

# Psychoactive substances and work related mental disorders in nursing professionals in Brazil

## Substâncias psicoativas e transtornos mentais relacionados ao trabalho em profissionais de enfermagem no Brasil

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**ABSTRACT | OBJETIVO:** To identify work-related mental disorders and psychoactive substance use among nursing professionals in Brazil from 2013 to 2023. **METHOD:** A retrospective descriptive cross-sectional study based on secondary data extracted from the Sistema de Informação de Agravos de Notificação — SINAN (Notifiable Diseases Information System). The sample included all reported cases of work-related mental disorders in nursing professionals, according to the Classificação Brasileira de Ocupações — CBO (Brazilian Classification of Occupations). The variables were analyzed using descriptive statistics and included region, race, gender, diagnosis, and use of PAS (alcohol, tobacco, psychoactive drugs, and psychotropic drugs). **RESULTS:** There were 1,439 notifications of work-related mental disorders in nursing professionals, predominantly Stress-Related and Somatoform Neurotic Disorders (60.0%), followed by Affective Mood Disorders (22.7%). The use of alcohol (52.1%), tobacco (37.5%), psychoactive drugs (51.5%), and psychotropic drugs (54.7%) was more frequent in professionals with Stress-Related and Somatoform Neurotic Disorders. **CONCLUSION:** The data revealed a high prevalence of Stress-Related and Somatoform Neurotic Disorders and relevant patterns of PAS consumption among nursing professionals affected by mental disorders, with emphasis on the use of sedatives and alcohol.

**KEYWORDS:** Nurses Practitioners. Mental Disorders. Psychotropic Drugs. Working Conditions.

**RESUMO | OBJETIVO:** Identificar os transtornos mentais relacionados ao trabalho e uso de substâncias psicoativas em profissionais de enfermagem no Brasil no período de 2013 a 2023. **MÉTODO:** Estudo transversal descritivo retrospectivo baseado em dados secundários extraídos do Sistema de Informação de Agravos de Notificação (SINAN). A amostra incluiu todos os casos notificados de transtornos mentais relacionados ao trabalho em profissionais de enfermagem, conforme a Classificação Brasileira de Ocupações (CBO). As variáveis foram analisadas por meio de estatística descritiva e incluíram região, raça, sexo, diagnóstico e uso de SPAS (álcool, fumo, drogas psicoativas e psicofármacos). **RESULTADOS:** Foram registradas 1.439 notificações de transtornos mentais relacionados ao trabalho em profissionais de enfermagem, predominando os Transtornos Neuróticos Relacionados ao Estresse e Somatoformes (60,0%) seguidos dos Transtornos do Humor [Afetivos] (22,7%). O uso do álcool (52,1%), do fumo (37,5%), das drogas psicoativas (51,5%) e dos psicofármacos (54,7%) foi mais frequente em profissionais com Transtornos Neuróticos Relacionados ao Estresse e Somatoformes. **CONCLUSÃO:** Os dados revelaram alta prevalência de Transtornos Neuróticos Relacionados ao Estresse e Somatoformes e padrões relevantes de consumo de SPAS entre profissionais de enfermagem acometidos por transtornos mentais, com destaque para o uso de sedativos e álcool.

**PALAVRAS-CHAVE:** Profissionais de Enfermagem. Transtornos Mentais. Substâncias Psicoativas. Condições de Trabalho.

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## 1. Introduction

The work environment of nursing professionals in Brazil is characterized by a series of adversities that significantly compromise the mental health and well-being of these workers. Among the main stressors are long working hours, low pay, continuous exposure to violence and emotional stress, as well as the frequent need to maintain multiple work contracts to ensure one's livelihood<sup>1</sup>.

This scenario of overload and emotional instability favors the emergence of mental disorders, such as anxiety, depression and burnout syndrome, whose prevalence among nurses has become increasingly alarming<sup>2</sup>. The health crisis caused by the COVID-19 pandemic, for example, revealed this reality: about 62% of nursing professionals in Brazil developed some type of mental disorder throughout the pandemic period<sup>3</sup>.

Moreover, the technical domain on pharmacology, combined with easy access to medicines, may favor the inappropriate use of psychoactive substances (PASs) as a strategy for coping with occupational adversities<sup>4</sup>. This behavior, although often silent, reveals an attempt to manage the constant pressure of the work environment. In line with this panorama, data from 2021 indicate that mental disorders were among the main causes of work absenteeism in the country, highlighting the magnitude of the psychosocial impact among health workers<sup>5</sup>.

