment. Supportive leadership and relationships with colleagues are also beneficial.¹⁸ Companies need healthy, committed and qualified employees to be successful. Not only is an employee’s physical and mental health important, but companies must also be mindful of employee motivation, job satisfaction and work climate.²

Disability provider ramifications

Mental/nervous and substance abuse disability claims carry an added level of complexity under the best circumstances. Insurers should make sure policy limitations are adequately worded to cover burnout diagnoses. Also, consideration should be given to the possibility of increased incidence of disability, due to occupational burnout and potential generational implications, by re-evaluating existing underwriting guidelines to address this new diagnosis.



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