0.25. Fifty-nine percent of the youth spent more than two hours daily on the Internet and 73% admitted having been bullied online at least once while 19% said it happened often. The profile of harassers included strangers, followed by acquaintances and schoolmates. The platforms where harassment was most present were Facebook, Instagram and WhatsApp. The most frequent types of cyberbullying were private hate messages, humiliating comments about physical appearance and messages with sexual connotations. After the harassment, 65% of victims did not tell anyone; 68% of victims felt angry, and one in five felt suicidal. Among the most common comorbidities were adjustment disorder, anxiety and depressive symptoms, aggressive behavior, and suicidal ideation. Half of the youth felt that cyberbullying had impacted their school or family life.

Conclusions: Parents, educators, and health professionals need to be aware of the risks of virtual communication, and the link between cyberbullying and mental health disorders, and to develop national intervention and prevention programs.

Disclosure of Interest: None Declared

EPV0496

Occupational factors related to burnout among agents of a service center of a telecommunications operator in Tunisia

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Introduction: Burnout syndrome (BO), considered to be the final stage of stress, is a dynamic process resulting from the gradual loss of the employee's ability to face psychosocial risk factors and the exhaustion of personal resources. This syndrome can affect all professional categories. It represents a major threat for the worker and has a high economic cost

Objectives: To identify the professional factor associated with BO among agents of a service center of a telecommunications operator in the governorate of Sousse in Tunisia

Methods: Cross-sectional descriptive study, conducted from February 1st, 2020 to January 31st, 2021 among agents of a service center of a telecommunications operator in the agencies of the governorate of Sousse. The collection of data was based on an anonymous self-questionnaire. The evaluation of stress was done via validated measurement instruments, namely the questionnaires of Siegrist and Karasek and the evaluation of BO by the Maslach Burnout Inventory (MBI).

Results: Ninety four actel agents were identified in our study, and 59 participants answered the questionnaire. The average age of our population was 43.93 ± 8 years. The female gender was predominant with a sex ratio of 0.48. The Karasek Job Content Questionnaire showed that 23.7% of the participants were in job strain.

Furthermore, 28.3% of our total population had an imbalance between extrinsic efforts and rewards. The assessment of burnout by the Maslach Burnout Inventory showed that 64.2% of the workers were in occupational BO, and in 11.8% of these cases, BO was considered high. Our study showed that work-related organisational and environmental factors were significantly associated with BO, such as the number of customers seen per day: exceeding 50 (p = 0.048) and being a victim of verbal aggression (p = 0.038).

Conclusions: The results of this study showed that BO among agents of a service center of a telecommunications operator in Tunisia, was significantly associated with some professional factors. Therefor, in the future, it would be advisable to improve the working conditions of these agents by introducing collective and organisational preventive measures (primary prevention) and individual measures (secondary prevention) and by facilitating their professional reintegration (tertiary prevention) to avoid relapses.

Disclosure of Interest: None Declared

Emergency Psychiatry

EPV0497

Relatives experience in moroccan psychiatric emergency

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Introduction: In terms of care, family has a major role to play in the evolution of psychiatric illness.

Our aim in this work is to determine the family experience during the hospitalization of their sibling in the emergency room of the psychiatric university hospital Ar-Razi in Salé.

Objectives: Our aim in this work is to determine the family experience during the hospitalization of their sibling in the emergency room of the psychiatric university hospital Ar-Razi in Salé.

Methods: Our work was carried out with families of patients admitted to the emergency department of the psychiatric university hospital Ar-Razi in Salé.

The data collection was carried out with the help of a questionnaire including several items.

Results: Sixty-five family members were included in this study. Their relatives hospitalized in the psychiatric emergency department were male in 70% of cases with an average age of 32.4 years.

- In 76% of the cases, the family member interviewed was the one who requested hospitalization;
- 55% of those interviewed were parents.

The analysis of relatives' feelings during the hospitalization showed:

- Feelings of guilt were related to feelings of fear of exclusion and worries.
- Feelings of fear and exclusion were mostly expressed by mothers of patients hospitalized for the first time

European Psychiatry

At the end of the hospitalisation, 90% expressed relief, and 85% of family members were satisfied with their relative's stay in the psychiatric emergency department.

Conclusions: Recognizing families as units of care and understanding their situation and experiences facilitates the posthospitalization care process. A well-informed family about mental illness and the types of therapeutic treatments available helps optimize the treatment.

