

# Long-term follow-up of mental and somatic symptoms in patients treated for stress-related exhaustion

Kristina Glise, PhD<sup>1</sup>, MD, Ingibjorg H Jonsdottir PhD<sup>1,2</sup>, The Institute of Stress Medicine, Gothenburg<sup>1</sup> and University of Gothenburg, Sweden<sup>2</sup>

## Objectives

The most severe mental consequences of long-term psychosocial stress is burnout/exhaustion. In Sweden, the psychological term burnout has been operationalised to the medical diagnosis exhaustion disorder (ED). Comorbidity with depression and anxiety is frequent. The clinical experience is that the course of illness can be long-lasting but this has not been thoroughly studied. The aim of the present study was to explore the prevalence of residual mental symptoms in patients with ED, seven years or more after seeking care for their exhaustion.

## Methods

Former patients referred to a specialist clinic were invited to participate in this long-term follow up. Seven years after initially seeking care the participants were asked to answer several questionnaires including Shirom Melamed Burnout Questionnaire (SMBQ), and Hospital Anxiety and Depression Scale (HAD) and self-rated exhaustion disorder (s-ED). Among eligible patients (N=349), 163 (47%), 77% women, mean age 52 years, accepted to participate.

## Results

As many as 36% still reported clinical burnout (SMBQ  $\geq 4.4$ ) seven years after initially seeking care, 36% of females and 35% of males, ns. As many as 35% still report that they fulfill the criterion for exhaustion according to the s-ED. The proportion reporting plausible symptoms of depression ( $>10$  on HAD) were 9% compared to 37% at baseline, and plausible symptoms of anxiety was reported by 18% compared to 63% at baseline, no sex differences.

## Conclusions

An important proportion of patients with exhaustion disorder report symptoms after seven years or more. More than one third of the patients still report symptoms according to the Exhaustion Disorder criteria whereas symptoms of depression and anxiety no longer are present. No difference was seen between men and women with regard to this pattern. Future analysis will be conducted to explore which factors plausible could explain these long-lasting symptoms of exhaustion.

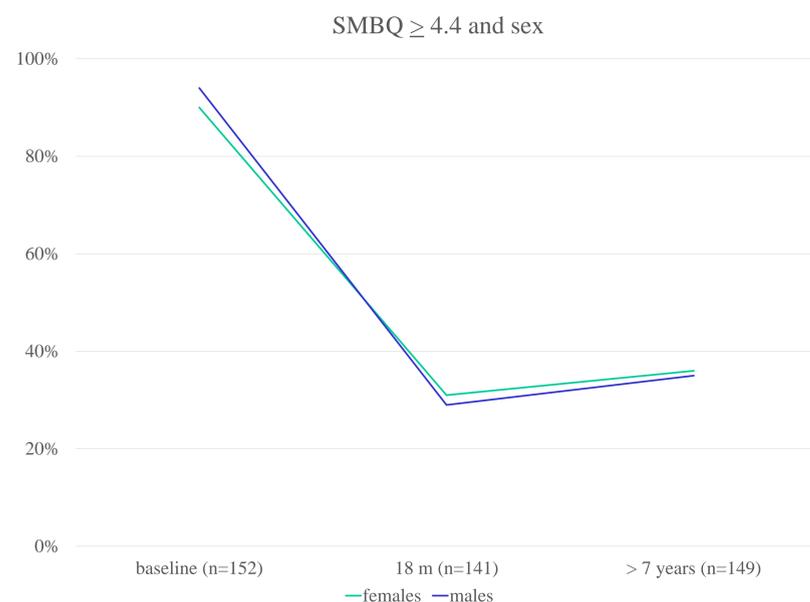


Figure 1. Symptoms of burnout by SMBQ and sex, cut of 4.4, from baseline to follow up after seven years.

For additional information, please contact:  
kristina.glise@vregion.se