Mental disorders are defined by a variety of emotional and psychosomatic symptoms that may reflect the emergence or progression of psychological conditions associated with the occupational context<sup>6</sup>. Social perception in Brazil often associates such disorders with work or the potential risks of disorganization in

interpersonal relationships, which constitute stigmas that make it difficult to seek adequate care<sup>7</sup>.

Therefore, most professionals who suffer from work-related mental disorders claim not to seek help for fear of judgment, for being ashamed to talk about the problem or for thinking that they could deal with the psychological suffering alone<sup>8</sup>. Psychotropic drugs consumption is a response to these adverse conditions, aiming at momentary relief of tensions and strengthening of physical and emotional resistance<sup>9</sup>.

The use of psychotropic drugs such as sedatives and alcohol has been observed frequently among nurses, mainly in hospital and primary care settings, where stress and emotional overload are more pronounced<sup>10</sup>. The literature reveals that overwork and low pay not only affect the physical and psychological health of nurses but are also critical factors that promote the use of PASs as a way of coping<sup>11</sup>.

Problematic substance use is associated with unhealthy behaviors and worsening mental conditions, such as depression and hopelessness<sup>12</sup>. The problem is even more serious when we consider that these professionals, responsible for the care for others' health, often neglect their own health due to adverse working conditions and lack of adequate support<sup>13</sup>.

In 2024, the Ministério da Saúde (Ministry of Health) incorporated work-related mental disorders into the mandatory reports of the Sistema de Informação de Agravos de Notificação - SINAN (Notifiable Diseases Information System), reflecting its epidemiological relevance<sup>14</sup>. This change highlights the need to monitor and understand the impacts of working conditions on workers' health, especially in professions with high emotional and physical demands, such as nursing.

In view of this, it is essential to deepen the understanding about the incidence of PAS use and mental disorders among nursing professionals in Brazil, in order to promote effective interventions and improve their quality of life.

Therefore, the objective of this study is to identify mental disorders related to work and use of psychoactive substances in nursing professionals in Brazil from 2013 to 2023.

## 2. Methodology

A cross-sectional, descriptive and retrospective study with a quantitative approach based on secondary data in the public domain. The research uses a quantitative approach, based on secondary data, which seeks to explain the occurrence of diseases and health problems in a specific population<sup>15</sup>.

The data used were extracted from SINAN, available on the portal of the Ministério da Saúde, accessed through the public portal of DATASUS (<https://datasus.saude.gov.br/>)<sup>16</sup>.

The extraction was carried out in February 2025, using the filters available on the platform to select: diseases classified as work-related mental disorders; notification period recorded between 1 January 2013 and 31 December 2023; nursing professionals identified by the Classificação Brasileira de Ocupações — CBO (Brazilian Classification of Occupations), using the following codes: 2235-05: Nurse; 3222-05: Nursing Technician; 3222-10: Nursing Assistant.

Notifications with unspecified and unfilled ICDs and the following codes of the International Classification

of Diseases (ICD-10) were excluded: F60-F69: Disorders of adult personality and behavior; F90-F98: Behavioral and emotional disorders usually beginning in childhood and adolescence, because they are not directly related to the occupational context of adult nursing, besides presenting predominantly developmental or structural etiologies, which could compromise the specificity of the analysis focused on psychological suffering related to work.

The variables used to characterize the sample were: Geographic region; Race/color; Sex. The clinical variables included: Specific diagnoses related to mental disorder. Use of psychoactive substances, categorized as alcohol, smoking, psychoactive drugs and psychotropic drugs.

The tabulation of data was performed in Microsoft Excel, and for the analysis was used descriptive statistics (absolute and relative frequencies). The results were organized in tables to facilitate the visualization of observed patterns.

Because the data are secondary, public and anonymized, it was not possible to identify the participants. The study is in accordance with Resolution n. 466/2012 of the National Health Council, which does not require submission to the Research Ethics Committee<sup>17</sup>.

## 3. Results

There were 1,439 notifications of work-related mental disorders in nursing professionals. Most cases (90.4%) were reported by female professionals, and 50.9% of the affected professionals identified themselves as being white. The Southeast region led in terms of notifications, with 41.2% of the total. (Table 1).

