

and interpersonal stressors at work. (Black et al. SAGE 2020, 609-611)

For the past decade, it has been one of the actual areas of research globally. (Ahola et al. Journal of affective disorders, 88, 2005; 55–62; Ahola et al. Journal of affective disorders, 104, 2007; 103–110, Shirom, A. Work Stress, 19, 2005; 263–270, Toker et al. The Journal of Applied Psychology, 97, 2012; 699–710.) However, a small number of studies exploring burnout have been conducted in Azerbaijan.

The requirement for supportive interventions for workers with an aim to improve the quality of care and prevention of burnout related to health and sociocultural problems such as difficulties in their personal life, job-shifts has led us to conduct this study.

Above all, the Second Karabakh war that took place in 2020 increased the population of patients that are in urgent need of psychiatric and psychological support.

**Objectives:** The purpose of this study is to examine the level of burnout among all mental health workers who have been closely working with veterans and families of deceased soldiers. Similarly, the study is intended to evaluate the impact of various factors, such as secondary traumatic stress, effort-reward imbalance, and socio-demographic variables leading to burnout.

**Methods:** The study design is cross-sectional. 22-item Maslach Burnout Inventory (MBI) is used to measure the level of burnout. Intrusion, avoidance, and arousal symptoms triggered by indirect exposure to traumatic events are evaluated by the 17-item Secondary Traumatic Stress Scale (STSS). 22-item Measurement of the effort-reward imbalance (ERI) is used to define the level of effort, reward, and over-commitment. Demographic questionnaires consist of age, sex, marital status, professional background, years of employment, workload in hours.

**Results:** The sample size has been estimated as 200 participants. Associations between occupational exhaustion, depersonalization, personal accomplishment assessment, intrusion, avoidance, arousal, effort, esteem, job promotion, job security, overcommitment and professional background, workload in hours will be explored in the current study.

**Conclusions:** The findings upraised will promote elaborating personalized approaches toward burnout prevention treatment.

**Disclosure of Interest:** None Declared

## EPV0524

### Medical Fitness in workers suffering from mixed anxiety-depressive disorders:

L. Ben Afia, G. Bahri, H. Ben said, H. ziedi, M. Mersni, D. Brahim, S. Ernez\*, N. Mechergui, I. Youssef and N. Ladhari

Occupational medicine department, Charles Nicolle Hospital, Tunis, Tunisia

\*Corresponding author.

doi: 10.1192/j.eurpsy.2023.1852

**Introduction:** Anxiety and depressive disorders are major public health problems associated with multiple adverse occupational outcomes, including unemployment, reduced productivity, and absenteeism.

**Objectives:** To study the socio-professional and medical characteristics of workers with mixed anxiety -depressive disorders and to evaluate their impact on work ability.

**Methods:** A descriptive and retrospective study conducted in the occupational medicine department at Charles Nicolle Hospital, involving all the medical records of workers suffering from mixed anxiety –depressive disorders that were referred for a medical opinion of fitness for work from January 1, 2014, to December 31, 2020.

**Results:** The study included 62 females and 20 males diagnosed with mixed anxiety-depressive disorders with a mean age:  $41.4 \pm 8$  years. The average professional seniority was  $12.8 \text{ years} \pm 7.8$  years. The most auspicious occupational sectors for these disorders were health (41%) and communication (30%). Most of these workers (62%) were fit for work with professional restrictions (10 workers to positions with a lower mental load and 20 exclusions from night shift work), though 12% were declared unfit for work temporarily. Twenty-one workers were fit to continue working and one worker was unfitted to work.

The overall prevalence of mixed anxiety –depressive disorders was found to be significantly elevated in female patients ( $p: <0.001$ ).

**Conclusions:** The decision of medical fitness for work among workers with psychiatric disorders considers their physical and mental capacities as well as the conditions in which the work is carried out, aiming to annihilate the risk of psychic imbalance. Thus, an adjustment of workstations can be an important determinant in the prevention of psychosocial risks.

**Disclosure of Interest:** None Declared

## EPV0525

### MEDICAL FITNESS IN WORKERS WITH PSYCHIATRIC DISORDERS

L. Ben Afia, G. Bahri, I. Youssef, N. Mechergui, S. Ernez\*, D. Brahim, M. Mersni and N. Ladhari

Occupational medicine department, Charles Nicolle Hospital, Tunis, Tunisia

\*Corresponding author.

doi: 10.1192/j.eurpsy.2023.1853

**Introduction:** Mental health disorders are among the most burdensome health concerns in the world; it affects more than 970 million people in 2019. These disorders deteriorate all aspects of life, especially the professional field, impacting mainly physical capability, daily functioning, and productivity among the working-age population.

**Objectives:** To study the socio-professional and medical characteristics of workers with psychiatric disorders and to assess the repercussions of these pathologies on work ability.

**Methods:** A descriptive and retrospective study included all the medical files of workers with psychiatric disorders who were referred to the occupational medicine department at Charles Nicolle Hospital for a medical opinion of fitness for work during the period from January 1, 2014, to December 31, 2020.

**Results:** The average age of the 224 cases collected was  $41.74 \pm [25-60 \text{ years}]$  with a sex ratio of 0.67. The average professional seniority was  $13.4 \text{ years} \pm 8.27$  years. The most common occupational sectors were health (38.1%) and communication (20.2%). The patients were mainly suffering from either an anxiety-depressive disorder (36.6%) or psychosis (11.6%). These included

21 cases of bipolar disorder, 21 cases of schizophrenia, two cases of chronic hallucinatory psychosis and 3 cases of delusional psychosis. Forty-three patients were fit to continue working, 133 patients were fit with restrictions and twenty-six were unfitted to work.

