

these findings with data from a survey conducted 10 years ago. Attitudes toward restraint were not significantly associated with gender, age, or years of service. However, staffs who exhibited less prejudice toward mental illness-related crime were less likely to find restraint necessary. Compared to 10 years ago, there was little change in the need for restraint in cases of physical violence (both toward patients and staff), but the need for restraint in response to verbal violence (toward both patients and staff) had decreased. The perceived burden, both legal and medical, associated with the use of restraint had increased.

Results: Attitudes toward restraint were not significantly associated with gender, age, or years of service. However, staff who exhibited less prejudice toward mental illness-related crime were less likely to find restraint necessary. Compared to 10 years ago, there was little change in the need for restraint in cases of physical violence (both toward patients and staff), but the need for restraint in response to verbal violence (toward both patients and staff) had decreased. The perceived burden, both legal and medical, associated with the use of restraint had increased.

Conclusions: Psychiatric hospital staffs with less prejudice toward mental illness-related crime were less likely to perceive a need for the use of restraint. Compared to 10 years ago, the necessity of restraint in cases of verbal violence has decreased, which may be attributed to ongoing human rights education and increased legal and medical concerns. These findings provide important insights for future policy development aimed at promoting humanitarian approaches, such as non-restraint treatments.

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EPV0937

The Impact of Night Shift Work on Mental Health Outcomes in a Tunisian Industrial Setting

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Introduction: The increasing prevalence of shift work, particularly night shifts, in modern industrial settings has raised concerns about its potential detrimental effects on workers' health. Disruptions to circadian rhythms, sleep deprivation, and social isolation associated with night shift work have been linked to a range of physical and mental health problems.

Objectives: This study aims to investigate the specific impact of night shift work on the mental health outcomes of Tunisian industrial workers.

Methods: This is a cross-sectional study carried out during 3 years among active workers working in the inter-company occupational

health services of Sousse. All participants had a fixed night work schedule. Data collection was based on a pre-established anonymous questionnaire. Job strain was assessed with Karazek questionnaire.

Results: A total of 453 employees were included in our study. Mean age was 32.12 ± 7.68 years. Half of the participants were women (52%). Sixty percent of participants were not married. Tobacco consumption was identified among 26% of the participants. The most affected sector of activity was the electronic one (63%). The average occupational seniority was 7.78 ± 6.407 . Job strain was revealed in 23.4% of employees. High psychological demand was noted among 46.5% of cases. Low job control was identified among 57.4% of participants. Low social support was noted among 68% of participants.

Conclusions: These results underscore the need for targeted interventions to protect the health and well-being of night shift workers. Future research should explore the effectiveness of various strategies, such as scheduling modifications, workplace accommodations, and health promotion programs, in mitigating the negative impacts of night shift work.

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EPV0938

Mental well-being of medical students and the need for mental health care in the dynamics of 2020-2024 years

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Introduction: Research has consistently highlighted the vulnerability of medical students to poor mental health and wellbeing. The COVID-19 pandemic has further exacerbated this issue. However, there is limited understanding of medical students' mental well-being dynamics after the pandemic.

Objectives: The aim of the study was to comparatively analyse the mental wellbeing and mental health needs of medical students in comparison with those during the COVID-19 pandemic.

Methods: An anonymous structured online survey was conducted among students of a medical institute in St. Petersburg, Russia. The sample included responses from 152 students (76.3% women) of all courses of study. The results were compared with the data of a survey conducted at the same institute in 2020 (Chumakov *et al.* Middle East Curr Psychiatry 2021;28, 38).

Results: The majority of respondents (n=145; 95.4%) reported experiencing significant stress in their lives (95.8% in 2020). The main sources of stress included education-related factors (83.6%), uncertainty about the future (72.4%), financial problems (48.0%), intimate/family relationships (46.7%), work (27.6%), and housing problems (19.1%). Thirteen students (8.6%) reported that they had been diagnosed with a mental health disorder prior to enrolling in the institute (6.1% in 2020; p=0.393). Twice as much students (n=27; 17.8%) were diagnosed with mental disorders during institute studies (15.2% in 2020; p=0.53). The mental disorders reported by the respondents were dominated by depressive disorders (n=7), anxiety disorders (5), mixed anxiety and depressive disorder (5), ADHD (5), bipolar disorder and cyclothymia (3). At the time of the study, 26 students (17.1%) were being seen by a mental health

professional (10.9% in 2020; $p=0.111$), the same number of students were taking any prescribed medication for mental health (10.9% in 2020; $p=0.111$). One-third of respondents ($n=53$; 34.9%) had taken non-prescription medication in the last year to improve their well-being or mood (27.3% in 2020; $p=0.143$), and 45 (29.6%) had taken medication in the last year to improve concentration or academic performance (38.3% in 2020; $p=0.107$).

