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suggested a higher prevalence of Body Dysmorphic Disorder in patients with Acne Vulgaris which should be considered and screened for.

Conclusion. This scoping literature review has highlighted the significant psychological burdensome acne patients can experience. Given the prevalence of the condition Psychiatrists do have a role in working with Dermatologists to ensure appropriate screening tools are utilised and patients are able to access appropriate support.

Factors associated with mental health outcomes among medical residents exposed to COVID-19

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Aims. The aims of our study were to assess and to examine i. the psychological impact of the COVID-19 pandemic on medical residents working on the front and second line, ii. the association between coping strategies, resilience and optimism and different mental health outcomes like stress, anxiety, and depression among the medical residents' workers during the COVID-19 pandemic, and iii. the coping strategies used on the same sample with consideration of different factors like seniority, frontliner, gender and coping style.

Method. An electronic survey was sent to all medical residents in Qatar. Depression, anxiety and stress were assessed by the Depression, Anxiety and Stress Scale – 21 Items. Professional quality of life was measured by the Professional Quality of Life measure. The coping mechanisms were assessed with the Brief-COPE, resilience by the Brief Resilience Scale, and optimism by the Revised Life Orientation Test (LOT-R).

Result. Of the 640 medical residents contacted, 127 (20%) responded. A considerable proportion of residents reported symptoms of depression (42.5%), anxiety (41.7%) and stress (30.7%). Multivariate analysis of variance showed significant effects of seniority in residency, with junior residents having poorer outcomes. In addition, there was a statistically significant interaction effect with moderate effect sizes between gender and working on the front line, as well as gender, working on the front line and seniority, on mental health outcomes. The most commonly used coping strategies were acceptance, religion, and active coping. The least reported coping strategies were substance use and denial. Avoidant coping style scores were higher among junior residents (p = .032) and non-COVID-19 frontliners (p = .039). Optimism LOT-R score was higher in senior than in junior residents (p < .001). Another important finding is that optimism and resilience were associated with better mental health outcomes. In addition, we find that avoidant coping style is highly associated with depression.

Conclusion. The COVID-19 pandemic may have a negative impact on junior residents' mental health. Preventive measures to reduce stress levels and easy access to professional mental health services are crucial. This study also raises awareness among residency programs on the psychological and coping responses and strategies of medical residents.

GP Trainees' perceptions and experiences of the training placement in Psychiatry - A qualitative study

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Aims. This qualitative study aims to explore the leaning needs of the GP trainees for their psychiatry placements.

Method. In this qualitative study, semi-structured interviews of eight former GP trainees were conducted. Data were transcribed and analysed using thematic analysis. Triangulation through multiple analysts" was used to improve the validity of the study

Result. This study identified six key areas of learning needs for GP trainees during their psychiatry placement. i) the on-call experience which enabled the participants to learn how to manage acutely unwell patients in psychiatry, ii) learning the self-harm and suicidal risk assessment which is an important skill for a GP practising in primary care, iii) training in relation to psychiatric medication which enabled GPs to prescribe more confidently in the community, iv) exposure to the community psychiatry which was helpful in getting exposure to community-based clinical practice, v) learning from formal teaching activities which can be tailored to cover the relevant primary care related clinical topics and finally, vi) getting the opportunity to improve the communications skills during the psychiatry placement which is useful for all doctor in training.

Conclusion. We recommend that detailed induction of the service setup is required before GP trainees start on-calls and a well-defined support network should be provided and explained to the training doctors. Risk assessment teaching should be delivered by formal training, regular supervision and discussions. Training on psychiatric medication especially in the context of GP prescribing should be considered as part of formal teaching experience. Opportunities to work with community mental health teams and outpatient clinics should be generated and offered to the trainees. Formal teaching sessions should be set up with an understanding of the GP training curriculum and their learning needs. Improvement of communications skills with exposure to difficult communication scenarios under supervision during psychiatric placement should be identified as an important area of learning for the GP trainees.

Psychological impact of COVID-19 pandemic on frontline health care workers in Bangladesh: A cross-sectional study

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Aims. Frontline health care workers exposed to COVID-19 patients could be at increased risk of developing psychological issues. The study aimed to estimate the prevalence of mental health-related problems, specifically depression, anxiety, post-traumatic stress disorder (PTSD), and insomnia among health care professionals during the COVID-19 pandemic in Bangladesh and to compare these between medical and allied health care professionals.

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Method. This cross-sectional survey was conducted using Google Form then subsequent telephone interview between June and August 2020. Using random sampling, a total of 479 health care professionals participated in the study. We collected data on demographics. Anxiety and depression were measured using 4 items Patient Health Questionnaire-4 (PHQ-4), PTSD was measured using 4 items Primary Care (PC)-PTSD-Screen, and insomnia was measured by using a 7-item Insomnia Severity Index (ISI). A multivariable logistic regression analysis was performed to assess risk factors associated with mental health symptoms.

