women are more hostile than men are (6.3±2.7 vs 5.1±2.3; p=0.000). Respondents under the age of 30 are more likely than older people to have interpersonal problems (p=0.286, p=0.000), as well as signs of depression (p=0.216, p=0.000), hostility (p=0.226, p=0.000) and psychoticism (p=0.203, p=0.000). Respondents' low income is statistically associated with interpersonal problems (p=0.139,p=0.001), anxiety (p=0.131, p=0.002), hostility (p=0.156, p=0.000), psychoticism (p=0.137, p=0.001), and suicidal intentions (p=0.152,p=0.000). Among respondents whose relatives had COVID-19, signs of anxiety disorders (7.2±3vs3.5±2.9;p=0.027) and obsessive disorders (8.1±3.2 vs 7.3±2.6; p=0.029) were significantly more common than in the whole sample.
Conclusions: The study highlights socio-demographic factors of vulnerability to psychopathological symptoms in the COVID-19 pandemic context, which should be taken into account when organizing medical and psychological assistance to the population.

Keywords: COVID-19; Psychopathological symptoms; SCL -32

EPP0453

Interrelation between job satisfaction and self-regulation resources in professionals under work stress due to the COVID-19 pandemic

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Introduction: The problem of job satisfaction connected with work efficiency and psychological well-being of professionals is especially actual in stress conditions due to COVID-19 pandemic. The stress has a negative effect on job satisfaction (Singh et al., 2019). The one of the most important criteria for successful activities is a job satisfaction (Burić & Moè, 2020). The highest level of job satisfaction can be achieved by the high adaptive potential of professionals, who have a diverse arsenal of self-regulation resources and apply them adequately to working conditions (Kuznetsova et al., 2019).
Objectives: The study was held in 45 professionals from different fields, who work remotely during the self-isolation due to COVID-19 pandemic and aimed to estimate the correlation between job satisfaction and self-regulation resources of professionals under work stress.
Methods: The assessment methods included: 1) test "Job Satisfaction" by V.A. Rozanova 2) S. Hobfoll's "SACS" 3) Ch. Spilberger's "Trait Anxiety".
Results: The results revealed an average level of anxiety with a tendency to growth. Avoidance, asocial and aggressive behaviour are frequently used. The direct correlation between the level of job satisfaction and such a resource of self-regulation as a search for social contact was revealed (r=0.291; p=0.049). The general level of anxiety is directly related to avoidance (r=0. 374; p=0.011), manipulative (r=0.343; p=0.021) and aggressive actions (r=0.343; p=0.021), and negatively correlates with assertive actions (r=-0.703; p=0).
Conclusions: The results of the study can be used to develop programs to improve the psychological well-being and performance of employees working under stress due to COVID-19 pandemic.

Keywords: COVID-19; stress; anxiety; job satisfaction; self-regulation resources; coping behaviour

EPP0454

The interaction between the perception of danger from coronavirus and the severity of burnout syndrome in medical workers during the COVID-19 pandemic in Russia

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Introduction: The COVID-19 pandemic has become a major challenge for both the overall health system and the individual ability for health professionals to stress coping.
Objectives: To find the link between the perception of danger from coronavirus and the severity of burnout syndrome in medical workers during the COVID-19 pandemic in Russia.
Methods: We used a socio-demographic questionnaire (20 questions), a Stress Perception Questionnaire (Linville, 1987; Ababkov et al., 2016), a Modified Pandemic Perception Questionnaire (Broadbent et al.,2006;Yaltonsky et al., 2017), and Maslach Burnout Inventory (Maslach et al., 1996; Lozinskaya et a. 2007). 249 medical workers (58 men and 191 women) took part in the online survey between April 27 and October 26 in Russia.
Results: The severity of stress is positively correlated with the perception of pandemic as threatening (r=0.532, p=0.000) and unknown disease (r=0.297, p=0.000). Stress severity also correlates with all burnout parameters: exhaustion (r=0.737, p=0.000), depersonalization (r=0.342, p=0.000), and belief in personal achievement (r=-0.417, p=0.000). The perception of pandemics as threatening events is significantly associated with exhaustionm (r=0.458, p=0.000), depersonalization (r=0.133, p= 0.036), and belief in personal achievement (r=-0.152, p=0.016).The feeling of uncertainty from the pandemic is statistically significantly associated with exhaustion (r=0.242, p=0.000), while the feeling of control over the pandemic is positively associated with belief in personal achievements (r=0.129, p=0.042) and negatively associated with exhaustion (r=-0.161, p=0.011) and depersonalization (r=-0.125, p=0.049).
Conclusions: Uncertainty and a sense of threat from the coronavirus and the pandemic are significant factors of stress and emotional burnout for health workers. To determine the interaction between parameters such as signs of burnout, perception of the COVID-19 pandemic and the severity of stress, further construction of a structural model is required.

