

Alberta. A paired sample t-test and Chi-squared/Fisher test were deployed to assess changes from baseline to six weeks in the recovery assessment scale (RAS), brief resilience scale (BRS), and EuroQol-5d (EQ-5D), using an online questionnaire.

Results: A total of 306 service users were recruited, and 88 completed both baseline and six weeks, giving a response rate of 28.8%. There was no statistically significant change in the level of resilience, recovery and quality of life as measured with the brief resilience scale, recovery assessment scale and EQ-5D from baseline to six weeks ($p > 0.05$).

Conclusions: The study showed that there was neither an improvement nor deterioration in resilience, recovery, or quality of life status of service users six weeks post-discharge from inpatient mental health care. The lack of further progress calls into question whether the support available in the community when patients leave inpatient care is adequate to promote full recovery.

Disclosure of Interest: None Declared

EPP0593

Exploring Burnout: A Study on Psychiatric Nurses in Tunisia

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Introduction: Burnout, marked by persistent workplace stress without effective management, is particularly pertinent for psychiatry nurses, considering the nature of their work environment and its potential impact on the quality of care they deliver.

Objectives: To assess the prevalence of burnout among psychiatric nurses and to identify the socio-demographic and clinical factors associated with it.

Methods: Cross-sectional, descriptive, and analytical study conducted over the course of one month from October 11th to November 8th 2023. Participants included were psychiatric nurses working in Razi Hospital, Tunisia. We collected data using pre-established questionnaire which included socio-demographic and clinical data of the participants. The assessment of Burnout was conducted using the Maslach Burnout Inventory (MBI), validated in Arabic. Statistical analysis was performed using the Statistical Package for Social Sciences (SPSS) in its 25th version.

Results: We collected data from 55 nurses working in Razi psychiatry hospital during the time of the study. Among them, 80% (n=44) were female. Their median age was 35 (Min=25, Max=62). Most of participants were married (81.8%, n=45) and 70.9 (n=39) had kids. In our sample, 5.5% (n=3) and 23.6% (n=13) had respectively personal psychiatric and somatic history. Some addictive behaviors were identified among our participants, especially smoking (14.5%, n=379) and alcohol use (3.6%, n=2).

Regarding working conditions, 81.8% (n=45) were assigned shift work. They worked in the men's ward (43.6%, n=24), the women's ward (34.5%, n=19), or in both (21.8%, n=12). Furthermore, 45.5% (n=25) reported witnessing a suicide attempt during their work, and 74.5% (n=41) were victims of aggression, primarily by patients

(82.5%, n=33). Sixty percent (n=33) said expressed a desire to transfer.

According to the MBI, 49.1% (n=27) had high emotional exhaustion, 27.3% (n=15) had high depersonalization and 67.3% (n=37) had low personal accomplishment.

A significant association was found between low personal accomplishment and the desire to transfer to another department ($p=0.026$). No further links were found with other clinical data.

Conclusions: Our findings provide a thorough examination of burnout among psychiatric nursing professionals, underscoring the critical need for specific interventions tailored to their unique challenges.

Disclosure of Interest: None Declared

EPP0594

A Systematic Review of the Impact of Intergenerational Learning on the Psychosocial Well-being of Primary School Children and Older Adults.

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Introduction: In recent times, there has been a growing emphasis on the significance of fostering intergenerational learning and interaction. This involves individuals from diverse age groups engaging in purposeful and mutually beneficial activities aimed at enhancing their knowledge, skills, and values.

Objectives: This systematic review was undertaken to explore the psychosocial consequences of intergenerational learning experiences among primary school-age children and older adults.

Methods: In accordance with the PRISMA guidelines, a comprehensive review of both quantitative and qualitative data was conducted. Electronic databases such as PubMed, Scopus, and ERIC were meticulously searched up to July 26, 2022, using the following Population (P) - Exposure (E) - Outcome (O) criteria: primary school-age children and older adults (P), participation in intergenerational learning (E), and psychosocial effects (O). Additionally, we extensively scrutinized the reference lists of included datasets and pertinent review articles (Figure 1). To evaluate the quality of the eligible studies, we employed the Mixed Methods Appraisal Tool (MMAT). Data analysis was structured around a narrative synthesis approach.

Results: A total of seventeen studies were deemed eligible for inclusion in this review. The findings regarding the psychosocial consequences of engaging in intergenerational activities for both children and older adults predominantly underscored positive improvements in their attitudes, well-being, happiness, and various other aspects of their social and psychological well-being, although certain methodological limitations were identified (Figure 2).

