

Epidemiological profile of nursing professionals requesting annual fee exemption

Perfil epidemiológico de los profesionales de enfermería que solicitan exención de cuota anual

Perfil epidemiológico dos profissionais de enfermagem na solicitação da isenção de anuidade

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Abstract

This study aimed to analyze the epidemiological profile of nursing professionals who requested an annual fee exemption for the Regional Nursing Council of Rio de Janeiro due to illness, from January to June 2025. It's a quantitative, retrospective study based on 36 approved requests. The sample revealed a predominance of women (80.6%) and nursing technicians (72.3%). The main health problems identified were malignant tumors (58.3%), AIDS (11.1%), and blindness (11.1%), in addition to other serious conditions such as tuberculosis, autoimmune, neurological, and degenerative diseases. The data highlight the direct impact of working conditions on the health of nursing workers, such as exposure to harmful agents, exhausting workdays, and emotional overload, factors that contribute to physical and mental illness. In this context, COFEN Resolution N^o. 749/2024 emerges as a protective and supportive measure, guaranteeing an annual fee exemption for professionals suffering from illnesses that compromise their work capacity. However, the resolution, while relevant, does not replace the need for structural policies focused on prevention, professional development, and the promotion of occupational health. It is concluded that recognizing illness in nursing requires broader strategies that promote safe, dignified, and humane work environments.

Descriptors: Epidemiology; Statistics; Nursing; International Classification of Diseases; Occupational Health.

Resumén

Este estudio tuvo como objetivo analizar el perfil epidemiológico de los profesionales de enfermería que solicitaron exención de la anualidad al Consejo Regional de Enfermería de Río de Janeiro por motivo de enfermedad, entre enero y junio de 2025. Se trata de una investigación cuantitativa, retrospectiva, basada en 36 solicitudes aceptadas. La muestra evidenció predominio femenino (80,6%) y de técnicos en enfermería (72,3%). Las principales enfermedades fueron neoplasias malignas (58,3%), VIH/SIDA (11,1%) y ceguera (11,1%), además de otras condiciones graves como tuberculosis, enfermedades autoinmunes, neurológicas y degenerativas. Los datos revelan el impacto directo de las condiciones laborales en la salud de estos profesionales, como la exposición a agentes nocivos, largas jornadas y sobrecarga emocional, factores que favorecen el deterioro físico y mental. En este contexto, la Resolución COFEN n^o 749/2024 representa una medida de protección y apoyo, al ofrecer exención financiera a quienes padecen enfermedades que afectan su capacidad laboral. No obstante, dicha normativa no reemplaza la necesidad de políticas estructurales orientadas a la prevención, valorización profesional y promoción de la salud ocupacional. Se concluye que el reconocimiento del sufrimiento laboral exige estrategias amplias que fomenten ambientes de trabajo seguros, dignos y saludables.

Descriptoros: Epidemiología; Bioestadística; Enfermería; Clasificación Internacional de Enfermedades; Salud Ocupacional.

Resumo

Este estudo teve como objetivo analisar o perfil epidemiológico dos profissionais de enfermagem que solicitaram isenção da anuidade ao Conselho Regional de Enfermagem do Rio de Janeiro por adoecimento, no período de janeiro a junho de 2025. Trata-se de uma pesquisa quantitativa, de caráter retrospectivo, baseada em 36 requerimentos deferidos. A amostra revelou predominância de mulheres (80,6%) e técnicos de enfermagem (72,3%). Os principais agravos identificados foram: neoplasias malignas (58,3%), AIDS (11,1%) e cegueira (11,1%), além de outras condições graves como tuberculose, doenças autoimunes, neurológicas e degenerativas. Os dados evidenciam o impacto direto das condições laborais na saúde da enfermagem, como exposição a agentes nocivos, jornadas exaustivas e sobrecarga emocional, fatores que contribuem no adoecimento físico e mental. Neste contexto, a Resolução COFEN n.º 749/2024 surge como medida de proteção e amparo, ao garantir isenção da anuidade para profissionais acometidos por doenças que comprometem sua capacidade laboral. No entanto, a resolução, apesar de relevante, não substitui a necessidade de políticas estruturais voltadas à prevenção, valorização profissional e à promoção da saúde ocupacional. Conclui-se que o reconhecimento do adoecimento na enfermagem demanda estratégias mais amplas, que promovam ambientes de trabalho seguros, dignos e humanos.

