Since getting his business degree nine years ago, Larry has been the model hard-charging executive bound for the top. After the 28-year-old joined a consulting company, he was quickly promoted to a position with loads of responsibility, a company car and an enviable income. Along with the fulfilling tasks came constant travel and 60- to 80-hour workweeks, including meetings on weekends. But he did not mind. “Occasionally it occurred to me how stressful the job was,” he says. “But I really got a kick out of it. For a long time, it was lots of fun.”

Until the day he ended up in the intensive care unit. Larry collapsed right outside the door to his apartment, with a terrible headache, a racing heart and vertigo. “At first I thought I had had a stroke,” he recalls now, a year later. But the doctor’s diagnosis was different: burnout syndrome. The consultant was sick from years of excessive toil.
Larry is not unique, and many experts believe that experiences like his are occurring more frequently in an era of lean staffing. “Perhaps now more than ever before, job stress poses a threat to the health of workers,” according to a publication of the National Institute for Occupational Safety and Health, the federal agency responsible for conducting research and making recommendations for the prevention of work-related illnesses and injury. And whereas exhaustion from overwork may happen more commonly in midlife, when energies naturally begin to ebb, it can arise earlier as well. A November 2005 Harris Interactive poll commissioned by Spherion Corporation in Fort Lauderdale, Fla., found that one third of workers ages 25 to 39 already felt burned out by their jobs.

The term “burnout syndrome” was coined in the early 1970s by Herbert J. Freudenberger, a New York psychoanalyst. Freudenberger had noticed that his own job, which was once so rewarding, had come to leave him feeling only fatigued and frustrated. Then he noticed that many of the physicians around him had, over time, turned into depressive cynics. As a result, those doctors increasingly treated their patients coldly and dismissively.

Freudenberger soon began looking at examples outside of health care—and found similar cases in many professions. Afflicted people suffered from mood fluctuations, disturbed sleep and difficulty concentrating. Accompanying the mental distress were physical ailments such as backaches or digestive disorders. Freudenberger defined burnout syndrome as a state of mental and physical exhaustion caused by one’s professional life.

No specific statistics track the ailment, partly because burnout syndrome does not have its own classification in the Diagnostic and Statistical Manual of Mental Disorders—the bible of the field. Rather it falls under a category of “undifferentiated somatoform disorder.” Even without concrete numbers, however, the experts agree: pressure in all trades is rising, and people are struggling to cope.

It is clear that long-term strain plays a central role in burnout. Historically, the body’s stress reaction has been a useful protective response. It helps humans—and other animals—survive an immediate threat, such as the appearance of a predator. Before we are consciously aware of it, the brain recognizes a potential danger and sets in motion, in just fractions of a second, a series of physical responses that ready us to fight or flee. Epinephrine, or adrenaline, flows to muscles, in preparation for battle or running. Our senses sharpen. The body shuts down nonessential systems, such as digestion, to conserve energy.

The problem? The alarm swings into action even when the menace is not a hungry-looking bear at the entrance to the cave but rather an irritable boss who wants that PowerPoint presentation finished in 30 minutes. Each time the system gets tripped—as we crunch to meet an impossible production deadline, dash to a meeting, hurriedly pack for yet another last-minute business trip—the adrenal glands secrete stress hormones, the heartbeat speeds up, and blood pressure rises. If such tensions endure for weeks, months or years, physical consequences arise inevitably. Chronic stress contributes to hypertension, heart problems and a weakened immune system, so that we get infections more often [see “Stressed-Out Memories,” by Robert M. Sapolsky; Scientific American Mind, Vol. 14, No. 5; 2004].

Vicious Cycle

For many victims of burnout, the fuel for the fire comes from similar sources. It tends to hit the best employees, those with enthusiasm who accept responsibility readily. (The Author) ULRICH KRAFT, a regular contributor to Gehirn & Geist, is a freelance science writer in Berlin. In response to mounting task loads, the wretch piles on the hours, pulling late nights at the office, ignoring exercise, skipping meals or eating unhealthful fast foods on the run, cancel-
Burnout syndrome does not strike overnight; it develops gradually over time. Psychologist Herbert Freudenberger and his colleague Gail North have divided the process into 12 phases. The steps do not necessarily follow one another in order. Many victims skip certain stages; others find themselves in several at the same time. And the length of each phase varies from patient to patient.

