



Sindrom izgaranja u službama dijalize – faktori rizika, manifestacije i posledice

Burnout syndrome in dialysis services, risk factors, manifestations and consequences

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Apstrakt

Fenomen sagorevanja na poslu je prvi put opisan šezdesetih godina prošlog veka, a od 2019. godine sindrom izgaranja na radnom mestu (engl. *burnout syndrome*) uvršten je u 11. reviziju Međunarodne klasifikacije bolesti Svetske zdravstvene organizacije čime je problem aktuelizovan. Ovaj sindrom predstavlja odloženu reakciju na hronične stresne situacije na poslu koju karakterišu emocionalna iscrpljenost, doživljaj cinizma – depersonalizacije i udaljenosti od posla, i doživljaj nedovoljne efikasnosti u radu. Emocionalna iscrpljenost se manifestuje nesposobnošću da se osoba emocionalno uključi u radne zadatke usled potpunog nedostatka energije i iscrpljenosti emocionalnih i fizičkih resursa. Komponentu depersonalizacije karakteriše zauzimanje distanciranog stava, razvijanje ravnodušnosti, ili čak negativnih stavova i osećanja prema osobama sa kojima ili za koje se radi. Doživljaj nedovoljne efikasnosti, odnosno smanjen osećaj ličnog postignuća, manifestuje se kao sklonost zaposlenog da negativno procenjuje sopstvene mogućnosti i sposobnosti da obavlja radne zadatke, ili izostanak zadovoljstva postignutim rezultatima. Savremeni način života i hronična izloženost stresu doveli su do velike rasprostranjenosti ovog sindroma. Pored stresa, ključni činioci za njegov nastanak su i nesrazmera između obima posla i mogućnosti kontrole, kao i između uloženog napora i ostvarene nagrade. Modulirajući faktori su: nerealno veliki obim i loša organizacija posla, veliki broj radnih sati, nedovoljna kvalifikovanost, kraći radni staž, neadekvatna supervizija, nedostatak lične motivacije, previsoka očekivanja, ukidanje beneficija ili neispunjavaње ugovornih obaveza poslodavca, promena vlasnika ili rukovodioca organizacije, smanjenje broja radnika; ali i lični faktori kao što su starost, pol, zdravstveno stanje i sposobnost prilagođavanja.

Posebno visok rizik za pojavu izgaranja nose zanimanja koja podrazumevaju rad sa ljudima, naročito sa osobama sa posebnim potrebama, bolesnim, decom i socijalno ugroženim, zatim profesije koje nose veliku odgovornost, zahtevaju visoku preciznost, podrazumevaju izloženost štetnim uticajima, socijalnom neprihvatanju ili opasnosti po život, kao i poslovi koji zahtevaju rad u smenama ili sa konstantnim kratkim rokovima.

Posledice sindroma izgaranja se odražavaju kako na samog zaposlenog (pojava cinizma, negativizma i mrzovolje, preosetljivosti, razdražljivosti, gubitak interesovanja i motivacije, pad samopouzdanja, povlačenje u sebe, doživljaj bespomoćnosti, osećaj da se ne dobija odgovarajuća podrška, hronični zamor, malaksalost, bol u leđima, glavobolje i drugi hronični neodređeni

