

Objectives: To illustrate two approaches for cancer accompaniment in patients with schizophrenia.

Methods: We present two case-report and literature research of the topic.

Results: Case A. A 49 y.o. woman diagnosed with a schizoaffective disorder. In the last years she had difficulties to manage her selfcare, so her mental health providers linked her to an individualized community nurse, who later played a crucial role in helping the patient during the diagnosis and treatment of a breast cancer. Case B. A 37 y.o. man diagnosed with schizophrenia, who was very integrated in a peer-support organization. After being diagnosed with a Lymphoma, he continued participating in all the group activities (theatre, collaborative radio, painting) until his decease. Sharing the process with other patients not only improved his quality of life but also helped the group to manage the grief.

Conclusions: - Individualized support with a mental health nurse could enhance the communication between the oncologist and mental health providers, improve the symptoms management, and allow psychological support. - Peer-support can prevent social isolation, improve the quality of life and the management of the oncologic treatment.

Disclosure: No significant relationships.

Keywords: peer-support; schizophrenia; oncology

EPV0434

Cancer and the threat of death

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Introduction: Fear of death is somehow a normal sensation. Though for those having a cancer, it could increase the burden of the disease and have negative psychological impacts. This death anxiety isn't easily verbalized by patients, thus it's important for caregivers to manage it to improve those patients' quality of life.

Objectives: Assess death anxiety in cancer patients and to identify factors that may influence it

Methods: Our study was a cross-sectional descriptive study with an analytical focus on quantitative specifications. It targeted patients hospitalized at the oncology department or consultant at the day hospital of the regional hospital of Gabes, Tunisia. Participants completed a questionnaire including sociodemographic and clinical data, using HADS scale for anxious and depressive symptoms and DAS scale for death anxiety.

Results: One hundred and twenty patients were enrolled in the study. The average age of participants were $54, 9 \pm 11, 8$ years. The majority of patients were married (68.3%) and had an average socioeconomic level (74, 2%). Our results showed that 43, 3% of patients had a high death anxiety score. Higher level of threat of death, were found in older patients ($p=0.028$), females ($p=0.018$) and for those having children ($p=0,01$). Death anxiety were also higher in patients having anxiety ($p=0.007$) and those having depression ($p=0.033$).

Conclusions: The degree of death anxiety among cancer patients seems important. Its assessment and resolution by the caregivers

remains paramount. The identification of this death anxiety should optimize the overall care of the patient.

Disclosure: No significant relationships.

Keywords: cancer; death anxiety; mental health

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Personal resources providing stress resistance of hospice medical workers

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Introduction: The functional approach to the study of stress resistance allows us to distinguish two blocks of resources – the “active” one, which includes the analysis of the content, conditions, subject and means of labor, and the “personal” one, which considers values, motivation and the expressiveness of personal qualities that contribute to the stress resistance (Granek, Buchman, 2020; Cross, 2019; Powell et al., 2020; Hernández-Marrero, Fradique, 2019).

Objectives: The objective of our work was to study the relationship between the personal and motivational characteristics of hospice employees with the different symptoms of professional burnout as an indicator of a reduced stress resistance.

Methods: 62 hospice medical employees with an average work experience of 4,5 years took part in the survey. They were asked to fill out questionnaires to diagnose the burnout symptoms, a motivational personality profile and to assess themselves by the personal semantic differential.

Results: By the means of the procedure for determining the extreme groups ($M \pm \sigma$), two groups of respondents were identified, which are characterized by different degrees of burnout symptoms. The results of the comparative analysis showed that the less advantaged respondents from the burnout perspective are focused on the life support, comfort, social status, which indicates a certain rationality in the choice of this job.

Conclusions: The portrait of a professionally successful hospice employee includes an orientation towards communication, social and creative activity, which is complemented with independence, confidence and decisiveness – the features that allow carrying out their work in stressful conditions and mainly in uncertain situations.

Disclosure: No significant relationships.

Keywords: hospice medical workers; personal resources; stress resistance; professional burnout

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The role of alexithymia on psychological resilience in women with breast cancer

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