Result. Overall, 17.6% of frontline health workers had symptoms of anxiety, 15.5% had depression symptoms, 7.6% had PTSD symptoms and 5.9% had symptoms of insomnia. Compared to allied health professionals (n = 113, 24%), doctors (n = 366, 76%) had significantly higher prevalence of anxiety: 21.1% vs 06%, (OR = 4.19; 95% CI = 1.88-9.35; p-value <0.001); depression: 18% vs 6.8%, (OR = 2.99; 95% CI = 1.40-6.42; p-value 0.005); PTSD: 9.4% vs 1.7%, (OR = 5.96; 95% CI = 1.41–25.11; p-value 0.015) and insomnia: 7.4% vs 0.9%, (OR = 9.22; 95% CI = 1.24-68.4; p-value 0.03). Logistic regression analysis showed that pre-existing medical illness has significantly more risks of developing symptoms of anxiety (adjusted OR = 2.85; 95% CI = 1.71-4.76; p-value <0.001) and depression (OR = 2.29; 95% CI = 1.39-3.77; p-value 0.001). Having a postgraduate degree (adjusted OR = 6.13; 95% CI = 1.28-29.28; p-value 0.023) and working in secondary care setting (adjusted OR = 3.08; 95% CI = 1.18–8.02; p value 0.021) have significant predictors of developing anxiety symptoms among health workers. Those who had worked more than 6 weeks in COVID-19 dedicated hospitals had risk of developing symptoms of PSTD (OR = 2.83; 95% CI = 1.35-5.93; p value 0.006) and insomnia (OR = 2.63; 95% CI = 1.15-6.02; p value 0.022).

Conclusion. Our study demonstrated a high prevalence of symptoms of depression, anxiety, PTSD, and insomnia among Bangladeshi frontline health workers (particularly among doctors) during the COVID-19 pandemic. There is an urgent need to address the mental health needs of frontline health workers.

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Attitudes and decision-making processes of Midwakh smoking among adult males in UAE

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Aims. Midwakh, which involves smoking an Arabian tobacco blend typically mixed with herbs and spices, has recently become a major health concern due to a spreading popularity among adolescents and young adults in the United Arab Emirates (UAE). It is known to contain a higher nicotine content than cigarettes, potentially increasing the risk of addiction, despite contrary popular belief among young smokers. Yet, little is known about attitudes and decision-making processes involving this emerging smoking behaviour. The aim of this study was to ascertain the knowledge, attitudes and practices of Midwakh use among adult males in the UAE.

Method. A cross sectional study was conducted among male adults in Abu Dhabi, Dubai and Sharjah. A total of 500 participants completed self-administered validated questionnaires, which consisted of 30 questions that targeted the public's understanding, perception

and use of Midwakh. Data were analysed using SPSS 23. Percentages and means were calculated for demographic data and Chi-Square was utilised to measure relations between categorical variables. Odds Ratio (OR) was used to estimate how strongly a predictor was associated to an outcome. A p-value less than 0.05 was considered statistically significant.

Result. The prevalence of smoking Midwakh was 34.8% among the study sample. Males between ages 26 to 35 were found to be 4.48 times (95% CI: 1.59–12.66) more likely to be current Midwakh smokers than any other age groups (P=0.01). Emiratis in the study were 5.92 times (95% CI: 2.83–12.35) more likely to smoke Midwakh than expats. 65% of respondents reported willingness to smoke Midwakh if it was offered to them. Adults with 3-4 close friends who smoke Midwakh were 6.8 times (95% CI: 2.08–22.41) more likely to smoke Midwakh themselves. Knowledge of being unsafe was cited in 62% of the participants as a cause of quitting Midwakh within two years.

Conclusion. Our results demonstrate a significant impact of peer pressure on the decision-making process of Midwakh smoking. The high prevalence among young male residents warrants a multi-agency public health approach to tackle the issue. Culturally sensitive campaigns raising awareness to the harmful effect of Midwakh including its addictiveness appear to be essential. Further research investigating the effects of a targeted Midwakh-smoking cessation approaches is warranted.

Impact of community treatment orders on inpatient bed usage in assertive outreach team

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Aims. To examine the impact of using Communty Treatment Orders (CTO) of the Mental Health Act on use of inpatient care in Assertive Outreach team.

Background. Currently there is little evidence of the efficacy of community treatment orders (CTOs), and in particular with patients who use the Assertive Outreach service. One large randomised controlled study found no impact on use of inpatient care while a naturalist study found significant impact.

Method. Our primary outcome was the number of admissions with and without a CTO comparing each patient with themselves before CTO and under CTO("mirror-image"). Our secondary outcomes were the number of bed days, and the percentage of missed community visits post-discharge. We also looked at the potential cost savings of a reduction in inpatient bed usage.

Result. All the 63 patients studied over period of 6 years had a severe and enduring mental illness. The use of a CTO was linked to a significant reduction in the number of admissions (mean difference = 0.89, 95% CI = 0.53–1.25, P < 0.0001) and bed days (mean difference = 158.65, 95% CI = 102.21–215.09, P < 0.0001) There was no significant difference in the percentage of missed community visits post-discharge. Looking at the costs, an average cost for an inpatient Assertive Outreach bed per day in the local Trust was £250, and there were 8145 bed days saved in total, making a potential saving of just over £2million, during the study period. **Conclusion.** This study suggests that the implementation of CTOs using clinical judgment and knowledge of patients can sig-

nificantly reduce the bed usage of Assertive Outreach patients.

The financial implications of CTOs need to be reviewed further,