

sectors were the chemical industry (20 studies) and the leather industry (21 studies). Atmospheric concentration of OS was measured in 20 studies. A mixture concentration index was calculated in 70 cases, it did not comply with the standard in 30 cases. Pathologically, the syndrome of acquired intolerance to organic solvents had a prevalence of 1.8% to 38.2%, while the syndrome of psychic dependence had a prevalence of 8.9% to 35.3%. The prevalence of organic psycho-syndrome ranged from 0.8% to 26.5%.

**Conclusions:** Despite the methodological differences of the studies, this work can contribute to the evaluation of the extent of the problem posed by OS in the workplace for a possible implementation of an adapted preventive approach.

**Disclosure of Interest:** None Declared

## EPV0711

### Associations between occupational stress and working conditions in a shoe and leather company

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**Introduction:** Occupational stress (OS) is one of the major health hazards of the modern workplace. Poor working conditions are major occupational stressors and have a great impact on employees' well-being.

**Objectives:** This study aimed to assess the associations between OS and working conditions.

**Methods:** We conducted an exhaustive cross-sectional study among workers in a shoe and leather company. We used the Job Demand Control model of Karasek to measure occupational stress. Workers were asked about their perception of working conditions such as the noise, heat generated by certain tools and machines, fabric smells and uncomfortable workspaces. Data were analysed using SPSS software.

**Results:** The study involved 310 workers (58 men and 252 women) with an average age of  $34.2 \pm 10.3$  years. Workers reported different concerns about working conditions. The noise was the major complaint reported by 73.7% of workers. Workspaces were uncomfortable according to 48.7% of workers. Job strain and isostrain situations were found in 56.5% and 44.5% respectively. Unpleasant smell from leather products was associated with job strain ( $p=0.004$ , OR = 1.9, 95%; CI [1.2-3.1]) and isostrain ( $p=0.043$ , OR = 1.6, 95%; CI [1.03-2.6]) situations. Heat generated by certain tools and machines was associated to isostrain situation ( $p=0.009$ , OR = 2.7, 95%; CI [1.2-5.9]). Perceiving workspaces as uncomfortable was associated with isostrain situation ( $p=0.004$ , OR = 1.9; 95%; CI [1.2-3.09]).

**Conclusions:** Working conditions have an important impact on workers' mental health. Thus, improving job conditions is a key way to improve workers' health and well-being.

**Disclosure of Interest:** None Declared

## EPV0712

### Exploring the prevalence and factors associated with fatigue and quality of life in patients with Ankylosing Spondylitis

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**Introduction:** Ankylosing spondylitis (AS) is a chronic inflammatory disease that primarily affects the axial skeleton and may alter the quality of life of patients. Fatigue, one of the major clinical features of rheumatic diseases is a major clinical feature of AS, yet it has often been ignored in clinical practice.

**Objectives:** This study aims to evaluate the quality of life in AS and to address the prevalence of fatigue in this disease and its associated factors.

**Methods:** We conducted a cross-sectional study among AS patients. The Bath Ankylosing Spondylitis Functional Index (BASFI), the Bath Ankylosing Spondylitis Disease Activity Index (BASDAI), The Ankylosing Spondylitis Disease Activity Score (ASDAS) and other clinical measures were collected during the study.

We evaluated the psychometric characteristics of the Functional Assessment of Chronic Illness Therapy (FACIT)-Fatigue subscale and the AS Quality of Life questionnaire (ASQoL). P values < 0.05 were considered statistically significant.

**Results:** Sixty-two patients with AS were included in the study. The average age was 41 years [18-65]. The diagnostic delay was between 1 year and 26 years with an average of 4 years. The mean duration of the disease was  $10 \pm 8$  years. The erythrocyte sedimentation rate (ESR) was between 2 and 50 mm/hour and the C reactive protein (CRP) level was between 1 and 45 mg/l. At baseline, the mean BASFI score was  $53.9 \pm 2$ , the mean BASDAI score was  $4.5 \pm 2$  and the mean ASDAS score was  $3.9 \pm 2$ .

The mean FACIT-Fatigue score observed in these patients with AS was  $20 \pm 10.8$  and the mean ASQoL score was  $12.8 \pm 4.8$ . Severe fatigue was observed in 43.5 % of patients and poor quality of life was detected in 62.9% of patients.

In univariate analysis, fatigue was associated with the low educational level of patients ( $p=0.011$ ), with sacroiliitis stage ( $p=0.018$ ) and with ASQoL score ( $p=0.000$ ). ASQoL was also associated with a high level of ESR ( $p=0.01$ ). There was no relationship between FACIT or ASQoL and disease activity or functional status ( $p>0.05$ )

**Conclusions:** This study confirms that poor QoL and fatigue were frequent in patients with AS which can expose them to the risk of psychiatric disorders like anxiety and depression. Therefore, patients suffering from AS should be regularly evaluated for these disorders.

**Disclosure of Interest:** None Declared