

**Conclusions:** In this Clinical cases and others not reported exist correlation between psychotherapy work on superior defenses to social cohesion and clinical improvement.

**Disclosure of Interest:** None Declared

## EPV0520

### Euthanasia and psychiatric patients: a Spanish glance to the Dutch experience

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**Introduction:** The recent approval of euthanasia in the Spanish legal code and its possible extension to psychiatric patients opens an unprecedented scenario in the Iberian country. We analyze the experience of the Netherlands, a country where euthanasia has been in practice for over two decades, in order to foresee epidemiological trends that could be replicated in Spain.

**Objectives:** To review the legislation on euthanasia in Spain and the Netherlands, as well as the epidemiological data regarding euthanasia applicants affected by mental health conditions in the Netherlands, to predict future epidemiological trends in a similar population in Spain.

**Methods:** We studied the legislation on euthanasia in Spain and the Netherlands, as well as the directives of the Regional Commissions for Euthanasia in the Netherlands to analyze differences and similarities between the legal codes on both countries. We also sought epidemiological data regarding the application of euthanasia on psychiatric patients in the Netherlands, gathering data from seven articles in English language obtained through a search in PubMed using the MeSH terms “Euthanasia” AND “Netherlands” and “Psychiatry”.

**Results:** Euthanasia on psychiatric patients in the Netherlands has been a practice on the rise during the last decade, despite the elevated proportion of rejected applications and the high survival rate of this patients in later longitudinal studies. Affective disorders and personality disorders stand out as major psychiatric causes between the applicants. The Spanish legislation bears important resemblance to its Dutch predecessor, but also significant differences.

**Conclusions:** The available data on the application of euthanasia on mental health patients in the Netherlands show an increasing trend regarding the execution of this practice, specially on patients who gather distinct clinical features. The data provided by the Dutch experience could have some replication in Spain, as well as anticipate possible future ethical conflicts regarding the application of this service.

**Disclosure of Interest:** None Declared

## EPV0521

### Socio-demographic characteristics and clinical profile among suicide attempters

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**Introduction:** Suicide is a real public health problem. Like many other countries, Tunisia seems to be experiencing an amplification of the phenomenon. Suicide attempts are much more frequent and are estimated to be around 20 times the number of suicides

**Objectives:** The objective was to describe the sociodemographic characteristics and clinical profile of suicide attempters in patients hospitalized in the emergency room.

**Methods:** This study was carried out with patients admitted to vital emergencies for attempted suicide over a period of 6 months.

A pre-made questionnaire was used to collect sociodemographic and clinical data. We used the SIS “suicide intention scale” to assess the intent of the suicide attempt and the PHQ9 “PATIENT HEALTH QUESTIONNAIRE” to assess the presence and severity of depressive symptoms.

We excluded Patients with major cognitive impairment, which prevents understanding of the questionnaire.

**Results:** Our sample consisted of 101 patients. Of the participants, 69.3% were female. Their age varied between 18 and 65 years with an average age of 30.93 years. The socioeconomic level was low in 23.8% of cases. The level of education did not exceed secondary school for 91% of suicides. Almost half of suicide attempters (45%) have been professionally inactive. Participants included in our study were single in 51.5% of cases. Participants had a family history of attempted suicide in 15% of cases. Prior psychiatric follow-up was found in 34% of suicides attempts. More than a third (36.6%) of participants had moderate to severe depression according to the results of the PHQ-9. Recurrences concerned 44% of suicides attempt in our survey and the average number of previous suicides attempts was 3.9. Suicidal intent was rated strong in 47% of suicides attempts .

**Conclusions:** Suicidal behavior is one of the leading causes of death and disability worldwide. In our study, more than 1 in 3 suicide attempters had depression. Further research is needed to identify suicide risk factors and to examine the relationship between the presence of mental illness and suicidal attempt

**Disclosure of Interest:** None Declared

## EPV0522

### Post-war Azerbaijan: Burnout in mental health professionals working with war-affected populations

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**Introduction:** Burnout is a result of emotional exhaustion and lack of motivation after prolonged exposure to chronic emotional

and interpersonal stressors at work. (Black et al. SAGE 2020, 609-611)

For the past decade, it has been one of the actual areas of research globally. (Ahola et al. Journal of affective disorders, 88, 2005; 55–62; Ahola et al. Journal of affective disorders, 104, 2007; 103–110, Shirom, A. Work Stress, 19, 2005; 263–270, Toker et al. The Journal of Applied Psychology, 97, 2012; 699–710.) However, a small number of studies exploring burnout have been conducted in Azerbaijan.

