

Results: Cannabis use is a modifiable risk factor for the development and exacerbation of mental illness. The strongest evidence of risk is for the development of a psychotic disorder, associated with early and consistent use in youth and young adults. Cannabis-related mental health adverse events precipitating Emergency Department (ED) or Emergency Medical Services presentations can include anxiety, suicidal thoughts, psychotic or attenuated psychotic symptoms, and can account for 25–30% of cannabis-related ED visits. Up to 50% of patients with cannabis-related psychotic symptoms presenting to the ED requiring hospitalization will go on to develop schizophrenia. With the legalization of cannabis in various jurisdictions and the subsequent emerging focus of research in this area, our understanding of who (e.g., age groups and risk factors) are presenting with cannabis-related adverse mental health events in an emergency situation is starting to become clearer.

Conclusions: There's a need to provide a reconciliation of the addiction vulnerability and allostatic hypotheses to explain addiction comorbidity in mentally ill cannabis users, as well as to further aid in developing a rational framework for assessment and treatment of problematic cannabis use in these patients.

Disclosure of Interest: None Declared

Mental Health Care 04

EPP0863

Dentists' level of stress and used coping strategies during COVID-19

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Introduction: COVID-19 has increased the levels of psychological stress experienced by the dental team, and higher level of constant stress negatively impacts mental health.

Objectives: The study aimed to 1) assess dentists' level of stress and compare it to normal population data; 2) identify the hierarchy of coping strategies chosen by dentists and their perception of those chosen by team members to manage psychological stress caused by the pandemic; and 3) to ascertain the effects of these coping strategies on dentists' higher stress level.

Methods: Data from an electronic test battery comprising of general demographic and dental-related variables was collected from 182 licenced Hungarian dentists at the outset of the pandemic. Responses to an empirical series of questions regarding their perceived level of stress, choice of interventional coping skills and their perception of those used by team members were recorded.

Results: Dentists' level of stress was significantly lower than the stress level measured in a Hungarian normal population ($t(386)=-2.227, p=0.027$), while financial status has a moderating effect ($F(3,176)=4.851, p=0.003$). The hierarchy of coping

strategies chosen by the dentist indicated that physical activity and exercise, particularly in groups settings ($M=4.78, SD=0.463$), and socialization with family ($M=4.72, SD=0.626$) were the most effective coping management strategies, superior to financial compensation, shifting work patterns, systems level change, and decisions within the team structure. Inclusionary strategies with family ($M=4.64, SD=0.587$), participating in individual leisure activities ($M=4.49, SD=0.621$) and socializing with friends ($M=4.44, SD=0.825$) were seen by dentists as more important to team members. Regression analysis was used to ascertain whether the use of these coping strategies increased the likelihood of having higher levels of perceived stress. The model was significant ($F(4,169)=8.292, p\leq 0.001$) with R^2 of 16.4%. Older age ($B=-0.179, S.E.=0.050, t=-3.582, p\leq 0.001$), gender ($B=4.214, S.E.=1.423, t=2.961, p=0.004$), active participation in developing COVID-19 protocols ($B=-1.619, S.E.=0.575, t=-2.815, p=0.005$) and socialization with family ($B=-2.108, S.E.=1.058, t=-1.993, p=0.048$) were the most effective coping mechanisms for having lower levels of perceived stress.

Conclusions: Our study provided insights into the value of importance attributed to perceived stress and a series of coping strategies used by the respondents and their perception of value ascribed to the same series by their team members. Active participation both in family life and in professional environment proved to be protective in such a highly stressful time like the COVID-19 pandemic.

Disclosure of Interest: None Declared

EPP0864

Prevalence of mental health effects among healthcare professionals during the COVID-19 pandemic

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Introduction: The COVID-19 pandemic has placed extraordinary mental health burdens on healthcare professionals. For women, it is a major challenge to reconcile the diverse roles of a professional, mother, and wife. The COVID-19 pandemic has exacerbated this, increasing their vulnerability to mental health issues.

Objectives: The aim of the study was to assess COVID-19-related mental health of healthcare professionals and to investigate whether possible gender differences as well as other parameters are associated with mental health disturbances.

Methods: We conducted a nationwide cross-sectional study of healthcare professionals working in hospitals or primary care settings in Greece from April to June 2022. Participants answered a questionnaire that included socio-demographic and other parameters, the Coronavirus Anxiety Scale (CAS), the Coronavirus Reassurance-Seeking Behaviors Scale (CRBS), and the Obsession with COVID-19 scale (OCS).

Results: A total of 464 healthcare professionals participated in the study, 71.2% were females and two-thirds were 31-50 years old.