Abstract

The burnout phenomenon was first described in the 1960s of the 20th century, and in 2019 this syndrome was involved in the 11th revision of the International Classification of Diseases of the World Health Organization, which made the problem more noticeable. This syndrome is a delayed reaction to chronic stressful situations at work, which is characterized by emotional exhaustion, the experience of cynicism - depersonalization and distance from work, and the experience of insufficient efficiency at work. Emotional exhaustion is manifested by the inability of a person to get emotionally involved in work tasks due to a complete lack of energy and emotional and physical weakness. The component of depersonalization is characterized by reserved behavior, the development of apathy, or negative attitudes or feelings towards the people from the working environment. The experience of insufficient efficiency, and a reduced sense of personal achievement, is manifested as the tendency of the employee to negatively assess their own capabilities and abilities to perform work tasks or lack of satisfaction with the results achieved. Modern way of life and chronic stress exposure led to high prevalence of this syndrome. In addition to stress, the key factors for its occurrence are the disproportion between the scope of workload and the ability to control it, as well as the disproportion between the effort and the reward. Modulating factors are unrealistic volume and poor work organization, a large number of working hours, insufficient qualification, shorter work experience, inadequate supervision, lack of personal motivation, high expectations, termination of benefits or non-fulfillment of contractual obligations of the employer, change of owner or manager, reduction of employees; but also personal factors such as age, gender, health status and the ability to adapt. Occupations that involve working with people, especially people with special needs, the sick, children, and the socially vulnerable, are particularly high risk of burnout, as well as occupations that carry great responsibility require high precision, exposure to harmful influences, social rejection, or danger to life, as well as jobs that require work in shifts or with constant short deadlines.

The consequences of burnout syndrome impact not only the employee (the appearance of cynicism, negativism and grumpiness, hypersensitivity, irritability, loss of interest and motivation, loss of self-confidence, withdrawal, helplessness, feeling of not getting adequate support, chronic fatigue, weakness, back pain, headaches and other chronic indeterminate pains, gastrointestinal problems, insomnia, long duration of the so-called. “minor diseases”; to serious health problems - sudden

bolovi, gastrointestinalne tegobe, nesanica, dugo trajanje tzv. „minornih oboljenja”; do ozbiljnih zdravstvenih problema – nagle promene telesne mase, metabolički sindrom, visok krvni pritisak i kardiovaskularne bolesti), tako i na kolektiv (učestalo odsustvovanje sa posla, smanjena radna efikasnost, smanjeno lično angažovanje, smanjena produktivnost, veća mogućnost stručne greške, učestalo napuštanje posla, otuđenje, učestali sukobi sa saradnicima, gubitak poverenja, nesposobnost prihvatanja kritike, nametanje vlastitih sudova, nerazumevanje nadređenih).

Rad u službi hemodijalize nosi brojne rizike za nastanak sindroma izgaranja na poslu jer podrazumeva neposredni i prolongirani kontakt sve starijim, zahtevnijim i sve manje kompliantnim teško obolelim osobama sa sve brojnijim komplikacijama, kontaktiranje sa njihovim porodicama, neophodan visok stepen koncentracije pri rukovanju preciznim dijaliznim aparatima, monotonost posla, rad u smenama, etičke dileme, manjak kontrole i izlaganje riziku sopstvenog zdravlja.

U našoj zemlji je za sada sprovedeno samo jedno istraživanje o zastupljenosti sindroma izgaranja među zdravstvenim radnicima u službi hemodijalize. Rezultati ovog istraživanja mogli bi da značajno pomognu u kreiranju strategija za prevenciju, umanjivanje prisustva i ublažavanje posledica izgaranja.

weight changes, metabolic syndrome, high blood pressure, and cardiovascular disease) but also the entire collective (frequent absences from work reduced work efficiency, reduced personal engagement, reduced productivity, the greater possibility of professional error, frequent leaving the job, alienation, frequent conflicts with associates, loss of trust, inability to accept criticism, imposing one's own judgments, misunderstanding of superiors).

Working in the hemodialysis service carries numerous risks for the development of burnout syndrome at work because it implies direct and prolonged contact with older, more demanding, and less compliant seriously ill people with increasing complications, contact with their families, the necessary high degree of concentration when handling precision dialysis machines, job monotony, shift work, ethical dilemmas, lack of control, and risk to one's own health.

So far, only one research has been conducted in our country on the prevalence of burnout syndrome among health workers in the hemodialysis service. The results of this research could significantly help in creating strategies to prevent, reduce the presence, and mitigate the effects of burnout.