**Table 1.** Distribution of notifications of work-related mental disorders among nursing professionals in Brazil according to sex, race/color, and region, 2013 to 2023. (*n*=1439)

Variables	<i>n</i>	%
<b>Sex</b>		
Female	1301	90.4
Male	138	9.6
<b>Race</b>		
White	732	50.9
Brown	363	25.2
Black	115	8.0
Indigenous	10	0.7
Yellow	7	0.5
Ign/In Blank	212	14.7
<b>Region</b>		
North	62	4.3
Northeast	328	22.8
Southeast	593	41.2
South	346	24.0
Midwest	110	7.6

Source: Sistema de Informação de Agravos de Notificação (SINAN), 2025.

The analysis of the data presented in table 2 allows us to know the distribution of different work-related mental disorders among nursing professionals in Brazil between 2013 and 2023. Stress-related neurotic and somatoform disorders (F40-F48) with 60.0% constitute most cases reported, followed by affective mood disorders (F30-F39) with 22.7%, which includes depression and bipolar disorder. Burnout (Exhaustion) Syndrome (Z73.0) appears as the third cause of work-related mental disorder with 7.5%.

**Table 2.** Reporting of types of work-related mental disorders among nursing professionals in Brazil, 2013 to 2023. (*n*=1439)

Specific diagnoses	<i>n</i>	%
Stress-related neurotic and somatoform disorders (F40-F48)	863	60.0
Mood [affective] disorders (F30-F39)	327	22.7
Burnout syndrome (Z73.0)	108	7.5
Unspecified mental disorder (F99)	59	4.1
Potential health risk related to socio-emotional and psychological circumstances (Z55-Z65)	30	2.1
Symptoms and signs related to cognition, perception, and behavior (R40-R46)	20	1.4
Circumstance related to working conditions (Y96)	14	1.0
Organic mental disorders, including symptomatic ones (F00-F09)	7	0.5
Schizophrenia, schizotypal and delusional disorders (F20-F29)	5	0.4
Behavioral syndromes associated with physiological disturbances and physical factors (F50-F59)	4	0.3
Mental and behavioral disorders due to use of psychoactive substances (F10-F19)	1	0.1
Self-harm intentionally (X60-X84)	1	0.1
<b>Total</b>	<b>1439</b>	<b>100.0</b>

Source: Sistema de Informação de Agravos de Notificação (SINAN), 2025.

Table 3 distinguishes notifications of mental disorders according to the use of alcohol and smoking, allowing us to observe behavior trends related to the use of these substances in conjunction with specific diagnoses of mental disorders. Neurotic disorders related to stress and somatoform (F40-F48) were the most prevalent diagnosis associated with alcohol use (52.1%) or smoking (37.5%). However, a considerable amount of data is classified as ignored or blank (63.6%).

**Table 3.** Specific diagnoses of notifications of work-related mental disorders according to alcohol and tobacco use among nursing professionals in Brazil, 2013 to 2023. (n=1439)

Specific Diagnosis	Alcohol			Smoking		
	Ign/In Blank n (%)	Yes n (%)	No n (%)	Ign/In Blank n (%)	Yes n (%)	No n (%)
Stress-related neurotic and somatoform disorders (F40-F48)	308 (63.6)	38 (52.1)	517 (58.6)	328 (65.2)	18 (37.5)	517 (58.2)
Mood [affective] disorders (F30-F39)	111 (22.9)	15 (20.6)	201 (22.8)	118 (23.5)	15 (31.3)	194 (21.9)
Burnout syndrome (Z73.0)	22 (4.6)	8 (11.0)	78 (8.84)	20 (4.0)	7 (14.6)	81 (9.1)
Unspecified mental disorder (F99)	19 (3.9)	5 (6.9)	35 (4.0)	19 (3.8)	3 (6.3)	37 (4.2)
Potential health risk related to socio-emotional and psychological circumstances (Z55-Z65)	3 (0.6)	2 (2.7)	25 (2.8)	3 (0.6)	3 (6.3)	24 (2.7)
Symptoms and signs related to cognition, perception, and behavior (R40-R46)	10 (2.1)	0 (0.0)	10 (1.1)	7 (1.4)	0 (0.0)	13 (1.5)
Circumstance related to working conditions (Y96)	5 (1.0)	2 (2.7)	7 (0.8)	5 (1.0)	0 (0.0)	9 (1.01)
Organic mental disorders, including symptomatic ones (F00-F09)	2 (0.4)	1 (1.4)	4 (0.45)	1 (0.2)	2 (4.2)	4 (0.5)
Schizophrenia, schizotypal and delusional disorders (F20-F29)	1 (0.2)	0 (0.0)	4 (0.5)	1 (0.2)	0 (0.0)	4 (0.5)
Behavioral syndromes associated with physiological disturbances and physical factors (F50-F59)	2 (0.4)	1 (1.4)	1 (0.1)	0 (0.0)	0 (0.0)	4 (0.5)
Mental and behavioral disorders due to use of psychoactive substances (F10-F19)	0 (0.0)	1 (1.4)	0 (0.0)	0 (0.0)	0 (0.0)	1 (0.1)
Intentional self-harm (X60-X84)	1 (0.2)	0 (0.0)	0 (0.0)	1 (0.2)	0 (0.0)	0 (0.0)
<b>Total</b>	<b>484 (33.6)</b>	<b>73 (5.17)</b>	<b>882 (61.3)</b>	<b>503 (35.0)</b>	<b>48 (3.3)</b>	<b>888 (61.7)</b>

