

Results: In total 86 individuals were included, one individual was excluded due to missing data. Lower life-quality was more frequently reported by females (71%), as compared to males (52%). Mean age was slightly lower in the group with lower life quality (lower: 38.5 years vs. higher: 40.6 years). The group with lower quality of life scored higher on the RBQ-2A questionnaire (mean = 18.6, Standard deviation [SD] = 8.25, n = 54) as compared to the group who reported higher life quality (mean = 13.8, SD = 6.23, n = 32). Higher scores of repetitive behaviors were significantly associated with lower life-quality (t -value = 3.0153, degrees of freedom [df] = 78.966, p -value = 0.0035).

Conclusions: Lower self-reported life-quality was associated with higher repetitive symptoms in adults diagnosed with ASD. This highlights repetitive symptoms as an important treatment-target when developing pharmacological as well as psychotherapy-oriented treatments for this group of patients.

Disclosure of Interest: None Declared

EPP0718

Psychological effects of PTSD and major depression following the wildfires in Fort McMurray: A fifth-year post-disaster study

W. Mao^{1*}, M. Adu¹, E. Eboime¹, R. Shalaby¹, N. Nkire¹, B. Agyapong¹, H. Pazderka¹, G. Obuobi-Donkor¹, E. Owusu¹, F. Oluwasina¹, Y. Zhang¹ and V. Agyapong²

¹Psychiatry, University of Alberta, Edmonton and ²Psychiatry, Dalhousie University, Nova Scotia, Canada

*Corresponding author.

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Introduction: As a result of the wildfire that engulfed Fort McMurray (FMM), Alberta, Canada in May 2016, over 90,000 residents were evacuated from the city. Approximately 2400 homes, or 10% of the housing stock, were destroyed in Fort McMurray. About 200,000 hectares of forest were destroyed by the fire, which reached into Saskatchewan. In the aftermath of a major disaster, a community's infrastructure is disrupted, and psychological, economic, and environmental effects can last for many years.

Objectives: Intensive research was conducted in Fort McMurray five years after the wildfire disaster to determine the prevalence of major depressive disorder (MDD) and post-traumatic stress disorder (PTSD) among residents of the community and to determine the demographic, clinical, and other risk factors of probable MDD and PTSD.

Methods: An online questionnaire administered via REDCap was used to collect data in a quantitative cross-sectional study between 24 April and 2 June 2021. Patients were asked to complete the Patient Health Questionnaire (PHQ-9) in order to assess the presence of symptoms associated with MDD. An assessment of likely PTSD in respondents was conducted using the PTSD Checklist for DSM-5 (PCL-C). In this study, descriptive, univariate, and multivariate regression analyses were conducted.

Results: Out of 249 people who accessed the survey link, 186 completed it (74.7% response rate). There was a median age of 42 among the subscribers. A majority of the sample consisted of 159 (85.5%) females; 98 (52.7%) over the age of 40; 136 (71%) in a relationship; and 175 (94.1%) employed. Our study sample had an overall prevalence of 45.0% (76) of MDD symptoms. The multivariate

logistic regression model revealed four variables that were independently associated with MDD symptoms, including being unemployed, diagnosed with MDD, taking sedative-hypnotics, and willingness to receive mental health counseling. A total of 39.6% of our respondents (65) reported having likely PTSD. Three independent variables: received a mental health depression diagnosis from a health professional, would like to receive mental health counseling, and have only limited or no support from family contributed significantly to the model for predicting likely PTSD among respondents while controlling the other factors in the regression model.

Conclusions: The findings of this study indicate that unemployment, the use of sleeping pills, the presence of a previous depression diagnosis, and the willingness to seek mental health counseling are significant factors associated with the increase in the prevalence of MDD and PTSD following wildfires. Support from family members may prevent these conditions from developing.

Disclosure of Interest: None Declared

EPP0719

Psychoses and professional activity: Impact on medical fitness for work

A. Belkahla, D. Brahim, H. Ben Said, A. Ghenim, W. Ayed*, S. Ernez, I. Youssef and N. Ladhari

Occupational pathology and fitness for work, Charle Nicolle Hospital, Tunis, Tunisia

*Corresponding author.

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Introduction: Psychoses constitute an extremely heterogeneous clinical entity, with variable medical and socio-professional prognosis depending on several associated factors.

Objectives: - To describe the socio-professional and medical characteristics of patients with psychotic disorders.

- To study the repercussions of these psychotic disorders on the patients' medical fitness for work.

Methods: Cross-sectional descriptive study of workers with psychotic disorders referred to the consultation of occupational pathology of Charles Nicolle Hospital in Tunis for a medical opinion of fitness during the period from January 2013 to July 2022.

Results: A total of 34 patients were included. The average age was 41.67 ± 10 years. A male predominance was noted with a sex ratio (M/F) of 1.12. Patients with bipolar disorders represented 77% (n=26) of the psychotics versus 23% with schizophrenia (n=8). Two cases had a family history of psychosis. The most represented sector was the health sector in 41% of cases, followed by the tertiary sector in 11.8% of cases. The most prevalent job position was administrative assistant (14.7%). The average professional seniority was 17.07 ± 11.18 years. At the end of the medical aptitude consultation, 17% of the patients (n=6) were considered fit to continue their usual professional activity and 70% of the patients (n=24) had certain restrictions, mainly an exemption from night work in 46% of the cases (n=11) and from security and responsibility functions in 17% of cases (n=4). Temporary unfitness for work was indicated for 18% of patients (n=6) with a median duration of 8 ± 3.46 months. Twenty-three percent (23%) of the patients were judged permanently unfit for their jobs. Early

retirement was proposed for five patients. The main diagnosis for permanent unfitness was bipolar disorder (7/8 patients).