Image:

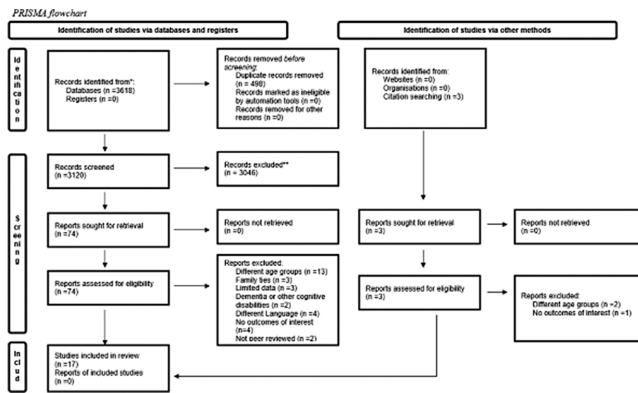
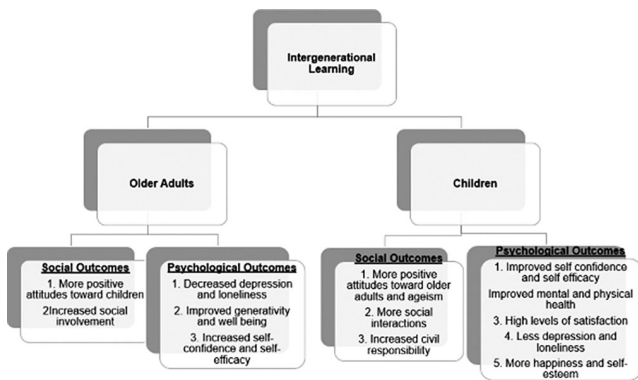


Image 2:



Conclusions: Promoting intergenerational interactions and learning experiences holds promise as a means to enhance the overall quality of life and well-being for both younger and older members of our communities.

Disclosure of Interest: None Declared

EPP0595

Manifestations of antisocial behavior in older adults: A review of current literature

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Introduction: Antisocial behavior in older adults is a problem for their relatives and health care providers. Antisocial behavior may present differently in the older population which makes it more difficult to diagnose adequately and apply therapeutic

interventions. This literature review provides an overview of diverse conceptualizations of antisocial behavior in older adults and the way it affects recognizability of diagnostic categories and the applicability of interventions.

Objectives: To gain insight into the various manifestations of antisocial behavior in older adults.

Methods: A systematic review design was performed. In this review, an extensive manual and electronic literature search was conducted for papers published from 1980 to 2023. For this purpose we used the electronic databases PubMed and Embase. The review will include empirical and quantitative studies of older adults with antisocial behavior.

Results: The results from the literature indicate that antisocial behavior does probably not decrease with age nor the burden on their social environment. Rather, the manifestations of antisocial behavior change as this population ages. Personality disorders are determined by several dimensional trait domains. The domains which are highly predictive for antisocial behavior include antagonism and disinhibition.

Conclusions: These findings challenge the notion of antisocial behavior decreasing with age. This review underscores the need to shift from traditional personality disorder categories to a dimensional trait perspective. Therefore, specific interventions are needed for older adults.

Disclosure of Interest: None Declared

EPP0596

Clinical and psychopathological features of very late onset of schizophrenia-like psychosis

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Introduction: Very late onset schizophrenia-like psychosis takes the 3rd place among late-life psychosis, after dementia and affective disorders associated psychosis. It's still unknown the real place of this psychosis.

Objectives: to investigate the clinical and psychopathological features and short-terms outcomes of late-onset schizophrenia and schizophrenia-like psychosis

Methods: 45 patients, mean age 70,6 ± 8,70 years, median age of manifestation psychosis - 68 [61; 75] years with late-onset schizophrenia (n=19, 42,2%), late-onset schizoaffective disorder (n=9, 20%), late-onset delusional disorder (n=7, 15,5%) and late-onset organic schizophrenia-like disorder (n=10, 22,3%) underwent clinical examination. Psychopathological, psychometric (PANSS, HAMD, CDSS, MoCA) and statistical methods were applied.

Results: 3 clinical groups were allocated. The 1st group included 15 patients (33%) and was characterized with severe polymorphic psychotic symptoms, included catatonic and paraphrenic signs with mental disorganization. They had the highest score of PANSS (105,46±17,99, p=0,002) and the lowest score of MoCA (14,2±2,16, p=0,05) in compare with 2nd and 3rd groups. They also had symptoms of depression (CDSS 6,28±5,29), compared with the 3rd group (HAMD 21,00±5,92, p=0,05). In short-terms outcomes was formed negative symptoms and cognitive impairment with