

psychopathology is an effective way to solve this problem has valid medical and social significance.

Objectives: To increase the effectiveness of prevention of psychopathological disorders in cardio-surgical interventions based on personalization of their correction.

Methods: The examination included the use of socio-demographic, instrumental, biochemical, clinical-psychopathological, psychometric, and statistical methods.

Results: The study sample consisted of 700 patients who were treated by CS in ACC at the SI “Heart Institute of the MH of Ukraine”.

It was found out that the most common complication is postsurgeon cognitive dysfunction (PCD) (72.0% of patients), postsurgeon encephalopathy (PE) (31.0%) is less common, and cerebral infarction (CI) is the least common (12.2%).

It was revealed that the core psychopathological symptoms associated with CS are cognitive disorders (72.0% of the examined) and affective symptoms, represented by depressive (38.1%) and anxiety (33.9%) manifestations of mild and moderate expressiveness, and auxiliary constructs – dyssomnic (29.7%), asthenic (17.9%) and somatovegetative (9.0%) disorders. The highest prevalence of psychopathological symptoms was found in patients with CI, somewhat less in patients with PE, and the lowest in patients with PCD. Signs of mild depressive disorder were found in patients who underwent CS in ACC, elevated levels of adynamic depression indicators, depression with fear and agitated depression, as well as increased levels of anxiety: the average level of anxiety, mental and somatic anxiety. The indicators of expressiveness of depression and anxiety in patients with CI turned out to be the highest, in patients with PE – lower, and in patients with PCD – the lowest. We proposed a mathematical model for predicting the development of psychosocial maladjustment (PM) in patients who have undergone CS in ACC. It is based on a comprehensive assessment of three key vectors that can have a mutually potentiating pathogenetically related effect on the course of the formation of PM: surgical, neurological, and psychopathological. A complex of diagnostic, corrective and preventive measures for each of the risk groups has been developed.

Conclusions: Verification of the proposed model on a representative sample of patients confirmed its high predictive ability and reliability in use.

Disclosure of Interest: None Declared

COVID-19 and related topics

EPV0300

Predictors for Burnout Among Healthcare Workers in a Post-Covid Era

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Introduction: We aimed to study predictive factors for burnout (BO) among healthcare workers in a tertiary hospital in Singapore.

Objectives: We hypothesized that burnout would be associated with singles, females, and foreign born staff recently moved into this country, unaccompanied by family members.

We further hypothesised that BO would be associated with those scoring less on resilience. Recognising that social support mitigated against stress and burnout, we hypothesized that those who perceived less support would be more prone to BO.

Methods: The study questionnaire was sent via corporate email to all staff with email access. We stressed that data would be fully anonymised. No financial rewards were given for participation which was carried out on a voluntary basis.

The following instruments were used, viz. F-SozU K-6, a brief form of the perceived social support questionnaire; Connor Davidson Resilience Scale; Oldenburg Burnout Inventory; Patient Health Questionnaire-4 item; Demand Control Support Questionnaire and Leisure Time Satisfaction Scale. Ethics approval for the study was sought from the SingHealth Centralised Institutional Review Board, which granted exemption of participant consent.

Analyses were performed using Stata version 17.0 (StataCorp. 2021), with statistical significance set as 2-sided 5% ($p < 0.05$). The reliability and internal consistency of the scales used were assessed using Cronbach Alphas and Confirmatory Factor Analysis (CFA).

Results: Neither males nor females were more at risk for BO. And contrary to what we hypothesised those who recently moved to this nation were not at greater risk for BO ($p > 0.05$). Multivariate analyses showed that younger workers displayed higher burnout scores ($p < 0.001$). The psychological demand sub-score was positively associated with burnout [0.61 (95% CI 0.45 to 0.77), $p < 0.001$]. Conversely, decision latitude [-0.33 (95% CI -0.44 to -0.21), $p < 0.001$] and support [-0.47 (95% CI -0.60 to -0.35), $p < 0.001$] were negatively associated with BO.

Those who experienced anxiety or depressive symptoms were respectively more likely to experience burnout [0.30 (95% CI 0.02 to 0.58), $p = 0.035$ and 0.72 (95% CI 0.41 to 1.02), $p < 0.001$], with a clear association between higher PHQ-4 scores and risk for burnout ($r = 0.619$).

Moreover, satisfaction with utilisation of leisure time was inversely related to BO [-0.55 (95% CI -0.68 to -0.41; $p < 0.001$)]. We could not find any association between number of years worked, profession, marital status and perceived social support and BO, on multivariate analysis ($p > 0.05$).

Conclusions: Stress reduction interventions should be made available for all staff, especially addressing those at highest risk for burnout.