Descritores: Epidemiologia; Bioestatística; Enfermagem; Classificação Internacional de Doenças; Saúde Ocupacional.



Introduction

Nursing professionals make up the largest healthcare workforce, being essential to maintaining health services and facing daily working conditions that make them particularly vulnerable to illness. For some time now, several studies have highlighted the impact these conditions have on the mental health of nursing professionals. One study found that 8.8% of nursing professionals were at risk of suicide due to factors such as self-reported depression, traumatic childhood experiences, and a desire for professional change, reflecting a scenario of chronic suffering within the profession. Additionally, the study² indicates that more than a third of the nurses studied had been diagnosed with a mental disorder, with a predominance of obsessive-compulsive symptoms, suggesting that mental illness is a daily reality within hospitals. Furthermore, the study³ reinforces how the effects of occupational stress extend beyond the emotional realm by revealing atypical patterns of cortisol secretion in 42.5% of the professionals evaluated, indicating neuroendocrine dysfunction associated with chronic exposure to stress.

While mental disorders are often associated with emotional overload, it's equally important to recognize the significant incidence of other illnesses, such as chronic, degenerative, and infectious diseases. Constant exposure to biological, chemical, and physical agents, combined with long work hours, repetitive physical exertion, and inadequate ergonomic conditions, contributes to the development of conditions such as neoplasms, musculoskeletal problems, infections, and autoimmune diseases.

These data, taken together, demonstrate that nursing illness is multifactorial and reflects an overload that compromises not only the well-being of workers but also the quality of care provided. This requires a comprehensive and structured approach to ensure the comprehensive protection of these professionals. Therefore, it is essential to create occupational health policies to support this population with effective and humane measures.

This led to Resolution No. 749/2024⁴ of the Federal Council of Nursing (COFEN) as support for sick professionals. It allows them to request an annual fee waiver when suffering from serious illnesses that result in incapacity for work, such as cancer, irreversible paralysis, mental illness, and others. This measure aims to reduce the financial impact and guarantee dignity for affected professionals, ensuring that their active registration remains free of charge during the period of inability. To receive the benefit, a formal request must be submitted to the council with which the professional is registered and supporting documentation containing the ICD (Institutional Code) proving the limiting conditions.

Given this context, the present study aimed to analyze the epidemiological profile among nursing professionals who requested exemption from the annual fee due to illness with COREN-RJ from January to June 2025 and had their requests granted, identifying the illness profile.

Methodology

This is a quantitative study with a retrospective design. Data were collected from the institutional database of the Regional Nursing Council of Rio de Janeiro (COREN-RJ), considering requests for annual fee exemption due to illness, filed and processed between January and June 2025. Thirty-six requests, approved in plenary meetings, were analyzed. These documents were organized into digital spreadsheets, allowing for the systematization of information and subsequent analysis using simple descriptive statistics. The variables considered included: the applicant's professional category, gender, and the frequency of the reasons given for the exemption request. Because this research used an institutional database, without direct involvement with research subjects or collection of confidential data, the study did not require approval by the Research Ethics Committee, under the guidelines of Resolution No. 466/2012 of the National Health Council.

Results

An analysis of the gender distribution of professionals who requested an annual fee waiver due to illness reveals a significant predominance of women. Of the 36 requests analyzed, 29 were submitted by women, representing 80.6% of the sample, while only 7 (19.4%) were submitted by men. This result reflects the female predominance in the nursing profession and may also indicate women's greater exposure to occupational and psychosocial factors that contribute to illness and absence from work.

Graph 1 shows that nursing technicians represent the largest number of professionals who requested an annual fee waiver due to illness. Combined, the records involving nursing technicians (II TEC, I ENF + II TEC, I ENF + II TEC + II AE, II TEC + II AE) totaled 72.3% of requests, demonstrating the significant participation of this group in the survey. This finding suggests that nursing technicians, because they are frequently involved in operational activities and experience greater physical and emotional stress, are more susceptible to health conditions that lead to work incapacity, reflecting the high number of exemption requests.

Furthermore, this predominance may be related to their position in the nursing team hierarchy, which often exposes these professionals to exhausting workdays, occupational hazards, low pay, and reduced autonomy in clinical decisions. These factors can contribute to physical and mental illness, reinforcing the need for institutional policies aimed at valuing, protecting, and promoting the health of nursing technicians.

