

of education, the sample included specialists with secondary general education (4.14%), with secondary special education (19.4%), with incomplete higher education (11.46%), with higher education (59.87%) and PhD (5.1%). 35 people (11%) of the surveyed medical workers worked in the red zone.

Results: Working in the red zone is significantly associated with Emotional Exhaustion ($p=0.002$) and Depersonalization ($p=0.002$), but not with a Reduction in Professionalism.

The working conditions of medical workers who were significantly associated simultaneously with Emotional Exhaustion, Depersonalization and Reduction of professionalism (respectively): (1) Lack of confidence in support from the health system and the state in case of illness ($r=0.170$, $p=0.002$; $r=0.202$, $p=0.000$; $r=-0.171$, $p=0.002$); (2) Inability to meet the usual personal needs (daily routine, nutrition, communication with loved ones) as employment increases at work ($r=0.200$, $p=0.000$; $r=0.154$, $p=0.006$; $r=-0.186$, $p=0.001$); (3) Lack of confidence in their own professional competence in the fight against COVID-19 due to lack of knowledge about COVID-19 ($r=0.202$, $p=0.000$; $r=0.148$, $p=0.009$; $r=-0.211$, $p=0.000$); (4) Lack of confidence in their own effectiveness in the fight against COVID-19 due to the increase in the volume of work and the expansion of the scope of professional responsibilities ($r=0.234$, $p=0.000$; $r=0.152$, $p=0.007$; $r=-0.177$, $p=0.002$); (5) Lack of access to up-to-date information about COVID-19 ($r=0.190$, $p=0.001$; $r=0.158$, $p=0.005$; $r=-0.140$, $p=0.013$).

The Emotional Exhaustion scale is also associated with the fear of getting infected and getting sick with COVID-19 ($r=0.125$; $p=0.026$), as well as the lack of quick access to testing when COVID-19 symptoms appear ($r=0.169$; $p=0.003$).

Conclusions: Thus, not only work in the red zone, but also many specific working conditions during the COVID-19 pandemic can become a provocateur factor for the deterioration of the emotional state of medical workers.

Disclosure: Research is supported by the Russian Science Foundation, project No. 21-18-00624.

Disclosure of Interest: None Declared

EPV0328

The connection between professional burnout of medical workers and the self-help methods during the COVID-19 pandemic

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doi: 10.1192/j.eurpsy.2024.1059

Introduction: Many medical workers suffered from severe professional burnout while working in the conditions of the COVID-19 pandemic, but few of them had the opportunity to find psychological help.

Objectives: The aim of the research was to study the relationship between emotional burnout and self-help strategies in medical professionals during the pandemic.

Methods: The Maslach Burnout Inventory (MBI) was used to measure the level of professional burnout. It was filled out by medical workers from January 2021 to November 2022.

The sample consisted of 314 medical workers (57 men and 255 women), whose average age was 36.97 ± 11.93 . According to the level of education, the sample included specialists with secondary general education (4.14%), with secondary special education (19.4%), with incomplete higher education (11.46%), with higher education (59.87%) and PhD (5.1%). 35 people (11%) of the surveyed medical workers worked in the red zone.

Results: When medical workers experience severe Emotional Exhaustion and Depersonalization, they often try to help themselves by drinking alcohol ($r=0.156$; $p=0.005$; $r=0.184$; $p=0.001$), eating ($r=0.227$; $p=0.000$; $r=0.151$; $p=0.007$), taking medications ($r=0.204$; $p=0.000$; $r=0.212$; $p=0.005$), solitude ($r=0.204$; $p=0.000$; $r=0.133$; $p=0.019$), watching TV series ($r=0.173$; $p=0.002$; $r=0.146$; $p=0.01$). With an increase in the Reduction of professional skills, medical workers also eat more ($r=-0.148$; $p=0.009$) and try to learn something new, engage in self-development ($r=-0.137$; $p=0.015$). It is important to note that the desire to seek psychological help is associated only with Emotional Exhaustion ($r=0.121$, $p=0.032$), that is, he/she may be aware at an early stage of professional burnout, when the symptoms of depersonalization and reduction of professional skills have not yet occurred.

Conclusions: Thus, all the considered self-help methods are already used with pronounced symptoms of professional burnout, but do not lead to its pronounced decrease. It is important to note that seeking psychological help is possible with awareness of emotional exhaustion, but not with depersonalization and reduction of professional skills.

Disclosure: Research is supported by the Russian Science Foundation, project No. 21-18-00624.

Disclosure of Interest: None Declared

EPV0329

Comparison of perceptions about COVID-19 disease in patients and in medical professionals during the pandemic

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doi: 10.1192/j.eurpsy.2024.1060

Introduction: The COVID-19 pandemic poses a serious threat to mental well-being both for patients who have suffered from coronavirus disease and for medical workers of this period. The difference in perceptions about COVID-19 in patients and those who care for them reflects the peculiarities of assessing the coronavirus pandemic and their own coping capabilities.

Objectives: The aim of the research was to compare the perceptions about COVID-19 in patients and medical professionals during the pandemic.