Disclosure of Interest: None Declared

EPV0301

The COVID-19 pandemic as a traumatic experience in the general population

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Introduction: The COVID-19 pandemic has significantly affected everyday life in most countries of the world. Researches conducted in 2020 showed that COVID-19 was a traumatic experience for 18-60% of respondents in the general population, depending on the country where the research is conducted. Researches for later periods are rare, although we can expect significant changes. We found only one study from 2023 on this topic, although not on the general population.

Objectives: That is why we were interested in what the situation is like after 3 years of the pandemic, when we have been living without non-pharmacological anti-pandemic measures for almost a year.

Methods: The research was conducted at the beginning of 2023. 48 respondents who were not treated psychiatrically or are medical workers were surveyed, because it was shown that these groups were exposed to a greater risk of impaired mental health during the COVID-19 pandemic. To assess the level of traumatic experience, i.e. the risk of developing PTSD as a consequence of the COVID-19 pandemic, we used the Impact of Event Scale With Modifications for COVID-19 (IES-COVID19). A score on that scale of 27 to 34 indicates a clinically significant level of trauma, i.e. there is a 75% chance of developing PTSD. A result of 35 and above suggests that it is necessary to seek professional help.

Results: Our research included 19 (39.6%) men and 29 (60.4%) women. The average age of the respondents is 60.4 years. 29 (60.4%) respondents know that they have recovered from COVID-19. 2 (4.2%) subjects were treated in the hospital due to COVID-19. 8 (16.7%) respondents have a traumatic experience of the COVID-19 pandemic. 5 (10.4%) respondents are in the category of clinically significant level of trauma, while 3 (6.3%) respondents are in the category that should seek professional help. The group traumatized by COVID-19 does not have significantly more respondents who recovered from COVID-19 ($p=0.510$) nor does it differ in terms of gender representation ($p=0.984$).

Conclusions: At the beginning of the COVID-19 pandemic, there were discussions about whether it can even be classified as a traumatic experience and whether we can talk about PTSD as a consequence of the pandemic. With this time lag, it seems that in part of the population we are finding PTSD symptoms that are a consequence of the pandemic, but to a lesser extent than research at the beginning of the pandemic suggested. Certainly, additional research is needed on this topic. Also, it is necessary to examine risk factors for possible prevention, as well as therapeutic possibilities.

Disclosure of Interest: None Declared

EPV0302

Contagion beyond the virus: A case obsessive-compulsive disorder centered on Covid-19

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Introduction: The Covid-19 pandemic has generated an unprecedented impact on multiple levels (health, occupational, economic,

and social) which affected the general population and has been an enormous stress factor for individuals with obsessive-compulsive disorder (OCD), particularly for those with contamination symptoms. Many patients, as well as healthy individuals, experienced new obsessive-compulsive-like symptoms centered on COVID-19 during the pandemic. However, data on this population are still scarce.

Objectives: To present a case exemplifying the association between the Covid-19 pandemic and the onset of OCD.

Methods: Case presentation and non-systematic review of existing literature on Pubmed using the keywords: Covid-19, OCD, pandemic, depression.

Results: We report a case of a 30-year-old female who presented to the emergency department due to depressive mood and suicidal ideation associated with exacerbation of OCD symptoms, namely intense fear of being infected with Covid-19. These symptoms led to avoidance of touching objects, surfaces or even herself in addition to frequent and long rituals of hand-washing and showers. She was asymptomatic prior to being infected with Covid-19, when she started developing obsessive ideas of contamination. She sought psychiatric support and was medicated with fluoxetine, olanzapine and clonazepam. Due to insufficient symptom control, she was admitted to the psychiatry ward, where treatment was initiated with aripiprazol and fluvoxamine. After dose titration, gradual remission of OCD symptomatology and depressive mood was observed.

Conclusions: The present case illustrates the correlation between Covid-19 and the onset of OCD symptomatology. Existing studies demonstrate that the pandemic worsened the landscape of symptoms of OCD, both in diagnosed patients as well as in previously healthy individuals. However literature is still limited thus, multi-national and cross-cultural, longitudinal studies are warranted to gain further insights on this topic.

Disclosure of Interest: None Declared

EPV0303

Online T group experiences during COVID-19 pandemic

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Introduction: Online group therapy has become more popular in the past few years. But as a result of the COVID-19-caused pandemic, it developed suddenly. Due to the conventional face-to-face format no longer being possible and the need for psychotherapists to conduct psychotherapy online, the pandemic has had significant effects on group psychotherapy and the interactions between group therapy members. While therapists are becoming accustomed to the modern form of psychotherapy, its efficacy is being questioned due to technical issues, the problem of the therapeutic alliance, the environment, the ability to read nonverbal signals, breaking group