Regarding the type of illness, the data demonstrates a significant predominance of cases related to malignant neoplasms, representing 58.3% of cases. Next in line are AIDS (acquired immunodeficiency syndrome) and blindness, both at 11.1%, followed by neurodegenerative and disabling diseases such as multiple sclerosis (2.8%), Parkinson's disease (2.8%), ankylosing spondyloarthritis (5%), severe neuropathy (5%), and disabling neuropathy (5%). It appears that a large proportion of requests are

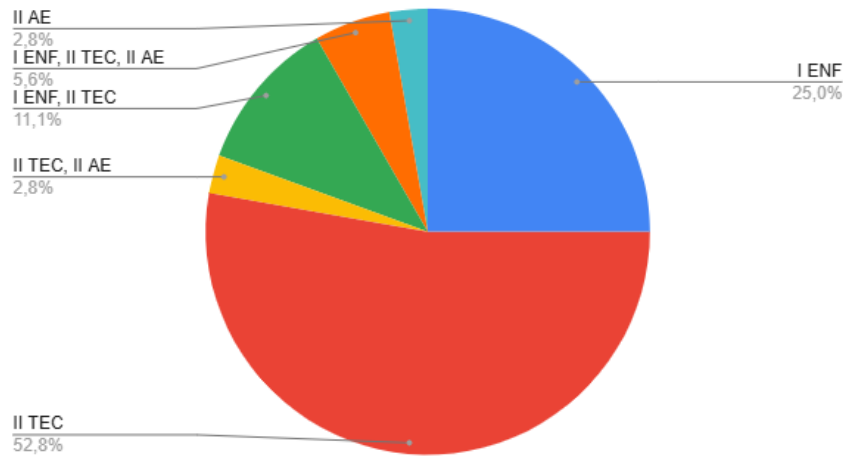


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Silva RM, Behring LPB, Ribeiro AS, Jordão AVP, Pinto BGO, Fonseca BC, Silva PO, Marta CB, Souza ACAG, Carvalho CMS, Francisco MTR, Peres EM, Ribeiro RS associated with chronic and progressive illnesses of a serious and disabling nature, which directly impact the functional capacity of nursing professionals. These data demonstrate the impact that occupational factors such as exposure to harmful agents, exhausting work hours, emotional overload,

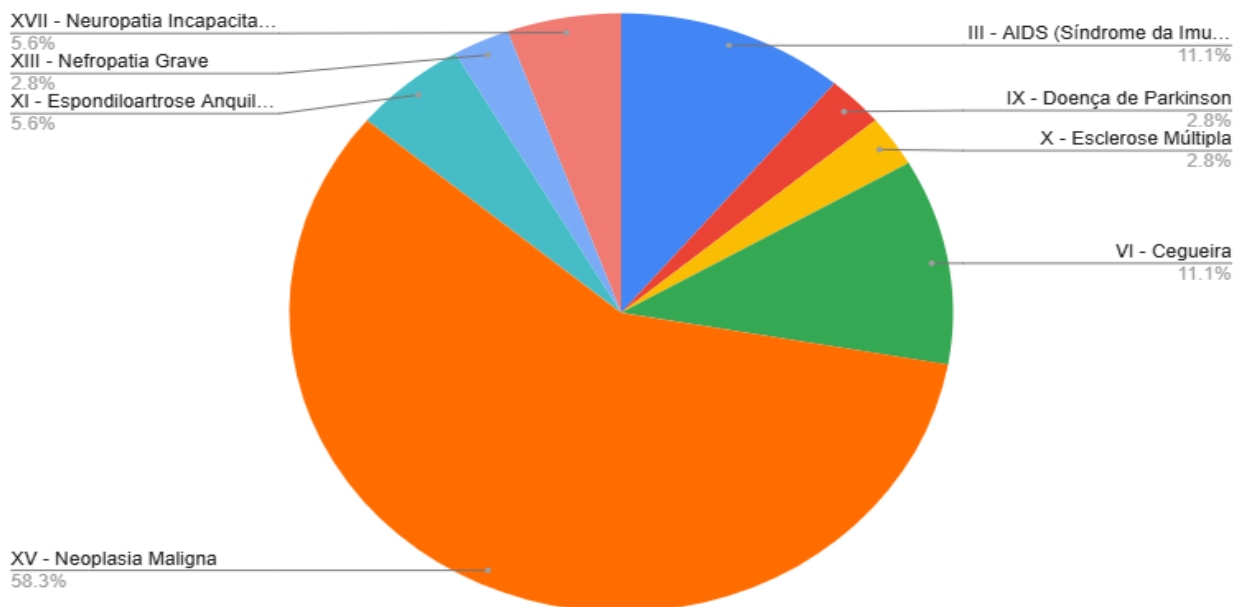
and continuous stress have on professional life. The working conditions faced by these professionals contribute significantly to physical and mental illness, requiring urgent changes in the labor structure of this category.

