

Orthopaedics-2020: Manual therapies in the management of burnout syndrome in university students : A Review Article- Sara Rosa De Sousa Andrade,

Burnout syndrome (SB) is characterized by emotional exhaustion (EE), reduced capacity for professional expression (PR) and depersonalization (DD), which culminate in physical exhaustion. Based on surveys by the International Association of Stress Management in Brazil (ISMA-BR) note 1 It is estimated that in Brazil more than 100 million workers are carriers of the syndrome. The UK has 20 million people suffering from SB. In the United States, a country also known for economic capacity, the ISMA reveals that Already with a workload as a Germany, about 2.7 million people work on psychosomatic signs with a syndrome. Such epidemiological data show that Burnout is a public health problem with pandemic characteristics, called exponential growth at each period, and is considered of loss of importance in the psychological, physical and social contexts of the worker. The objective was to identify the high-level (SB) levels, to describe the sociodemographic profile of a group, as well as to apply a protocol of physiotherapeutic treatment. This is a quantitative, descriptive study of intervention. Used instruments; Socio-demographic profile questionnaire, Work Stress Scale and the Maslach Burnout Inventory-General Survey. Abstract: Burnout syndrome (SB) is characterized by emotional exhaustion (EE), reduced capacity for professional expression (PR) and depersonalization (DD), which culminate in physical exhaustion. Based on surveys by the International Association of Stress Management in Brazil (ISMA-BR) note 1 It is estimated that in Brazil more than 100 million workers are carriers of the syndrome. The UK has 20 million people suffering from SB. In the United States, a country also known for economic capacity, the ISMA reveals that Already with a workload as a Germany, about 2.7 million people work on psychosomatic signs with a syndrome. Such epidemiological data show that Burnout is a public health problem with pandemic characteristics, called exponential growth at each period, and is considered of loss of importance in the psychological, physical and social contexts of the worker. The objective was to identify the high-level (SB) levels, to describe the sociodemographic profile of a group, as well as to apply a protocol of physiotherapeutic treatment.

This is a quantitative, descriptive study of intervention. Used instruments; Socio-demographic profile questionnaire, Work Stress Scale and the Maslach Burnout Inventory-General Survey. Therapy was used for stretching, aerobic exercise, winds therapy, instrumental myofascial release and functional bandages. A Manual Therapies protocol was applied experimentally with attendance sessions lasting 50 minutes in three students who obtained a high SB score. The protocol was applied in two ways, the first in the following sequence, Stretching, trekking for 30 minutes and Myofascial Release Instrumentation, the second form followed with Stretching, trekking for 30 minutes, windsurfing and functional bandages. The students were identified as P1 submitted to 4 sessions of the protocol, P2 and P3 5 sessions. Among the 158 surveyed, 19.62% expressed a high SB level. As for sex, the predominance was; of absolute form higher in women 70.96% and proportionally higher in men 21.42%. As for the other variables, the predominance was single students (a) s 67.74%, average of 25 years, employment time between 1-2 years 35.48%, with workload ≥ 40 hours per week 58.07%, family income 1-2 minimum wages 55.30%. Being that 90.32% does not pretend to retire in the current job and 70.96% sedentary. In relation to the protocol of physical therapy treatment, after the application P1 presented worsening in the EE from 1.3 to 5.7, improvement in the DD from 4.0 to 2.5, improvement of the RP from 1.0 to 3.8 and worsening in TSE from 2.7 to 3.8. P2 expressed improvement in ES from 5.8 to 2.8, improvement in DD from 4.5 to 2.3, improvement in PR from 4.4 to 4.2 and improvement in TSE from 3.0 to 2.6. P3 had EE improvement from 4.8 to 3.7, improvement in DD from 3.8 to 2.8, improvement in PR from 3.6 to 5.0 and improvement in TSE from 4.2 to 2.4. As for the sociodemographic profile, it was concluded that 19.62% of students have signs of high SB, single, subject to high weekly workload, and low income. Sedentary, double-time students, in addition to working only to make up income, the protocol presented worsening in the overall picture of P1 and improvement in all dimensions of P2 and P3.