Source: Sistema de Informação de Agravos de Notificação (SINAN), 2025.

Table 4 presents the notifications of work-related mental disorders in nursing professionals, focusing on the use of psychoactive drugs and psychotropic drugs. Again, the neurotic disorders related to stress and somatoforms (F40-F48) presented the highest percentages for use of psychoactive drugs (51.5%) and psychotropic drugs (54.7%). Followed by mood disorders, with 32.4% for psychoactive drugs and 28.5% for psychotropic drugs.

**Table 4.** Specific diagnoses of notifications of work-related mental disorders according to the use of psychoactive drugs and psychotropic medications in nursing professionals in Brazil, 2013 to 2023. (n=1439)

Specific diagnosis	Psychoactive drug			Psychotropic drug		
	Ign/In Blank n (%)	Yes n (%)	No n (%)	Ign/Branco n (%)	Yes n (%)	No n (%)
Stress-related neurotic and somatoform disorders (F40-F48)	322(64.1)	35 (51.5)	506 (58.2)	290 (65.2)	261 (54.7)	312 (60.4)
Mood [affective] disorders (F30-F39)	116 (23.1)	22 (32.4)	189 (21.8)	93 (20.9)	136 (28.5)	98 (19.0)
Burnout syndrome (Z73.0)	21 (4.2)	4 (5.9)	83 (9.6)	23 (5.2)	40 (8.4)	45 (8.7)
Unspecified mental disorder (F99)	20 (4.0)	5 (7.4)	34 (3.9)	20 (4.5)	17 (3.6)	22 (4.3)
Potential health risk related to socio-emotional and psychological circumstances (Z55-Z65)	3 (0.6)	1 (1.5)	26 (3.0)	3 (0.7)	11 (2.3)	16 (3.1)
Symptoms and signs related to cognition, perception and behavior (R40-R46)	9 (1.8)	1 (1.5)	10 (1.2)	8 (1.8)	4 (0.8)	8 (1.6)
Other diagnoses <sup>1</sup>	11(2.1)	0 (0.0)	21(2.4)	8 (1.8)	8 (1.6)	16 (3.0)
<b>Total</b>	<b>502 (34.8)</b>	<b>68 (4.7)</b>	<b>869 (60.3)</b>	<b>445 (30.9)</b>	<b>477(33.1)</b>	<b>517 (35.9)</b>

Source: Notifiable Diseases Information System (SINAN), 2025.

<sup>1</sup>Includes: Circumstance related to working conditions (Y96), Organic mental disorders, including symptomatic ones (F00-F09), Schizophrenia, schizotypal and delusional disorders (F20-F29), Mental and behavioral disorders due to psychoactive substance use (F10-F19), Behavioral syndromes associated with physiological disturbances and physical factors (F50-F59), Intentional self-harm (X60-X84).

## 4. Discussion

Regarding the use of PASs, the data from this study indicate a significant association between mental disorders and consumption of alcohol, smoking, psychoactive drugs and psychotropic drugs. The results show that neurotic disorders related to stress and somatoform constitute most cases reported among nursing professionals with work-related mental disorders. This prevalence is in line with the literature that points out occupational stress as one of the main factors of mental illness in nursing<sup>18</sup>. An integrative review study reveals that continuous exposure to high pressure situations, strenuous working hours, multiple job holdings and lack of human resources contribute to the development of anxiety, insomnia, somatizations and other stress-related symptoms<sup>19</sup>.