Elevated levels of anxiety, frequent reassurance seeking activities and persistent troubling thoughts related to COVID-19 were found in 5.8%, 3.2% and 6.1%, respectively. However, females reported significant higher mean levels on CAS and CRBS compared to males (2.41 vs 1.60, $p=0.015$, and 3.36 vs 2.64, $p=0.041$, respectively). Participants living in smaller areas had increased levels on all three scales (CAS, $p < 0.001$; CRBS, $p = 0.007$; OCS, $p < 0.001$), indicating thus higher coronaphobia, more frequent reassurance-seeking behaviors and disturbed thinking about COVID-19, compared to healthcare workers living in urban regions. Furthermore, lower educational level is also associated with higher values on CAS, CRBS and OCS ($p < 0.003$; $p = 0.017$; $p < 0.023$, respectively). Nurses experience higher anxiety scores (2.96) than physicians (1.92, $p=0.013$) or other healthcare workers (1.87, $p=0.016$). No dysfunctional thinking about COVID-19 is observed in medical doctors, whereas nurses and other healthcare workers experience higher levels on OCS.

Conclusions: Our study does not show any worrying increased psychological dysfunction related to COVID-19 pandemic among healthcare workers in general. However, females have increased levels than males. Thus, support and mental health protecting strategies should be applied primarily to female healthcare professionals when necessary.

Disclosure of Interest: None Declared

EPP0865

A Path Analysis Evaluating the Impacts of Childhood and Adult Trauma on Mental Health Outcomes at Two Psychiatric Hospitals in Johannesburg, South Africa

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Introduction: Like many under-resourced settings, there is a large gap between burden of mental illness and availability of services in South Africa. Because South Africa also bears a high burden of adverse childhood events (ACEs) and adult trauma, mental illness is often preceded in individuals by either or both. While studies within South Africa have examined the association between ACEs and distress in adulthood and adult trauma and adult mental distress, there is less knowledge of how these preceding factors interact to affect mental distress together, particularly in clinical populations.

Objectives: Using path analysis, this study seeks to ascertain the impact that ACEs and adult trauma have on mental illness in urban South Africa. Understanding the perceptions and experiences of people living with mental illness is key not only to expanding biomedical services and ensuring appropriate and effective mental health treatment, but can also help identify ways to prevent mental illness in the future.

Methods: This study uses data collected from 309 psychiatric outpatients at two public psychiatric hospitals in Johannesburg. Ethics approval was received and data were collected in-person between January and June of 2022. Patients 18 years and above, of African descent, and willing to provide informed consent were invited to participate. The survey included questions about demographics COVID-19, adverse childhood events, adult traumatic events,

depression, anxiety, and stress. Participants were also invited to take part in a brief, semi-structured interview. Data were analyzed via path analysis, using the lavaan package in R, version 4.1.1.

Results: Incidences of both ACEs and adult trauma were significantly associated with three mental illness outcomes – depression, anxiety, and stress. An aggregated adult trauma score was found to partially mediate the association between total ACEs and depression, anxiety, and stress. When analyzed separately, total adult trauma partially mediated the association between ACEs including childhood verbal abuse, sexual abuse, emotional neglect, and mental illness in the household and depression, anxiety, and stress. Total adult trauma also partially mediated the association between childhood physical abuse and depression and anxiety, but not stress.

Conclusions: This study highlights the importance of disaggregating adverse childhood events when exploring their effects, while also reinforcing previous findings that ACEs increase the likelihood of experiencing adult trauma and mental illness. Future studies should attempt to pinpoint which ACEs are most impactful, and target those in particular for prevention in childhood and intervention in adulthood, to mitigate their deleterious impacts.

Disclosure of Interest: None Declared

EPP0866

Depression, anger and coping strategies of students in polish medical faculties

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Introduction: Stress related to high expectations towards students, a large amount of knowledge necessary to assimilate in a brief period of time, and peer pressure are an important factor in the deterioration of the mental state of medical students. As a consequence, it can lead to burnout and even the development of mental disorders such as depression. Mechanisms of coping with difficulties play an extremely important role in moderating this risk. For this reason, it was of the interest what strategies medical students adopt in the face of everyday stress and how it affects their well-being and functioning.

Objectives: The objective was to determine how medical studies impact mental health of students and what coping strategies are used by them to mitigate the negative influence of stress associated with high expectations, peer pressure and overwork.

Methods: A cross-sectional study was conducted among students of polish medical faculties using an online questionnaire. Risk of depression was assessed using validated BDI inventory, aggression using STAXI inventory and evaluation of coping strategies was conducted with Brief-COPE inventory.

Results: Study was conducted among 329 participants. The majority of respondents were female (71.4%; $n=235$) and average age in the whole population equaled 22.46 years (95%CI: 22.1-23.01). There was no statistically significant difference in age between