**The Burnout Cycle**

**1. A compulsion to prove oneself**
- The beginning is often excessive ambition: their desire to prove themselves at work turns into grim determination and compulsion. They must show their colleagues—and above all themselves—that they are doing an excellent job in every way.

**2. Working harder**
- To meet their high personal expectations, they take on more work and buckle down. They become obsessed with handling everything themselves, which in turn demonstrates their notions of “irreplaceability.”

**3. Neglecting their needs**
- Their schedules leave no time except for work, and they dismiss as unimportant other necessities such as sleeping, eating, and seeing friends and family. They tell themselves that these sacrifices are proof of heroic performance.

**4. Displacement of conflicts**
- They are aware that something is not right but cannot see the sources of their problems. To deal with the root causes of their distress might set off a crisis and is thus seen as threatening. Often the first physical symptoms emerge at this stage.

**5. Revision of values**
- Isolation, conflict avoidance and denial of basic physical needs change their perceptions. They revise their value systems, and once important things such as friends or hobbies are completely dismissed. Their only standard for evaluation of their self-worth is their jobs. They become increasingly emotionally blunted.

**6. Denial of emerging problems**
- They develop intolerance, perceiving colleagues as stupid, lazy, demanding or undisciplined. Social contacts feel almost unbearable. Cynicism and aggression become more apparent. They view their increasing problems as caused by time pressure and the amount of work they have—not by the ways they have changed.

**7. Withdrawal**
- They reduce social contact to a minimum, becoming isolated and walled off. They feel increasingly that they are without hope or direction. They work obsessively “by the book” on the job. Many seek release through alcohol or drugs.

**8. Obvious behavioral changes**
- Others in their immediate social circles can no longer overlook their behavioral changes. The once lively and engaged victims of overwork have become fearful, shy and apathetic. Inwardly, they feel increasingly worthless.

**9. Depersonalization**
- They lose contact with themselves. They see neither themselves nor others as valuable and no longer perceive their own needs. Their perspective of time narrows to the present. Life becomes a series of mechanical functions.

**10. Inner emptiness**
- Their inner emptiness expands relentlessly. To overcome this feeling, they desperately seek activity. Overreactions such as exaggerated sexuality, overeating, and drug or alcohol use emerge. Leisure time is dead time.

**11. Depression**
- In this phase, burnout syndrome corresponds to depression. The overwhelmed people become indifferent, hopeless, exhausted and believe the future holds nothing for them. Any of the symptoms of depression may be manifest, from agitation to apathy. Life loses meaning.

**12. Burnout syndrome**
- Almost all burnout victims now have suicidal thoughts to escape their situation. A few actually carry them out. Ultimately, they suffer total mental and physical collapse. Patients in this phase need immediate medical attention.
ing personal dates with friends, missing the kids’ soccer games. Ultimately, Larry relates, “I completely isolated myself.” Humans are social beings, so we do not fare well when cut off from such networks. “Support from family, friends and colleagues is a vital buffer against stress,” says Manfred Schedlowski of the Swiss Federal Institute of Technology in Zurich, which has recently created a research group to study the causes and consequences of work-related stress.

Another risk factor is the level of control a person has over his or her work and the recognition (or lack thereof) that endeavors receive. Jürgen Staedt, a psychiatrist who runs the Vivantes Clinic in Berlin, speaks of a woman who was a successful department head for years—until a corporate restructuring during which she was, despite her desperate efforts, unable to prevent layoffs among her employees. It was a slap in the face for her. Plagued by sleep disturbances, loss of appetite and feelings of low self-worth, she ended up at Staedt’s clinic. “Such setbacks are a part of life. But people with burnout-syndrome personalities simply can’t work their way past them,” he explains. “Their entire self-image is shattered.” The experts call such stumbles gratification crises—the feeling that their tremendous hard work on the job is not sufficiently noticed—and they add to the problem.

Sooner or later, the ability of these victims to work declines. They find it hard to concentrate, they have few creative ideas, and their memories often fail. They begin to make mistakes. “Then the vicious spiral begins,” Staedt explains. “Noticing that you are no longer doing good work increases the pressure on you, and things go from bad to worse.” The once generous Larry, for instance, blamed colleagues for his own mistakes and began to criticize and scold them.

Stress and self-dissatisfaction leave their marks on the psyche. Resigned, discouraged, plagued by flagging self-esteem and anxiety about failure, people with burnout syndrome drag themselves painfully through each day. They may seek solace in alcohol or pills. Some even attempt suicide.