Methods: A Short questionnaire of Disease Perception (E. Broad-bent) was used to study patients' perceptions about COVID-19

disease. The same questionnaire was modified for the perceptions about the COVID-19 pandemic to study the peculiarities of the perceptions about COVID-19 by medical professionals.

The study was conducted from January 2021 to November 2022. The sample consisted of 314 medical workers (57 men and 255 women), whose average age was 36.97 ± 11.93 , and 390 patients (64 men and 326 women), whose average age was 28.58 ± 10.74 . 35 people (11%) of the surveyed medical workers worked in the red zone.

Results: Medical professionals and patients tend to assess the impact of the pandemic on life in the same way. However, according to medical professionals, the COVID-19 pandemic will last longer than according to patients (4.93 ± 2.81 vs 3.18 ± 2.29 , $p=0.000$). Doctors assess their ability to control the pandemic significantly worse than patients assess their disease as a result of coronavirus infection (2.82 ± 2.28 vs 5.30 ± 2.88 , $p=0.000$). Medical workers have a worse assessment of the effectiveness of the measures taken to combat the pandemic (4.75 ± 2.63 vs 5.50 ± 2.67 , $p=0.000$). Doctors are less likely to find symptoms of coronavirus (2.88 ± 2.32 vs 4.98 ± 2.75 , $p=0.000$) and less concerned about the spread of COVID-19 (3.75 ± 2.55 vs 4.20 ± 2.63 , $p=0.023$). Whereas patients have a worse understanding of what COVID-19 is (6.32 ± 2.87 vs 5.52 ± 2.83 , $p=0.000$), and they believe that COVID-19 affects their emotional state to a greater extent than doctors did (3.60 ± 2.66 vs 4.39 ± 2.90 , $p=0.000$).

Conclusions: Thus, the specifics of the perceptions about COVID-19 may largely depend on whether a person is faced with a coronavirus in the role of a patient or a medical worker. The emotional state of patients is more affected by the pandemic combined with a worse understanding of COVID-19, while medical workers feel less control and tend to regard the measures taken to combat the pandemic as less effective.

Disclosure: Research is supported by the Russian Science Foundation, project No. 21-18-00624.

Disclosure of Interest: None Declared

EPV0330

The connection between personal factors and burnout among medical workers during the COVID-19 pandemic

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doi: 10.1192/j.eurpsy.2024.1061

Introduction: Work in the severe conditions of the pandemic has become a risk factor for the deterioration of the medical workers' psychological state, which together can lead to professional burnout and, as a consequence, to professional mistakes (Pervichko, Konyukhovskaya, 2020).

Objectives: The aim of the research was to study the connection between personal factors of medical workers and professional burnout during the COVID-19 pandemic.

Methods: The degree of professional burnout was assessed using Maslach Burnout Inventory (MBI) (Maslach, 2000; Vodopianova, Starchenkova, 2008), HEXACO Personality Inventory (short version) was used to study personality traits (Ashton, Lee, 2007; Egorova, et al., 2019).

The study was conducted from May 2020 to October 2022. The sample consisted of 197 medical workers (32 men and 165 women), whose average age was 38.85 ± 12.05 .

Results: Honesty as a personality trait is negatively significantly associated with emotional exhaustion ($r=-0.268$, $p=0.000$), depersonalization ($r=-0.323$, $p=0.000$) and positively associated with a smaller reduction in professionalism ($r=0.290$, $p=0.000$). Emotionality in medical workers is positively significantly associated with emotional exhaustion ($r=0.358$, $p=0.000$) and depersonalization ($r=0.243$, $p=0.001$) and with a greater reduction in professionalism ($r=-0.380$, $p=0.000$). Extroversion is negatively associated with emotional exhaustion ($r=-0.478$, $p=0.000$) and depersonalization ($r=-0.376$, $p=0.000$) and positively associated with a smaller reduction in professional achievements ($r=0.566$, $p=0.000$). Benevolence and conscientiousness reveal negative associations with depersonalization ($r=-0.248$, $p=0.001$; $r=-0.180$, $p=0.012$) and positive associations with a smaller reduction in professionalism ($r=0.190$, $p=0.008$; $r=0.301$, $p=0.000$).

Conclusions: Thus, the state of emotional exhaustion during burnout is associated with greater emotionality, less honesty and extroversion. Whereas depersonalization and a greater negative assessment of one's own professional competence and productivity is associated with less honesty, more emotionality, less extroversion, benevolence and conscientiousness.

Disclosure: Research is supported by the Russian Science Foundation, project No. 21-18-00624.

Disclosure of Interest: None Declared

EPV0331

The connection between the experience of the disease and perceptions about COVID-19 in patients

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doi: 10.1192/j.eurpsy.2024.1062

Introduction: Since the COVID-19 pandemic has had a serious impact on the psychological state of the population, the individual experience of COVID-19 disease may affect the content of perceptions about coronavirus in those who have been ill with it.

Objectives: The aim of the research was to study the connection between patients' experience of the disease and their perceptions about COVID-19.

Methods: A Short questionnaire of Disease Perception (E. Broadbent) was used to study patients' perceptions about COVID-19 disease. The wording "disease" was replaced with "COVID-19 disease".