Burnout or depression: both individual and social issue

In view of the profound problems attached to the construct of burnout, we recommended in our Correspondence (April 8, p 1397) that occupational health specialists focus on (job-related) depression rather than burnout to help workers more effectively. In a reply to our letter, Ronald Epstein and Michael Privitera (April 8, 1398) rejected our recommendation on the grounds that burnout is not a “purely individual syndrome”. The authors further argued that “considering burnout solely as a mental illness of individual workers rather than work-related distress would be disastrous”. Problematically, Epstein and Privitera attributed to us an idea that is not ours. In these authors’ view, equating burnout with depression is synonymous with mistakenly individualising a social problem. In our estimation, the argument that depression cannot replace burnout because burnout is a social problem whereas depression is an individual problem is specious and part of a false debate.

First, the phenomena of interest (burnout or depression) should not be confused with the perspectives (individual or social) adopted to elucidate those phenomena. Second, both burnout and depression are best explained through the interaction of social or external conditions with individual or internal dispositions. Unresolvable stress—the putative cause of burnout—has a key role in the aetiopathology of depression in individuals with no noticeable susceptibility to depression. Crucially, in human beings, most sources of stress are rooted in social life (eg, work). Therefore, social factors are central to the development of depressive symptoms or disorders. Depression can be job-related. While leaving our recommendation intact, the authors’ argument allows us to address an objection that is commonly raised when the burnout construct is questioned.

We declare no competing interests.

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1 Bianchi R, Schonfeld IS, Laurent E. Physician burnout is better conceptualised as depression. Lancet 2017; 389: 1397–98.
2 Epstein RM, Privitera MR. Physician burnout is better conceptualised as depression—Authors’ reply. Lancet 2017; 389: 1398.