

FEMALE BURNOUT AND ITS RELATIONSHIP WITH NON-COMMUNICABLE CHRONIC DISEASES: A NARRATIVE REVIEW.

Gabriella Dionisio Zampieri

Bianca Paxiega Bandeira; Feres Abrão

RESUMO

Burnout, recognized by the ICD (International Classification of Diseases) 11 as a syndrome resulting from chronic occupational stress, has shown increasing prevalence among women, whose multiple roles in professional, domestic, and caregiving contexts significantly increase vulnerability to exhaustion. This condition becomes particularly relevant in the context of non-communicable chronic diseases (NCDs), which account for approximately 74% of deaths in Brazil, as scientific evidence indicates that burnout contributes to both the development and progression of these conditions through neuroendocrine and inflammatory mechanisms, such as sustained cortisol elevation and chronic low-grade systemic inflammation. In women, these effects may be further intensified by hormonal and social factors. To understand this correlation, this study aimed to analyze the relationship between female burnout and NCDs, systematizing recent scientific evidence and highlighting implications for gender-sensitive prevention and care policies. To this end, a narrative review was conducted using the PubMed, LILACS, and Oasis databases, based on the descriptors "Chronic Disease," "Burnout, Professional," and "Occupational Stress." Articles published between 2016 and 2026 were included. The selection followed specific eligibility criteria, resulting in six articles, and the data were analyzed narratively. The analyzed studies demonstrate that burnout is an independent risk factor for several non-communicable chronic diseases. The main identified pathophysiological pathway is the hyperactivation of the hypothalamic-pituitary-adrenal axis, leading to sustained cortisol elevation, low-grade systemic inflammation, and metabolic alterations. These mechanisms contribute to the development of hypertension, dyslipidemia, type 2 diabetes, and metabolic syndrome. One of the reviewed articles identified burnout as a significant predictor of hypercholesterolemia and type 2 diabetes, even after controlling for confounding variables, reinforcing its clinical relevance. Another study showed accelerated telomere shortening in professionals exposed to chronic stress, suggesting premature cellular aging and increased risk of cardiovascular diseases, diabetes, and mortality. The gender perspective revealed an important structural vulnerability: in Brazil, 71.6% of burnout reports involve women. This predominance is associated with the overlap of professional and domestic responsibilities, low emotional support, sleep disturbances, and employment in caregiving professions, all of which intensify exposure to occupational stress. In addition to biological impacts, the studies highlighted relevant social consequences, such as increased absenteeism, prolonged leave, and excessive medicalization, evidenced by the use of psychotropic medications in more than half of the analyzed cases. These findings reinforce that female burnout not only compromises mental health but also contributes to the progression of chronic diseases, encompassing social and economic dimensions. Female burnout and NCDs share biological mechanisms and gender-related social determinants that mutually reinforce each other, highlighting the need for preventive, intersectoral, and gender-sensitive approaches that recognize occupational exhaustion as a public health issue.

Palavras-chave: Burnout; Chronic Diseases; Women's Health; Occupational Stress.