

- Following changed framework conditions, there were decreases in the total duration of physical restraint and the number of restraint events per restrained treatment case [10] ratio of five-point/ seven-point restraint events reduced significantly and continuously.

Conclusions: The amendments in statutory framework for the use of physical restraints made personnel more aware of the issue and consequently led to changes in restraint practice at our emergency psychiatric unit. These effects were partially cancelled by the increases in the severity of diseases during the pandemic.

Disclosure of Interest: None Declared

Epidemiology and Social Psychiatry 01

EPP0331

Antipsychotics in off-label use: prescription practices, benefits and risks Results from APSY Oulu study

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doi: 10.1192/j.eurpsy.2023.648

Introduction: Use of antipsychotics (APs) has increased worldwide during last decades. Main reason for this is off-label use, and especially the use of quetiapine for insomnia and anxiety. There is an insufficient amount of knowledge about the prescription habits and the effects of APs in off-label use. For example, APs have shown efficacy in the treatment of anxiety, but long term follow-ups are rare. Only two trials on effects of quetiapine in primary insomnia exist, without much evidence. Some small studies have indicated that even relatively small doses of APs may cause side-effects, such as increased weight and metabolic changes.

Objectives: The aim of the APSY Oulu project is to analyse the prescriptions and use of APs off-label, and benefits and risks of APs in off-label use.

Methods: In 2019 a questionnaire study for doctors in different health care organisations in Finland was performed. The purpose of the questionnaire was to find out the physicians' prescription habits, thoughts and experiences concerning APs, especially in off-label use. In ongoing clinical study we will investigate whether the use of most frequently used off-label AP quetiapine will associate to changes in participants' overall health, mental symptoms or cognitive functions during 6-12 months follow-up. In addition, in general population sample, we will compare characteristics and clinical outcomes of 137 persons being prescribed APs off-label and comparison groups.

Results: Based on questionnaire for Finnish physicians (n=216), APs off-label prescriptions are mostly for insomnia and anxiety, most common drug being quetiapine. APs are being prescribed off-label by GPs, occupational health doctors and psychiatrists. The monitoring of metabolic values was not very common: 44% of the psychiatrists and 18% of other physicians reported to follow-up metabolic values of the patients (Penttinen J et al. *Psychiatria Fennica* 2021;52:22-). We have collected pilot sample of

10 individuals starting quetiapine for insomnia. They all had severe or very severe symptoms of insomnia, and used very small dose of quetiapine (mostly 12,5-25mg). Four of them used quetiapine still at the 12 months follow-up, and their insomnia symptoms decreased during the follow-up. Side effects were common (e.g. increase heart rate, drowsiness) and caused discontinuation of quetiapine for some persons. In the general population based Northern Finland Birth Cohort 1966 individuals who had been prescribed APs off-label had poorer health, lower socioeconomic status, consumed more alcohol and smoked more often compared with individuals with non-psychotic mental disorders without APs off-label (Pirhonen E et al. *Acta Psychiatr Scand.* 2022;146:227-).

Conclusions: Off-label prescriptions and use of APs is common. Further studies on APs off-label use and its safety are needed. There is a need for guideline on monitoring the patients during APs in off-label use.

Disclosure of Interest: None Declared

EPP0332

Factors associated with happiness and life satisfaction among workers

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doi: 10.1192/j.eurpsy.2023.649

Introduction: In modern society, mental health in the workplace is increasingly considered an important issue and a major political agenda. Many studies have reported negative mental health risk factors or psychopathologies such as depression, anxiety, and suicidal inclination among workers. Accordingly, there are ongoing debates on the importance of establishing a system to screen and treat psychopathologies, such as the assessment of depression and anxiety. However, the absence of psychopathology or negative psychiatric factors does not guarantee good mental health. Mental health is a more comprehensive and complex concept. According to the World Health Organization, mental health is the state in which an individual can cope with routine stressors in life, work productively, and contribute to their organizations. Hence, it is needed to directly measure workers' mental health in terms of happiness and life satisfaction.

Objectives: To comprehensively investigate workers' mental health, we explored factors associated with happiness and life satisfaction among workers using nationally representative data.

Methods: We performed multiple regression analysis, with happiness and life satisfaction set as the outcome measures, and socio-demographic factors and work-related factors as the predictive variables.

Results: A total of 7,797 participants (4,428 men [56.8%]) with a mean age of 46.58 years (SD = 13.50) were included in the analysis.