

Conclusions: The likelihood of exhibiting burnout is more than twice higher in intensive care than in palliative care. Being a nurse and experiencing conflicts in the work-context are associated with higher burnout levels.

Keywords: Burnout. Palliative care. Intensive care.

BURNOUT IN END-OF-LIFE CARE: RESULTS FROM A MULTICENTER COMPARATIVE STUDY BETWEEN INTENSIVE AND PALLIATIVE CARE UNITS

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Introduction: Repeated contact with dying and death is described as a major burnout risk factor. Hence, professionals working in palliative and intensive care units are at special risk. Little is known on this subject in Portugal.

Objectives: To identify and compare burnout levels and its related factors among physicians and nurses working in palliative and intensive care units in Portugal.

Methods: Multicenter quantitative, comparative study. The Maslach Burnout Inventory was used for data collection and a questionnaire of socio-demographic variables was applied. 355 professionals were included in this study, of which 88 worked in palliative care units (PCUs) and 267 in intensive care units (ICUs). Univariate and multivariate logistic regression analyses were performed; OR sidelong with 95% of CI were calculated.

Results: Out of the 267 professionals working in ICUs, 25% exhibited burnout, and out of the 88 professionals working in PCUs, only 3% exhibited burnout. Univariate logistic regression analysis showed that the outcome variable -burnout- was 2.384 (95%CI 1.273-4.465) times higher among professionals working in ICUs. When controlling for other variables (e.g., professionals' socio-demographic characteristics, post-graduated education in intensive/palliative care, work-related experiences), differences remained significant (OR = 2.525; 95%CI 1.025-6.221). Higher levels of burnout in ICUs were related to being a nurse (OR = 1.849; 95%CI 1.029-3.321) and experiencing conflicts (OR = 2.170 95%CI 1.218-3.866).