The victims are often the last to realize the seriousness of their situation. No one becomes utterly depleted overnight; on the contrary, their batteries run down so gradually that many of them never notice the subtle changes until things are dire. Working long hours, through weekends, they think, “No problem—I am just a little tired right now.” But then there is the first time they cancel the tennis game or mumble “sorry” about missing that long-planned weekend trip with friends. The mountain of papers waits on the desk.

They cannot leave the work undone, can they? “Of course, I was aware that things were not going well. But I thought I would deal with it somehow,” Larry recalls. When he finally collapsed on his doorstep, he realized at last that he needed help: “That was the shot across the bow that rescued me.”

Staedt provides a metaphor for this problem: “If you own a car, you have it inspected each year and you check the oil regularly. Burnout-syndrome patients never bring their ‘cars’ in for inspection. They drive thousands of miles at full speed and then are shocked when the motor suddenly fails. They have been neglecting routine maintenance.”

This inability to find meaning in life outside of work is why advice to just ease up a bit and turn your computer off by five does not work for burnout-syndrome patients. Anyone who hopes to overcome the problem has to learn that satisfaction can come from things other than job success. That is where psychiatrist Staedt comes in. “What we do is something like enjoyment training,” he says. “The patients learn how, at last, to do something merely for the pleasure it provides. Baking cookies, painting and taking walks are just as much a part of the therapy as sports and talking to other people.”

This is the crux of the matter, Schedlowski believes. “The personality characteristics that have, till now, guaranteed your professional success are what you must now say good-bye to.” In treating his exhausted execs, the psychologist can often trace these “master plans” back to the patients’ childhoods. “People who, for example, learn as kids always to be punctual, and always do everything perfectly, will profit from that later,” he points out. With such ingrained virtues, they did well in school, and later in their careers.
they rose quickly. Now they also need to master new skills—healthier ones.

This “rewriting the master plan” is the most difficult part of the therapy. It has to do with how the brain functions. Things learned early, and practiced dutifully, become firmly anchored in our brains. “Relearning habits and ways of behavior that are so strongly ingrained is a training process that takes time,” Schedlowski states. He recommends six months of ambulatory therapy, during which the patients practice their new, better routines repeatedly in daily life.

Putting on the Brakes

It would be far better never to fall into the vicious cycle of overwork and inner pressure in the first place. The Zurich team is working to counter this eventuality through educational programs. “Stress has become almost normal in today’s business world,” Schedlowski observes. “If you know how to protect yourself against its effects, the risks of burning out are much lower.”

The quantity of stress is a determinant but not the decisive one. “If someone works 12 hours a day, every day, yet still has found a way to relax, he will very likely have no problem,” Staedt explains. “On the other hand, someone else may find a part-time job extremely stressful—and develop burnout syndrome.”

Rule number one: budget your physical resources. The antistress measures that are involved are as simple as they are effective. They include eating wholesome foods at mealtimes, exercising regularly and getting enough sleep.

Rule number two: workaholics must aim for equilibrium between tension and relaxation. Or, in the language of those in the field, find their work-life balance. “Everyone has to find their own stress-compensation mechanism,” Schedlowski says. One woman may reduce stress by running long distances, whereas another may lie on her sofa at home listening to classical CDs, and still a third may tend the rose bushes in her garden. The hobby itself doesn’t matter; it is devotion to a pleasurable activity that does.

Close social contacts are also important [see “Good Friends,” by Klaus Manhart; SCIENTIFIC AMERICAN MIND, April/May 2006]. Spending time with friends, family, even colleagues at work, protects against excessive stress. Last, it is helpful to learn some relaxation technique, such as yoga or progressive muscle relaxation.

The decisive step, Schedlowski emphasizes, must be made first in your head. “As early as possible in your professional career, you must absorb the idea that physical and mental health are at least as important as climbing the ladder toward success,” he says.

Ultimately, Larry made the switch to a more balanced existence. He resigned from his job, repaired his friendships and fulfilled a boyhood dream by taking a round-the-world trip. Then he returned to being a consultant, landing a better spot than the one he had left. But now he balances labor with “more sports, more leisure time, more downtime, more time to enjoy life. Even though my job is, as before, important to me, these things have priority now.” He likes the result. “Things have never been better!”

Workloads seem lighter when countered by antistress measures such as exercising, enjoying time with friends and cultivating a hobby.

(Further Reading)

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