A professional reclassification was recommended for 37 patients in positions with a lower mental load. One employee suffering from advanced schizophrenia was offered early retirement on grounds of disability. Permanent unfitness was pronounced in 11.6% of cases.

**Conclusions:** The impact of mental disorders on cognitive abilities can be so significant as to result in temporary or permanent unfitness for work. However, the decision of medical fitness for work for the same psychiatric pathology may vary from one individual to another and from one workstation to another.

**Disclosure of Interest:** None Declared

### EPV0526

#### The weight of caring for your elderly – a cross-sectional analysis of non-professional caregivers for people living with dementia in Romania.

S. Zaharia<sup>1\*</sup>, T. Alexandrescu<sup>2</sup>, T.-C. Ionescu<sup>1</sup> and C. Tudose<sup>1</sup>

<sup>1</sup>“Prof. Dr. Alexandru Obregia” Clinical Psychiatric Hospital and <sup>2</sup>“Carol Davila” University of Medicine and Pharmacy, Bucharest, Romania

\*Corresponding author.

doi: 10.1192/j.eurpsy.2023.1854

**Introduction:** While a growing corpus of literature regarding the stress suffered by caretakers for people living with dementia (PLWD) already exists, very little data is available regarding this subject among Romanian caretakers.

**Objectives:** This cross-sectional study aims to compensate for this by assessing a small (N=72) sample of caretakers through the use of self-reporting questionnaires for subjective feelings of stress and burden.

**Methods:** Responders filled and online survey containing miscellaneous socio-demographic questions and the Kingston Caregiver Stress Scale (KCSS) along with the Caregiver Health Assessment Self Questionnaire (CHASQ). Results were collected and analysed in SPSS for subsequent correlations.

**Results:** The majority (77%) of caretakers are women and 86% of responders are offering their care at home, emphasizing pervasive gender roles and lack of availability or accessibility of social services for the PLWD in Romanian society. Three thirds of caregivers were children of PLWD. More than half of responders (51%) had KCSS scores that suggested severe stress while less than 9% related only mild stress. Most responders (52%) related social aspects of their lives as most affected by their caregiver status.

**Conclusions:** While in line with most other findings and limited in scope and means by its methodology, this study offers a quick snapshot on the subjective levels of stress affecting caretakers of Romanian PLWD and can lead towards further points of inquiry on the matter in the Romanian population.

**Disclosure of Interest:** None Declared

### EPV0527

#### Exploring the paradigm of depressive disorders through an evolutionary and biopsychosocial lens

T. Ochi<sup>1\*</sup>, A. J. Loonen<sup>1</sup>, G. G. Simutkin<sup>2</sup>, N. A. Bokhan<sup>2</sup>, A. N. Kornetov<sup>3</sup> and S. A. Ivanova<sup>2</sup>

<sup>1</sup>PharmacoTherapy, -Epidemiology & -Economics, University of Groningen, Groningen, Netherlands; <sup>2</sup>Mental Health Research Institute, Tomsk National Research Center and <sup>3</sup>Fundamental Psychology and Behavioral Medicine, Siberian State Medical University, Tomsk, Russian Federation

\*Corresponding author.

doi: 10.1192/j.eurpsy.2023.1855

**Introduction:** Depression can be considered to be a common psychological response to adversity or loss from which an individual may recover quickly based on a natural resilience mechanism. In major depressive disorder, however, we see that biopsychosocial factors exist that can prevent this natural resilience mechanism from taking effect.

**Objectives:** To investigate neurotransmitter pathways linked with antidepressant response, genetic epidemiological studies and a literature assessment of biopsychosocial factors were conducted.

**Methods:** Newly admitted patients with a depressive episode according to the criteria of ICD-10 (F32 or F33) who had not been on antidepressant medication for at least 6 months were recruited. More than half the patients have never been treated with antidepressant medication during their entire life. The patients' depression was of at least moderate severity as measured by the Hamilton's Depression Rating Scale (HAMD-17).

To determine the effect of adrenergic pathway genes to antidepressant response, the outcome was measured by the difference in HAMD-17 score between entry and two weeks of treatment after two and four weeks of treatment and entry and four weeks of treatment. Multiple linear regression was conducted to identify the independent factor associated with  $\Delta$ HAMD-17 between the three time periods, including age, sex, depression diagnosis, type of antidepressant taken and selected SNPs.

Literature assessment utilised a snowball technique, building on prior literature reviews conducted. The selection of included literature was determined by the authors.

**Results:** The Tomosk cohort was mainly women, with less than 20% of patient being male. The cohort was dynamic thus the number of participants involved in each investigation varied. Most patients took SSRIs, specifically sertraline, paroxetine, escitalopram, fluoxetine and fluvoxamine. Comparing the medication taken,  $\Delta$ HAMD-17 was significantly more improved in participants taking tricyclic antidepressants at 0 - 2 weeks and 0 - 4 weeks. From our literature assessment, we determined that targeted therapy can undermine the influence of biopsychosocial factors and allow natural resilience to bring depression to an end. Many mental activities is not exclusively individual, but depends on the socio-cultural context as people are part of a community.

**Conclusions:** Depressive disorders can be understood as a rather habitual dysregulation of human behavior which, unlike normal behavior, is not limited by natural resilience in time and severity. Our investigations looked at polymorphisms impacting serotonergic, dopaminergic and adrenergic neurotransmissions and enzymes.