

357 **COMPARATIVE STUDY OF BURNOUT SYNDROME PECULIARITIES  
AMONG INDIAN AND UKRAINIAN MEDICAL PRACTITIONERS**

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**INTRODUCTION:** Medical profession is related to interpersonal communication and emotional stress. With a time it leads to the burnout syndrome (BS) in medical officers. That is why they should apply different anti-stress methods, which could strongly depend on person's national mentality.

**METHODS:** We conducted and interviewed two groups of medical practitioners: group 1 - Indian doctors (n=78) and group 2 - Ukrainian doctors (n=82), using Maslach Burnout Inventory (MBI). Responders also were asked to indicate their personal anti-stress methods.

**RESULTS:** Only 3% of doctors of group 1 belonged to the stage 1 of BS (7% - in group 2), 7% - to the stage 2 (15% - in group 2), 15% - to the stage 3 (63% - in group 2), 65% - to the stage 4 (10% - in group 2) and 10% - to the stage 5 (5% - in group 2) ( $p < 0.05$ ). Anti-stress methods in the group 1 were mostly represented with yoga/meditation - 93% (in the group 2 - 12%), religious practices - 91% (in the group 2 - 64%) ( $p < 0.05$ ). Family approach was equally popular in both groups - 87% in the group 1 and 85% - in the group 2 ( $p > 0.05$ ). Responders of the group 2 more widely used support groups/friends - 89% (group 1 - 58%), exercise/sport - 83% (group 1 - 75%), hobbies and other creative outlets - 67% (group 1 - 23%) ( $p < 0.05$ ). Professional help (group 1 - 5%, group 2 - 8%), psychological self-education (group 1 - 10%, group 2 - 11%), medications (group 1 - 4%, group 2 - 7%) ( $p < 0.05$ ), were less commonly used in both groups.

**CONCLUSION:** We found out, that Indian doctors are more exposed to high working load and prefer spiritual practices to interpersonal communication, while Ukrainians prefer sport and hobbies. Thus, BS coping strategies should incorporate national peculiarities along with general principles.