

mg/d] studies were pooled. In MDD, add-on CAR to antidepressant treatment was evaluated against PLB in two studies [NCT03738215: 1.5 and 3 mg/d; NCT01469377: 1-2 mg/d and 2-4.5 mg/d].

Least square (LS) mean changes were analysed using Mixed Model Repeated Measures: from baseline (BL) to Week 6 in the Positive and Negative Syndrome Scale (PANSS)-derived Marder anxiety/depression factor items (schizophrenia); from BL to Week 6 in the Montgomery-Åsberg Depression Rating Scale (MADRS) total scores (bipolar depression); and from BL to Week 6 [NCT03738215] and Week 8 [NCT01469377] in MADRS total score (major depressive disorder).

Results: Altogether, 1466 SCH (PLB=442, CAR=1024) patients were included in the pooled analysis. In the BD analysis, data from 1383 (PLB=460, CAR=923) patients were pooled. In the MDD trials, there were 502 CAR (1.5mg/d=250, 3 mg/d=252) and 249 PLB-treated patients [NCT03738215], and 544 CAR (1-2 mg/d=273, 2-4.5 mg/d=271) and 264 PLB patients in the other study [NCT01469377]. In SCH, CAR achieved significantly greater reductions than PLB on the Marder anxiety/depression factor domain (LS mean change: PLB= -2.66, CAR= -3.26, $p<0.01$): the effect was driven by 3 out of 4 items. In BD, CAR yielded significantly greater improvement on the MADRS compared to PLB (LS mean change: PLB= -12.05, CAR= -14.69, $p<0.001$), which was driven by 9 out of 10 items. In MDD [NCT03738215], CAR 1.5 mg/d add-on significantly alleviated depressive symptoms compared to PLB (LS mean change: PLB= -11.5, CAR 1.5mg/d= -14.1, $p<0.01$), while in the other MDD trial [NCT01469377], CAR 2-4.5 mg/d add-on produced significantly greater reductions than PLB (LS mean change: PLB= -12.5, CAR 2-4.5 mg/d= -14.6, $p<0.01$).

Conclusions: These findings indicate that CAR is an effective treatment option for the treatment of depressive symptoms independent of disease (in SCH, BD and MDD), being a transdiagnostic broad-spectrum treatment option.

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EPP0349

Risk factors of professional burnout for nurses, health technicians and midwives at the beni mellal regional hospital, Morocco

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Introduction: Burnout is a topical issue, which concerns all fields and more particularly our health field.

Objectives: Our descriptive study aims to evaluate the prevalence of burnout and describe its risk factors among nurses, health technicians and midwives in the regional hospital of Beni Mellal. It is being carried out from February to June 2022, with 113 participants.

Methods: Given the nature of our research, the data collection tool consists of two questionnaires, the first to study personal, professional data and risk factors for burnout, and the second to assess burnout among our participants, based on the MBI in its French version.

Results: Our study showed that burnout affected more than three quarters of our sample, 59.3% of them had high emotional exhaustion, 26.5% had high depersonalization and 41.6% had low personal accomplishment.

The occurrence of this syndrome was the result of several risk factors, the most frequent being: stress related to the Covid-19 pandemic, poor organization and management of services, insufficient means and personnel, lack of recognition and motivation, unsatisfactory salary/effort, degraded interpersonal relations and confrontation with suffering.

Conclusions: In conclusion, burnout is a palpable reality among nurses, health technicians and midwives. Our alarming results must lead to the implementation of preventive actions while insisting on the organization of work and the valorization of the Moroccan caregiver.

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EPP0350

Associations between psychosocial factors and work ability in a Tunisian electricity and gas company

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Introduction: Work ability can be influenced by numerous factors, particularly psychosocial ones. These latter can be individual psychosocial factors but also psychosocial factors at the workplace.

Objectives: This study aimed to explore psychosocial determinants of work ability among workers in a Tunisian electricity and gas company.

Methods: We conducted a cross-sectional survey among 83 male workers in a Tunisian electricity and gas company. We used a self-administered questionnaire that included socio-demographic profile, psychosocial factors assessment through the Job content questionnaire (JCQ) and General Health Questionnaire (GHQ-12), and Work Ability Index (WAI) questionnaire. Data were analysed using SPSS software. We used the student's test to compare means between two groups.

Results: The mean WAI score among workers in the studied electricity and gas company was 8.96 (SD=1.37). At the time of