Keywords: COVID-19; medical workers; burnout; perception of pandemic COVID-19

EPP0455

The interaction between personality traits and dysfunctional breathing during the COVID-19 pandemic in Russians

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Introduction: The COVID-19 pandemic situation creates specific conditions for increased anxiety and increased attention to respiratory sensations. This can become a favorable ground for the occurrence of dysfunctional breathing. Dysfunctional breathing is a pattern of breathing that does not meet physiological needs and can lead to respiratory, cardiovascular, digestive disorders and neurological dysfunctions (Chaitow et al.,2014)
Objectives: The aim of the study is to identify "personality predictors" for the occurrence of dysfunctional breathing in the Russian population during the COVID-19 pandemic.
Methods: The author's socio-demographic questionnaire, the Naimigen Questionnaire (VanDixhoorn, Duivenvoordent, 1984), HEXACO-PI-R (Ashton, Lee, 2017; Egorova, Psrshikova, Mitina, 2019), and The State-Trait Anxiety Inventory (Spielberger, 1983; Leonova, 2013) were used. The study was conducted online from April 27 to May 27. 582 people from all regions of Russia attended it, including 496 women and 86 men aged 18 to 64 years.
Results: Dysfunctional breathing has a direct correlation with personal anxiety (r=0.543, p=0.000) and emotionality (r=0.370, p=0.000), as well as a negative correlation with the personality traits of Honesty/ Humility(r=-0.153, p=0.000), Extraversion (r=-0.247, p=0.000), Agreeableness (r=-0.226, p=0.000), and Conscientiousness (r=-0.128, p=0.002).
Conclusions: Thus, in the COVID-19 pandemic context, dysfunctional breathing was detected in people with increased trait anxiety and pronounced emotionality, as well as in people with hostility and low conscientiousness/organization, as well as in introverts and those who are inclined to demonstrate social status. The occurrence of dysfunctional breathing during a pandemic can be interpreted as a sign of coronavirus disease by those people, which can motivate them to seek medical help, and thus increase the burden on the healthcare system.

Keywords: personality traits; HEXACO; dysfunctional breathing; COVID-19 pandemic

EPP0456

Portuguese version of the COVID-19 perceived risk scale – psychometric study

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Introduction: Risk perception of COVID-19 is potentially a significant determinant of the pandemic evolution and the public's response to it. Acceptable levels of risk perception can be considered good for people to effectively fight the pandemic and adopt preventive health behaviors while high levels of risk perception may be damaging. Recently, Yıldırım&Güler (2020) developed the Covid-19 Perceived Risk Scale (C19PRS) to measure this construct.
Objectives: To analyze the psychometric properties of the C19PRS Portuguese version, namely construct validity, internal consistency and convergent validity.
Methods: A community sample of 234 adults (75.6% women; mean age= 29.53±12.51; range:16-71) completed an on-line survey with the Portuguese versions of the CPRS and the Fear of Covid-19 Scale (FCV-19S; Cabaços et al. 2020). The total sample was randomly divided in two sub-samples: sample A (n=117) was used to perform an exploratory factor analysis/EFA; sample B (n=117) to make a confirmatory factor analysis/CFA.
Results: EFA resulted in three components. CFA revealed that the second-order model with three factors presented good fit indexes (X2/df=1.471; CFI=.959; GFI=.948; TLI=.932; p[RMSEA≤.01] =.065). CPRS Cronbach alphas was α=.687; for F1 Worry, F2 Susceptibility to Covid-19 and F3 Susceptibility to Overall Morbimortality were α=.747, α=.813 and α=.543, respectively. The total and dimensional scores significantly correlated with FCV-19S (r>.30, p<.01).
Conclusions: This study provides evidence for the validity and reliability of the Portuguese version of CPRS, which will be used in an ongoing research project on the relationship between Covid-19 perceived risk, perfectionism, cognitive processes and adherence to public health measures to contain the pandemic.

Keywords: CFA; COVID-19; Perceived Risk Scale; EFA

EPP0457

Distress and burnout among psychiatrists during the COVID-19 pandemic

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Introduction: COVID-19 is an infectious disease caused by SARS-CoV-2. The WHO on March 11, 2020, has declared the novel coronavirus outbreak a global pandemic. Several studies found an association between the COVID-19 pandemic and psychiatric symptoms, such as distress, anxiety, fear of infection, depression and insomnia in the general population. Therefore, psychiatrists have been professionally overloaded, trying to manage the psychosocial impact of the pandemic and suffering its effects in person.
Objectives: To evaluate the disease perceptions, distress and burnout among psychiatrists from the Department of Mental Health and Addictions of Pavia in three different times, which correspond to the three main phases of the pandemic management in Italy: T0 is the first peak of the infections and the lock-down, from March to June; T1 is the reduction of the infections and the reopening, from June to October; T2 is the second wave of infections with a new progressive closure, the current one.
Methods: We used three questionnaires: the BIPQ (Brief Illness Perception Questionnaire), the PSS-10 (Perceived Stress Scale-10), the PED (Profile of emotional distress). We also used a survey