Conclusions: The study showed high mental health care needs among medical students with a tendency to self-medication. Notably, mental health indicators have not improved since 2020 despite the end of the COVID-19 pandemic. Our findings highlight consistent trends in medical students' mental health and underscore the need for targeted interventions to support this vulnerable population.

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EPV0939

Breaking the barrier: stigma, psychiatric disorders and life-threatening risks in healthcare: case report

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Introduction: The existing studies found that stigma expands also among healthcare professionals when it comes to psychiatric patients, where a particular group is represented by substance use disorder patients, who are often perceived as manipulative, irresponsible or non-compliant.

Objectives: The aim of this case presentation is to emphasize the importance of stigma reduction especially among healthcare professionals.

Methods: A 26-year-old female patient with medical history of treatment-resistant epilepsy and misuse of cannabis and alcohol was brought into the Psychiatry ward after multiple grand-mal seizures, which occurred after weeks of daily use of alcohol and no adherence to the medical treatment.

Results: Prior to the admission, the patient was directed to the Neurology ward, where the hospitalization was declined due to her psychiatric history and the multi-drug test result, which turned positive for THC.

On the first day after admission, the patient had two seizure episodes, lasting 10 and respectively 30 minutes, after which she was transferred to the ICU department, where she was stabilized. Therefore, she returned to the psychiatric ward, where the patient enters status epilepticus, for which she underwent a neurological examination and received emergency treatment successfully.

The following day, the patient presents another episode of status epilepticus, after which she does not recover her respiratory function spontaneously and suffers cardiac arrest. The resuscitation protocol was initiated, an Emergency Medical team was requested to take over. After 4 minutes of CPR, the patient became pulmonary and hemodynamically stable.

Conclusions: Stigma is one of the factors that can influence the quality of the healthcare services provided by physicians. In the given case, stigma led to a life-threatening scenario, in which the patient was denied to receive adequate neurological treatment due to cannabis and alcohol use disorder. The impact of stigma on

healthcare delivery and the barriers to receiving adequate treatment in these cases emphasize the need for training and education for all healthcare professionals.

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EPV0940

A naturalistic study on physiotherapy in acute psychiatric service

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Introduction: There is clear evidence on the physical and psychological benefits of a bodily approach for the treatment of psychiatric disorders. They can have a significant impact on the patient's perceived suffering (Carek et al. IJPM 2011; 41(1) 15–28). In January 2024, a Physiotherapy Project started at the Acute Psychiatric Service of the Rieti ASL in collaboration with the Physical and Rehabilitation Medicine service.

Objectives: Evaluate the impact of the physiotherapy program on psychopathological dimensions and on the patients subjective well-being.

Methods: The naturalistic study was conducted on subjects consecutively hospitalized at the SPDC from January to June 2024 who voluntarily joined the physiotherapy activity. The intervention was administered with bi-weekly sessions of about 45 minutes and included: stretching, orientation exercises, active movement, coordination, muscle strengthening. The Exclusion Criteria were: sedation status, disorganization, behavioral problems. The General Health Questionnaire-12 (GHQ-12) and the Brief Psychiatric Rating Scale (BPRS) were administered at admission (T0) and discharge (T1). A Self-evaluation of the usefulness of the program was administered only to discharge (T1): participants answered by choosing between "not useful", "partly useful", "very useful" to 4 questions on the usefulness of the intervention.

Results: Thirty-five participants (17 M, 18 F; mean age 38.2 ± 15.4) were admitted to physical activity. They received the following diagnoses: 48.6% Psychotic Disorder, 20% Depressive Disorder, 2.9% Bipolar Disorder, 28.6% Personality Disorder. Eleven of 35 participants had comorbid substance use disorder (14.3% alcohol, 5.7% cocaine, 5.7% cannabis, 2.9% opioids, 2.9% other substances). The hospitalization time was 11.8 ± 4.3 and the average number of physical sessions was 1.7 ± 0.8 . The BPRS (44.4 ± 11 vs 25.9 ± 4.5 ; $F=1024.25$; $p<0.001$) and GHQ-12 (24.6 ± 4.9 vs 15.11 ± 5.8 ; $F=833.43$; $p<0.001$) mean scores significantly improved in two time of evaluation (T0 and T1).

	very useful	partly useful	not useful
How useful was it for you to practice physiotherapy during your hospitalization?	46,2%	53,8%	
How much has it helped you manage anxiety?	65,4%	34,6%	
How much has it helped you muscle tension?	73,1%	19,2%	7,7%
Did participating in the group improve your mood?	61,5%	30,8%	7,7%