Neurotic disorders related to stress and somatoform disorders were the most frequently associated with alcohol (52.05%) and psychoactive drugs (54.72%), suggesting that professionals may be resorting to these substances as a way of coping with psychological distress. Corroborating this interpretation, previous studies indicate that alcohol, due to its pharmacological effects, can alter the affective state induced by stress situations, functioning as a temporary emotional modulator<sup>20</sup>.

Mood Disorder were identified as the second most prevalent diagnosis among work-related mental disorders in nursing professionals, corresponding to 22.7% of notifications. The occurrence and frequency of these conditions may be associated with continuous exposure to stressful events or contexts<sup>21</sup>. There is also a high frequency of notifications involving the use of psychotropic drugs among professionals diagnosed with mood disorders. Scientific evidence indicates that certain classes of antidepressants may intensify the clinical manifestations of these disorders, which is especially relevant when considering that these largely have as a trigger factor stressful experience in the work environment<sup>22</sup>.

Burnout syndrome, the third most frequent cause among the diagnoses of mental disorders, is widely recognized as a phenomenon related to emotional exhaustion, depersonalization and reduction of personal fulfillment<sup>23</sup>. Its presence reinforces the impact of working conditions on the mental health of health professionals, especially in environments where emotional overload is more intense<sup>24</sup>.

The analysis of sociodemographic variables shows a predominance of notifications among female professionals (90.41%) and from the Southeast region (41.21%). These findings may reflect both the greater presence of women in the profession and the larger surveillance and reporting structure in the more developed regions. The predominance of professionals who self-identified as white (50.87%) also deserves attention and may indicate inequalities in access to health or visibility of cases<sup>25</sup>.

The use of psychoactive substances, disorders such as alcohol, smoking, psychoactive drugs and psychotropic drugs, in people with mental may reveal a worrying pattern of coping with psychological suffering in the work environment. The results of this research dialogue with theories such as the demand-control-support model<sup>26</sup>, which relates high levels of demands with low levels of social control and social support to an increased risk of mental illness<sup>27</sup>, in which the use of substances is seen as an individualized response to structural work problems<sup>28</sup>.

From a methodological point of view, the use of secondary data from SINAN allowed a broad population analysis, but imposes important limitations, such as the high proportion of ignored and blank records. The cross-sectional nature of the study prevents inference of causality, and the absence of contextual variables — such as workload, type of employment and work environment — restricts the in-depth understanding of factors associated with illness. In addition, the representativeness of data may be compromised by underreporting in regions with a lower surveillance structure, either through stigma, fear of judgment or lack of knowledge<sup>29</sup>.

Despite these limitations, the results provide relevant subsidies for the formulation of public policies and institutional interventions aimed at the mental health of nursing professionals. It is recommended the implementation of psychological reception programs, training for early identification of symptoms, and review of working conditions that favor illness. It is also essential to strengthen reporting systems and raise awareness among professionals about the importance of complete and accurate registration of work-related injuries.

## 5. Conclusion

The data revealed a high prevalence of mental disorders related to the work of nursing professionals in Brazil, with predominance among the notifications of Stress-Related Neurotic Disorders and Somatoform Disorders and relevant patterns of consumption of PASs among nursing professionals affected by mental disorders, especially the use of sedatives and alcohol.

The findings of this study highlight the need for intervention strategies and psychosocial support aimed at the mental health of nursing professionals, especially in the face of adverse working conditions that favor the use of substances as a coping mechanism.

The theme is relevant and strengthens the evidence base in nursing, offering subsidies for the formulation of public policies, institutional interventions and future research aimed at promoting mental health at work.

The articulation between empirical data and theoretical models allows important extrapolations for the construction of care and prevention strategies, reaffirming the importance of valuing and supporting professionals who work on the front line of care.

### Authors' contributions

The authors declared to have made substantial contributions to the work in terms of research design or design; data acquisition, analysis or interpretation for the work; and writing or critical review of relevant intellectual content. All authors approved the final version to be published and agreed to take public responsibility for all aspects of the study.

### Competing interests

No financial, legal or political conflict involving third parties (government, companies and private foundations, etc.) has been declared for any aspect of the submitted work (including but not limited to grants and funding, participation in advisory board, study design, manuscript preparation, statistical analysis, etc.).



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