Graph 1. Distribution of requests by category. Rio de Janeiro, RJ, Brazil, 2025



Note: AE – Nursing Assistant. TEC – Nursing Technician. ENF – Nurse.

Graph 2. Distribution of disease types. Rio de Janeiro, RJ, Brazil, 2025



Note: XVII - Disabling neuropathy. XIII - Severe nephropathy. XI - Ankylosing spondyloarthritis. III – AIDS. IX - Parkinson's disease. X - Multiple sclerosis. VI – Blindness.

Discussion

The data obtained in this study reveal a predominant profile of applicants composed of women (80.6%) and nursing technicians (72.3%), reflecting the majority composition of the Brazilian nursing workforce. This predominance also highlights the greater exposure of this group to adverse working conditions, often marked by long hours, intense physical exertion, and structural limitations in the work environment.

The analysis shows that occupational illness in nursing goes beyond mental health issues, including serious illnesses such as malignant neoplasms, AIDS, and blindness,

as identified in the sample. These conditions reinforce the close relationship between the occupational context and the impairment of workers' health, demonstrating that the illness process is collective, persistent, and linked to structural working conditions. This evidence highlights the urgent need for institutional actions aimed at risk prevention, improving work environments, and ensuring ongoing care for the physical and mental health of nursing professionals.

In this context, COFEN Resolution No. 749/2024 represents a significant step forward by regulating the annual fee waiver for professionals suffering from illnesses



Silva RM, Behring LPB, Ribeiro AS, Jordão AVP, Pinto BGO, Fonseca BC, Silva PO, Marta CB, Souza ACAG, Carvalho CMS, Francisco MTR, Peres EM, Ribeiro RS that affect their work capacity or income. By recognizing the vulnerability of these workers, the Council reaffirms its role in protecting the category, offering legal and institutional support, and contributing to the valorization of a class historically exposed to multiple risks⁴.

As previously shown, the epidemiological prevalence of nursing professionals requesting an annual fee exemption due to illness is predominantly associated with malignant neoplasms (58.3%), AIDS (11.1%), and blindness (11.1%). However, these are not the only conditions that guarantee the right to benefit. Other illnesses that also justify the request for exemption include active tuberculosis and/or leprosy during treatment, mental illness, severe heart disease, radiation exposure, advanced-stage Paget's disease (osteitis deformans), Parkinson's disease, multiple sclerosis, ankylosing spondyloarthritis, cystic fibrosis, nephropathies, severe hepatopathies, irreversible and disabling paralysis, and neuropathies that compromise capacity. All these conditions must be duly proven by presenting a medical report.

COFEN Resolution No. 749/2024 also addresses the veracity of supporting documentation, reinforcing that, for the application to be approved, the documents will be duly analyzed, and, in the event of false content, the beneficiary will be subject to verification of the facts through a regular

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Ethics Process, without prejudice to other applicable legal and judicial measures. This criterion, established in Article 4 of this Resolution, aims to ensure the fair and ethical processing of exemption requests, reaffirming the Council's commitment to integrity, legality, and the care of ill nursing professionals⁴.

Conclusion

Therefore, the results of this study point to the need for structural actions that promote safer work environments, as well as prevention and health care policies for nursing workers. The effective implementation of regulations such as Resolution No. 749/2024 proves essential for building a more dignified, humane, and sustainable professional practice. Furthermore, identifying prevalent diseases allows for the formulation of strategies aimed at mitigating the worsening of illness among these professionals. However, although Resolution No. 749/2024 represents an important step forward, it is not sufficient to address the multiple causes of illness in nursing. This measure must be accompanied by broader policies aimed at improving working conditions, professional development, and comprehensive health promotion, ensuring not only support in extreme situations but also prevention and continued dignity in the practice of the profession.

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