

rating scales for resilience (BRS), depression (PHQ-9), anxiety disorder (GAD-7), and post-traumatic stress disorder (PTSD) (PCL-C) was used to measure the prevalence of resilience and its demographic, clinical, as well as wildfire-related predictors. The data collection spanned between April and June of 2021. Data were analyzed using the Statistical Package for Social Sciences (SPSS) version 25 and univariate analysis with done using a chi-squared test and binary logistic regression analysis.

**Results:** A total of 249 residents accessed the online survey and 186 completed the survey. Therefore, there was a response rate of 74.7%. Most of the respondents were females (85.5%, 159), above 40 years of age (81.6%, 80), employed (94.1%, 175), and in a relationship (71%, 132). The study identified two variables, thus having PTSD symptoms (OR = 2.85; 95% CI: 1.06–7.63), and the age of respondents significantly predicted low resilience in our sample. The prevalence of low resilience in our sample was found to be about 37.4%.

**Conclusions:** The study finding demonstrated that age and the presence of PTSD were the independent significant risk factors associated with low resilience in the affected population of Fort McMurray five years after the devastating wildfire disaster. This result further provides new information about the association between resilience, demographic, and clinical characteristics while adding to the rising body of evidence on the benefits of resilience in individuals during and after disasters. However, further research is needed to enhance understanding of the pathways to

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### EPP0329

#### Recurrence and profile of reconsultants: descriptive study of 162 patients

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**Introduction:** Emergency psychiatric consultation requests present certain specificities both in the situations encountered and in their management, due to a close relationship between the consultant and his environment. They do not only correspond to psychiatric emergencies, in the strict sense of the term, but also to psychological emergencies with their possible social dimension. They require an adapted response that can be decisive for the future

**Objectives:** To determine the epidemiological and clinical characteristics of patients reconsultants in the emergency medical department.

**Methods:** This is a cross-sectional study, conducted over a period of 12 months, from 01 April 2020 to 31 March 2021, in the emergency medical department of Mahdia University Hospital.

**Results:** During the study period, 162 reconsultations for psychiatric emergencies were recorded. the age ranged from 18 to 61 years with an average of 35 years. The level of education was primary or secondary in 78.8% of cases. The majority of reconsultants had single marital status (70%). The absence of professional activity and

social security coverage was found in 72.3 and 49% of cases respectively. The presence of family and personal psychiatric history was noted in 29.8% and 91.5% of reconsultants respectively. Heteroaggressiveness followed by instability were the most frequently encountered reasons for consultations with 23.4% and 12.8% of cases respectively. The presence of a triggering factor was found in 63.8% of cases where problems with the main support group followed by those related to the social environment and those related to access to health services were the most reported with 49.23 and 13% respectively. The syndromic psychiatric diagnoses were, in decreasing order of frequency, psychomotor excitement (23.4%), delusional syndrome (17%), dissociative syndrome (12.8%) and somatic conversion (12.8). For reconsultants, relational approach and/or injectable treatment were the most used therapeutic means immediately (49%). Neuroleptics and benzodiazepines were prescribed in 38% and 13% of cases, respectively. The decision to hospitalize in a psychiatric department concerned 45% of reconsultants.

**Conclusions:** Referral decisions favored the organization of ambulatory follow-up, with a decrease in the rate of hospitalization. These results make it possible to identify the evolutionary trends of the population consulting in emergency

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### EPP0330

#### Impacts of External Influences on Treatment in Emergency Psychiatry: Results of a Longitudinal Measurement in an Adult Psychiatry Clinic in Germany

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**Introduction:** Regarding last years, in German psychiatry the effects of the changed statutory framework conditions for the use of physical restraints [1,2,3] and the COVID-19 pandemic on the treatment in emergency psychiatry were discussed.

**Objectives:** Against these background, changes in the severity of disease and regarding the use of coercive measures in our emergency psychiatry are to be analysed.

**Methods:** An internal retrospective study in the emergency psychiatry (2017=reference period; 2019=post changed statutory framework; 2021=post changed statutory framework and during the pandemic) was performed.

**Results:** - The socio-demographic patient data (exception: gender) and the distribution of the main diagnoses groups remained stable. There was a reduction in the treatment volume by 4% in the pandemic period compared to 2019.

- Both in 2019 and 2021, significant increases regarding the number of patient characteristics of the intensive treatment according to the OPS code 9-61 [7,8,9] were measured.

- During pandemic period 2021, a significantly rise in the percentage of involuntarily committed treatment cases [10] imposed.