Disclosure of Interest: None Declared

EPV0498

Episodes of aggression and psychomotor agitation in psychiatric inpatients during the period of Covid-19 pandemia

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Introduction: The COVID-19 pandemic has changed social, family, and interpersonal relationships and behaviors. Several studies have identified the increase in psychiatric disorders in the general population (Fountoulakis *et al.* Psychiatry Res 2022; 315 114702) and an increase in episodes of disease in people already affected by these diseases (Taquet *et al.* Lancet Psychiatry 2022; 9 815-827; Zhu *et al.* Adults Psychiatry Res 2021; 301 113959). These episodes were accentuated by the severe limitations that occurred during the greatest peaks of the pandemic. However, few studies have evaluated the effects of these restriction periods on the levels of hetero or self-directed aggression in patients staying in residential facilities. **Objectives:** To evaluate the effects of the COVID-19 pandemic on aggression and psychomotor agitation crises in patients hospitalized in a psychiatric rehabilitation centre.Evaluate the differences in

these behaviors in the different stages of external limitation in patients suffering from psychiatric disorders. **Methods:** This observational study was conducted in a residential

psychiatric rehabilitation facility since the outbreak of the COVID-19 pandemic in Italy (March 2020 through September 2020). 354 patients were enrolled in the study. All guests had psychiatric disorders defined according to DSM-5 diagnostic criteria. Table 1 shows age mean and diagnosis at admission.

The several periods were recorded in the number of cases of psychomotor agitation and heterodirect aggression and an increase in emergency pharmacological interventions.

The following rating scales were administered in all patients: BPRS-18, BPRS Agitation (item item 6 tension + 10 hostility+ 17 excitement), GAF, and Epitrack.

The collected data were collected and statistically analyzed with the EZAanalyze 3.0 software in the Microsoft Excel Office.

Results: In tables 1 and 2 and in Graphics 1 and 2 the results obtained from our study are shown. We observed a reduction in the number of agitation and aggression episodes in periods 1, 3 and 6 (4, 12 and 5, respectively). In these same periods, the *BPRS agit* subscore score was also lower than in the other periods (7.92, 8.08, 7.42, respectively).

Image:

Table 1 - Epidemiological and data in different pandemic periods									
	Lockdown		Mean age (yrs)	Mean pz (number)	Ssp	BP	MDD	PD	Ot
Period 1	high	March 2020 - June 2020	45.76	97.3	55.3%	29.6%	9.5%	3.3%	2,3
Period 2	moderate	July 2020 - October 2020	46.76	98.3	58.6%	26.5%	6.4%	6.7%	1,8

Period 2	moderate	October 2020	46.76	98.3	58.6%	26.5%	6.4%	6.7%	1,8%	
Period 3	high	November 2020 - February 2021	51.34	96.4	67.3%	23.2%	6.3%	3.2%	0,9%	
Period 4	moderate	March 2021 - June 2021	43.87	96.9	64.4%	18.5%	11.7%	5.4%	0%	
Period 5	low	July 2021 - November 2021	49.87	98.4	59.7%	21.3%	9.8%	7.4%	1,8%	
Period 6	high	December 2021 - March 2022	45.87	93.4	60.4%	22.4%	10.4%	6.3%	0,5%	
Period 7	low	April 2022 - September 2022	51.91	93.4	57.6%	28.2%	8.6%	3.2%	2,4%	

Image 2:

Table 2 -	Rating sca	le scores an	d severe agi	tation episo	des in diffe	rent pander	nic periods
	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6	Period 7
BPRS	68.5	66.5	74.4	71.7	62.9	71.4	63.9
BPRS Agit*	7.92	13.50	8.08	12.58	13.17	7.42	11.83
GAF	58.3	60.5	58.3	52.9	49.4	57.2	62.2
Epitrack	24.29	24.21	23.92	23.40	26.57	26.43	27.79
Agitation episodes	4	28	12	25	15	5	32

Image 3:

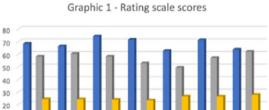
10

0

Period 1

Period 2

Period 3



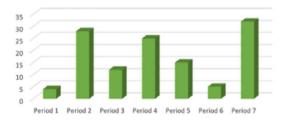


Period 5

Period 6

Period 7

Graphic 2 - Agitation episodes



Conclusions: Differently to expected data, the number of episodes of psychomotor agitation and heterodirect aggression proved to be reduced in the periods of greater restraint and limitation. Instead, the levels increased in the month following the reduction of such restrictions characterized by visits with family members, planned outings. it is difficult to give a reliable and definitive explanation to these results. However, the feeling of protection, risk reduction and potentially dangerous stimuli could guide the explanation of the results obtained.

Disclosure of Interest: None Declared