The requirement for supportive interventions for workers with an aim to improve the quality of care and prevention of burnout related to health and sociocultural problems such as difficulties in their personal life, job-shifts has led us to conduct this study.

Above all, the Second Karabakh war that took place in 2020 increased the population of patients that are in urgent need of psychiatric and psychological support.

**Objectives:** The purpose of this study is to examine the level of burnout among all mental health workers who have been closely working with veterans and families of deceased soldiers. Similarly, the study is intended to evaluate the impact of various factors, such as secondary traumatic stress, effort-reward imbalance, and socio-demographic variables leading to burnout.

**Methods:** The study design is cross-sectional. 22-item Maslach Burnout Inventory (MBI) is used to measure the level of burnout. Intrusion, avoidance, and arousal symptoms triggered by indirect exposure to traumatic events are evaluated by the 17-item Secondary Traumatic Stress Scale (STSS). 22-item Measurement of the effort-reward imbalance (ERI) is used to define the level of effort, reward, and over-commitment. Demographic questionnaires consist of age, sex, marital status, professional background, years of employment, workload in hours.

**Results:** The sample size has been estimated as 200 participants. Associations between occupational exhaustion, depersonalization, personal accomplishment assessment, intrusion, avoidance, arousal, effort, esteem, job promotion, job security, overcommitment and professional background, workload in hours will be explored in the current study.

**Conclusions:** The findings upraised will promote elaborating personalized approaches toward burnout prevention treatment.

**Disclosure of Interest:** None Declared

## EPV0524

### Medical Fitness in workers suffering from mixed anxiety-depressive disorders:

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**Introduction:** Anxiety and depressive disorders are major public health problems associated with multiple adverse occupational outcomes, including unemployment, reduced productivity, and absenteeism.

**Objectives:** To study the socio-professional and medical characteristics of workers with mixed anxiety -depressive disorders and to evaluate their impact on work ability.

**Methods:** A descriptive and retrospective study conducted in the occupational medicine department at Charles Nicolle Hospital, involving all the medical records of workers suffering from mixed anxiety –depressive disorders that were referred for a medical opinion of fitness for work from January 1, 2014, to December 31, 2020.

**Results:** The study included 62 females and 20 males diagnosed with mixed anxiety-depressive disorders with a mean age:  $41.4 \pm 8$  years. The average professional seniority was  $12.8 \text{ years} \pm 7.8$  years. The most auspicious occupational sectors for these disorders were health (41%) and communication (30%). Most of these workers (62%) were fit for work with professional restrictions (10 workers to positions with a lower mental load and 20 exclusions from night shift work), though 12% were declared unfit for work temporarily. Twenty-one workers were fit to continue working and one worker was unfitted to work.

The overall prevalence of mixed anxiety –depressive disorders was found to be significantly elevated in female patients ( $p: <0.001$ ).

**Conclusions:** The decision of medical fitness for work among workers with psychiatric disorders considers their physical and mental capacities as well as the conditions in which the work is carried out, aiming to annihilate the risk of psychic imbalance. Thus, an adjustment of workstations can be an important determinant in the prevention of psychosocial risks.

**Disclosure of Interest:** None Declared

## EPV0525

### MEDICAL FITNESS IN WORKERS WITH PSYCHIATRIC DISORDERS

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**Introduction:** Mental health disorders are among the most burdensome health concerns in the world; it affects more than 970 million people in 2019. These disorders deteriorate all aspects of life, especially the professional field, impacting mainly physical capability, daily functioning, and productivity among the working-age population.

**Objectives:** To study the socio-professional and medical characteristics of workers with psychiatric disorders and to assess the repercussions of these pathologies on work ability.

**Methods:** A descriptive and retrospective study included all the medical files of workers with psychiatric disorders who were referred to the occupational medicine department at Charles Nicolle Hospital for a medical opinion of fitness for work during the period from January 1, 2014, to December 31, 2020.

**Results:** The average age of the 224 cases collected was  $41.74 \pm [25-60 \text{ years}]$  with a sex ratio of 0.67. The average professional seniority was  $13.4 \text{ years} \pm 8.27$  years. The most common occupational sectors were health (38.1%) and communication (20.2%). The patients were mainly suffering from either an anxiety-depressive disorder (36.6%) or psychosis (11.6%). These included