Objectives: To study the impact of psychoaffective diseases on the fitness for night or/and shiftwork

Methods: A descriptive cross-sectional study was conducted with patients with psychoaffective disorders working atypical hours who have consulted the Occupational Medicine Department of the Charles Nicolle Hospital for statements of medical fitness. The study period was six years from January 2016 to June 2022.

Results: Among 224 employees who had shift/night work, 32.1% (n=76) had psycho-affective disorders. The average age was 43.3±8.64 years. The sex ratio (M/F) was 0.46. The average professional seniority was 17.35±9.17 years. The most represented sectors were: health (56%), the electronics industry (5%), finance (5%) and the plastics industry (5%). The most occupied jobs were: nurses (21%), blue collar workers (20%), senior technicians (20%) and security guards (8%). Psychiatric pathologies were represented by anxiety disorders (80%), psychoses (8%), schizophrenia (8%) and bipolar disorders (4%). The consultants were on medication in 88% of cases. Antidepressants were prescribed in 75% of cases, followed by anxiolytics (54%), antipsychotics (22%) and thymorregulators (4%). Concerning the medical fitness for work of the patients, a definitive eviction from shift/night work was indicated in 56% of cases.

Conclusions: A medical assessment of the fitness to work on atypical schedules for workers with psychiatric disorders is required, in particular, during the employment medical examination.

Disclosure of Interest: None declared

Post-Traumatic Stress Disorder 02

EPP0723

Translation and validation of Greek version of the Pandemic Grief Scale

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doi: 10.1192/eurpsy.2023.1015

Introduction: Those who have lost loved ones to COVID-19 may be considered at risk of complicated grief. A 5-item mental health screening tool called the Pandemic Grief Scale (PGS) was developed to find likely instances of dysfunctional grief during the pandemic.

Objectives: To develop a Greek version of PGS and to explore the validity and reliability among the general population in Greece in order to further use it as clinical mental health screener.

Methods: We conducted a cross-sectional study between January and April 2022, and 342 persons were recruited. The questionnaire included socio-demographic parameters, the PGS, the Brief Resilience Coping Scale to capture tendencies to cope with stress and the Athens Insomnia Scale to assess the insomnia symptoms. Based on experiences over the previous two weeks, each PGS item is scored on a 4-point scale, from 0 (not at all) to 3 (almost every day), with higher rating and a cut-off of 7 indicating dysfunctional grief. Prior to the psychometric validation a linguistic validation and adaptation in Greek was performed.

Results: A total of 342 patients participated in the study, 67.8% were females and 27.8% were 18-30 years old. Coefficient Validity Ratio (CVR) results showed that 100% (n=5) of items were acceptable. Value of Cronbach’s alpha was found 0.848. A one-factor model was conducted by Confirmatory Factor Analysis (CFA), giving acceptable global fit indices. The resulting global fit indices [Standardized Root Mean Square Residual (SRMR) = 0.037, Comparative Fit Index (CFI) = 0.952, Tucker–Lewis Index (TLI) = 0.903] showed that the 5 items in one-factor solution proposed by the primary researchers shouldn’t be rejected for the Greek version. The Bartlett Test of Sphericity was 758.08 (p <0.001). The Kaiser-Meyer-Olkin Measure of Sampling Adequacy was 0.826, showing that the data is suitable for factor analysis. The one-factor solution derived in our study consisted of 5 items. The total explained variance was 64.3%.

Conclusions: The findings of this research support the PGS psychometric validity and reliability. PGS is suitable to be used in healthcare to identify and assist individuals, who are experiencing this type of pandemic-related dysfunctional grief as it is a screening tool that it’s simple to use, access, and understand.

Disclosure of Interest: None declared

EPP0724

Post-Traumatic Stress Disorder and participation in daily life: The pilot study of participation patterns and affecting factors

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Introduction: Post-Traumatic Stress Disorder (PTSD), with prevalence of 14%, causes disability and burden to the person, his/her close environment and whole society due to, among other factors, interruption in a range of daily life activities. To date little research was done to delineate comprehensive patterns of daily life participation among people with PTSD. Despite extensive research, our understanding of factors affecting the participation in PTSD is limited, given that relief in the PTSD symptoms does not guarantee returning to satisfying daily life activities.

Objectives: Investigate objective and subjective participation dimensions among individuals with PTSD in comparison to healthy controls; and explore the impact of personal and illness-related factors, body functions and environment on the participation in PTSD.

Methods: Sixty two individuals with PTSD (age: M=34.3, SD =9.2; women: 24, 77.4%) and matching by age and gender healthy controls participated in this cross-sectional study. They completed standard assessments for PTSD symptoms severity, general cognitive profile, executive functions (EF) based on self-report and performance, sensory processing, self-efficacy, capacity to perform everyday activities, environmental properties, and actual participation in daily life in objective (number of activities, frequency,