

Introduction: Burnout (BO) is a syndrome combining psychological and somatic symptoms caused by exposure to several years of chronic stress at work. Far from being a theoretical problem, it is a real social problem that has become globalized as societies change. Anesthesiology is among the most stressful medical disciplines which expose to BO in Tunisia and around the world.

Objectives: Identify associated factors to BO among anesthesia technicians.

Methods: We conducted a cross-sectional study during two months, from October 1st, 2015 to December 31th, 2015, among anesthesia technicians affected in the different operating rooms of the Farhat Hached teaching Hospital in Sousse. Data collection was based on a self-administered questionnaire with validated tools assessing BO (Maslach Burnout Inventory) and stress (Siegrist and Karasek)..

Results: Forty-six senior anaesthesia technicians was included in the study. The mean age of our population was 43.76 ± 7.74 years with a female predominance (89.1%). According to the Karasek model, 59% of the workers were in job strain, and according to the Siegrist model 23.9% of the participants had an imbalance between high effort and low reward. The BO rate among anaesthesia technicians at the Farhat Hached University Hospital was 39.1%. The results showed a statistically significant association between working at the gynaecology-obstetrics department ($p=0.001$), the seniority in the department superior or equal to 20 years ($p=0.006$), the absence of break time at work ($p=0.003$) and the risk of the occurrence of BO. Furthermore, the last 2 consecutive day rest dates back to more than 15 days ($p=0.001$), the number of free weekends during the last 3 months less than four ($p=0.044$) were also significant associated to BO.

Conclusions: Our study confirms that BO is a tangible reality in our country especially among anesthesia technicians, so it must be addressed by adopting effective preventive strategies.

Disclosure of Interest: None Declared

Epidemiology and Social Psychiatry 02

EPP0698

Social stigma of people with mental disorders and attitude to psychiatric treatment in Polish society

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Introduction: People with mental disorders (MD) may experience social stigma in various spheres of their lives. This phenomenon is based on negative social beliefs and hostile perceptions about mental disorders. Stigma may lead to social exclusion and discrimination (unjust treatment compared to people without MD). It may also result in resistance to using professional medical help (psychiatrist, psychotherapist) by people who experience symptoms of MD.

Objectives: The study aims to analyze the attitude of Polish society toward people with mental disorders and the attitude toward

psychiatric treatment. The study investigates the correlation between the abovementioned attitudes and socioeconomic parameters of the respondents.

Methods: The study was conducted on a group of 1,230 respondents with the anonymous, authorial questionnaire disseminated by the CAWI technique. The questionnaire consisted of 10 single-choice questions concerned with the socioeconomic parameters of the respondents (age, place of residence, education, gender) and their attitudes toward mental health problems. The chi-square test and Kendall's tau-b correlation coefficient (τ_b) were used to analyze the correlations between the above parameters (with $p < 0.05$).

Results: Over 33% of respondents believes that people with MD are more aggressive than people who do not present this type of disorder. In turn, 16.4% of respondents admitted that they would feel uncomfortable in the presence of a person with mental disorders. There was no statistically significant correlation between the above beliefs and any socioeconomic parameter. Every tenth respondent would not hire a person with MD. Resistance to employment increased with the respondents' age and level of education, whereas it decreased with the population of respondents' domiciles. More than 17% of respondents would feel resistance to contacting with psychiatrist, and 4.1% of them already hide the fact of treatment from their family. The resistance to using psychiatric help was higher in villages and smaller towns than in bigger centers.

Conclusions: The study shows negative attitudes towards people with MD are still relatively frequent in Polish society. The stereotypical perception of this group of entities is generally not dependent on any analyzed socioeconomic parameter. Such correlations exist only in some areas (employment). Because of the negative perception of MD, some people who struggle with these problems do not use a psychiatrist's professional help. In effect, these entities remain undiagnosed and untreated. Treatment delay may lead to exacerbating symptoms, prolong treatment time (including the necessity of hospitalization), and increase its cost. Reducing the stigma is necessary for counteracting discrimination against people with mental disorders and improving the mental health condition of Polish society. It requires educational activities and appropriate legal regulations.

Disclosure of Interest: None Declared

EPP0699

The impact of COVID-19 on work-related mental health claims of healthcare workers in British Columbia: an interrupted time series analysis

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Introduction: Healthcare workers (HCW) have been at the forefront of providing care since the COVID-19 pandemic. In addition to physical demands, HCW are also vulnerable to mental health conditions due to the nature of their work. As a result, absenteeism among HCW is inevitable. In Canada, mental disorders caused by a