Conclusions: The evaluation of the social and professional impact of psychotic disorders is an area of research that requires continuous and periodic re-evaluation.

Disclosure of Interest: None Declared

EPP0720

Psychiatric disorders in teleoperators : A series of 27 cases

A. Ghenim, D. Brahim, N. Mechergui, A. Belkahla, S. Ernez, G. Bahri, W. Ayed*, I. Youssef and N. Ladhari

Occupational pathology and fitness for work, Charles Nicolle Hospital, Tunis, Tunisia

*Corresponding author.

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Introduction: By its nature, the activity of teleoperators seems to be a propitious environment for the development of psychosocial disorders, sometimes severe

Objectives: To study the frequency of psychiatric disorders among teleoperators and their impact on medical fitness for work

Methods: This is a retrospective descriptive epidemiological study. We examined the files of teleoperators who were referred to the occupational medicine department of Charles Nicolle between 2014 and 2022 for a medical opinion of aptitude

Results: A total of 82 cases were identified, 27 of which had psychological complaints. A clear female predominance was noted (21). The average age was 38.22±6.536 years. All the patients were telephonists at the call-taking station with an average professional seniority of 9.3±3.395 years. The symptoms noted were: sad mood (19), irritability (15), anxiety (10), sleep disorders (8), loss of vital impetus (8), neurovegetative signs (6), psychomotor slowing (5), concentration and memory disorders (3). Only one patient had suicidal thoughts. Symptoms had been evolving for an average of 34.32±34.527 months. Psychiatric follow-up was noted in 16 patients. The diagnoses retained were: anxiety and depressive disorder (19), adjustment disorder (4), panic disorder (2), obsessive-compulsive disorder (1), and a satisfactory state of health (1). In some cases, the evolution was marked by complications: addiction(1), tonic stuttering with phobic disorder(1) and speech disorder(1). The prescribed treatments were: an antidepressant(2), an antidepressant-anxiety combination(8) and psychotropic drugs (2). Concerning the ability to work, 21 patients required an eviction from call taking (definitive (9) or temporary for 3 months (7) or 6 months (5) with re-evaluation of the medical ability to work at the end of this period), 1 patient had an eviction from night work and another had a reduction of the working hours.

Conclusions: Teleoperators are exposed to several risks which can affect both their mental and physical health and put their medical fitness for work at risk.

Disclosure of Interest: None Declared

EPP0721

Identification of anxiety-depressive disorders in paramedics working shift work

D. Brahim, N. Mechergui, I. Youssef, W. Ayed*, M. Mersni, S. Ernez and N. Ladhari

Occupational pathology and fitness for work, Charles Nicolle Hospital, Tunis, Tunisia

*Corresponding author.

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Introduction: Shift work can lead to mental health problems evolving into real anxiety disorders with significant socio-professional repercussions.

Objectives: The purpose of our work was to screen paramedics with shift work for anxiety disorders.

Methods: Cross-sectional study carried out among the paramedical staff of a Tunisian university hospital. The data was collected from a pre-established record sheet. Screening for anxiety-depressive disorders was done using the HAD scale

Results: The study included 158 paramedics. The average age was 36.48 years with female predominance at 70.9%. The average working time was 11.1 8.9 years and the average working time in shift work was 10.27 9.2 years. Of the 13 departments with non-standard hours of work, the main departments represented were resuscitation (n=24; 15.2%), emergencies (n=18; 11.4%) and radiology (n=17; 10.8%). Nurses accounted for 46.2%, manual workers for 23.4% and senior technicians for 19%. Certain anxiety symptomatology was found in 53.2% (n=84) and doubtful symptomatology in 29.1% (n=46) of the general population. Certain depressive symptomatology was noted in 17.1% (n=27) and doubtful symptomatology in 30.4% (n=48) of the general population. Occupational seniority and seniority in shift work were statistically significantly associated with both anxiety ($p=0.04/p=0.05$) and depression ($p=0.05/p=0.006$) symptomatology. Similarly, this anxiety-depressive symptomatology was associated with the position occupied ($p=0.02 / p=0.04$) and the assignment department ($p=0.008 / p=0.01$).

Conclusions: Anxiety-depressive disorders are common among paramedics working shift work in hospitals. Screening consultations in occupational medicine are necessary to detect these disorders early.

Disclosure of Interest: None Declared

EPP0722

Fitness for work on atypical schedules in workers with psycho-affective disorders

W. Ayed*, D. Brahim, I. Youssef, N. Mechergui, H. Ben Said, M. Mersni, S. Ernez, G. Bahri and N. Ladhari

Occupational pathology and fitness for work, Charles Nicolle Hospital, Tunis, Tunisia

*Corresponding author.

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Introduction: Work on atypical schedules could lead to alertness and sleep disorders, which makes people with psychiatric pathologies more likely to exacerbate their illness.