

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.

- Following changed framework conditions, there were decreases in the total duration of physical restraint and the number of restraint events per restrained treatment case [10] ratio of five-point/ seven-point restraint events reduced significantly and continuously.

**Conclusions:** The amendments in statutory framework for the use of physical restraints made personnel more aware of the issue and consequently led to changes in restraint practice at our emergency psychiatric unit. These effects were partially cancelled by the increases in the severity of diseases during the pandemic.

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## Epidemiology and Social Psychiatry 01

### EPP0331

#### Antipsychotics in off-label use: prescription practices, benefits and risks Results from APSY Oulu study

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**Introduction:** Use of antipsychotics (APs) has increased worldwide during last decades. Main reason for this is off-label use, and especially the use of quetiapine for insomnia and anxiety. There is an insufficient amount of knowledge about the prescription habits and the effects of APs in off-label use. For example, APs have shown efficacy in the treatment of anxiety, but long term follow-ups are rare. Only two trials on effects of quetiapine in primary insomnia exist, without much evidence. Some small studies have indicated that even relatively small doses of APs may cause side-effects, such as increased weight and metabolic changes.

**Objectives:** The aim of the APSY Oulu project is to analyse the prescriptions and use of APs off-label, and benefits and risks of APs in off-label use.

**Methods:** In 2019 a questionnaire study for doctors in different health care organisations in Finland was performed. The purpose of the questionnaire was to find out the physicians' prescription habits, thoughts and experiences concerning APs, especially in off-label use. In ongoing clinical study we will investigate whether the use of most frequently used off-label AP quetiapine will associate to changes in participants' overall health, mental symptoms or cognitive functions during 6-12 months follow-up. In addition, in general population sample, we will compare characteristics and clinical outcomes of 137 persons being prescribed APs off-label and comparison groups.

**Results:** Based on questionnaire for Finnish physicians (n=216), APs off-label prescriptions are mostly for insomnia and anxiety, most common drug being quetiapine. APs are being prescribed off-label by GPs, occupational health doctors and psychiatrists. The monitoring of metabolic values was not very common: 44% of the psychiatrists and 18% of other physicians reported to follow-up metabolic values of the patients (Penttilä et al. *Psychiatria Fennica* 2021;52:22-). We have collected pilot sample of

10 individuals starting quetiapine for insomnia. They all had severe or very severe symptoms of insomnia, and used very small dose of quetiapine (mostly 12,5-25mg). Four of them used quetiapine still at the 12 months follow-up, and their insomnia symptoms decreased during the follow-up. Side effects were common (e.g. increase heart rate, drowsiness) and caused discontinuation of quetiapine for some persons. In the general population based Northern Finland Birth Cohort 1966 individuals who had been prescribed APs off-label had poorer health, lower socioeconomic status, consumed more alcohol and smoked more often compared with individuals with non-psychotic mental disorders without APs off-label (Pirhonen E et al. *Acta Psychiatr Scand.* 2022;146:227-).

**Conclusions:** Off-label prescriptions and use of APs is common. Further studies on APs off-label use and its safety are needed. There is a need for guideline on monitoring the patients during APs in off-label use.

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### EPP0332

#### Factors associated with happiness and life satisfaction among workers

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**Introduction:** In modern society, mental health in the workplace is increasingly considered an important issue and a major political agenda. Many studies have reported negative mental health risk factors or psychopathologies such as depression, anxiety, and suicidal inclination among workers. Accordingly, there are ongoing debates on the importance of establishing a system to screen and treat psychopathologies, such as the assessment of depression and anxiety. However, the absence of psychopathology or negative psychiatric factors does not guarantee good mental health. Mental health is a more comprehensive and complex concept. According to the World Health Organization, mental health is the state in which an individual can cope with routine stressors in life, work productively, and contribute to their organizations. Hence, it is needed to directly measure workers' mental health in terms of happiness and life satisfaction.

**Objectives:** To comprehensively investigate workers' mental health, we explored factors associated with happiness and life satisfaction among workers using nationally representative data.

**Methods:** We performed multiple regression analysis, with happiness and life satisfaction set as the outcome measures, and socio-demographic factors and work-related factors as the predictive variables.

**Results:** A total of 7,797 participants (4,428 men [56.8%]) with a mean age of 46.58 years (SD = 13.50) were included in the analysis.