

accomplishment score in 73.3%. Burnout was significantly associated with alcoholism ($p=0.016$), shift work ($p=0.037$) and the presence of stress at work ($p=0.048$).

Conclusions: The prevalence of burnout was high in our study population, hence the importance of setting up a burnout prevention strategy in hospitals.

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EPV0558

Perception of Violence by Psychiatric Nurses: Behind the scenes

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Introduction: Violence in psychiatric settings poses significant challenges for healthcare professionals, particularly nurses. This study examines psychiatric nurses' perceptions of violence and its impact on the quality of care they provide.

Objectives: The primary objective is to assess the influence of violence on the quality of care in psychiatric settings, with a focus on the experiences and perspectives of nurses.

Methods: We employed a questionnaire-based survey administered to 30 psychiatric nurses working in both inpatient and outpatient psychiatric units of the Razi hospital Manouba. The survey gathered information on the prevalence of violence, types of violence encountered, and the impact on nursing practice.

Results: Of the 30 respondents, 75% identified as female and 25% identified as male. Most of them had more than five years of experience. The primary results revealed that all the psychiatric nurses reported experiencing at least one incident of violence during their psychiatric nursing careers. Regarding exposure to verbal violence, the results indicated that 52% encountered it sometimes, 22% often, 17% very often. Regarding physical violence, 30% experienced it rarely, 26% sometimes, 13% often, and 13% very often. For sexual violence, 56% reported never experiencing it, 8% rarely, 26% sometimes, and 8% very often. These incidents had varying effects on nurses' emotional well-being, job satisfaction, and the quality of care they were able to provide. 53% of nurses reported experiencing emotional distress and feelings of anxiety as a result of violence, 13% felt anger and frustration. One nurse declared he was not affected emotionally. Most of the respondents (75%) indicated that their job satisfaction had been negatively affected by violent incidents. 40% of respondents stated that violence has a negative impact on their relationship with patients, but they make efforts to maintain care quality. Whereas, 20% found ways to strengthen connections despite challenging experiences. The most commonly endorsed strategies to cope with violence included attempting to master their emotions by remaining calm and patient (78% of respondents), seeking assistance or the presence of other healthcare team members (65%), and maintaining a safe distance from patients (69%). Fewer participants reported raising their voice and adopting a position of authority (30%), while

a minority indicated engaging in additional training on the management of violent situations (20%). These results illustrate the diverse range of personal coping strategies.

Conclusions: Violence in psychiatric settings has a multifaceted impact on psychiatric nurses, affecting both their emotional well-being and the quality of care they provide. Strategies for managing and preventing violence, as well as supporting nurses in coping with these challenges, are essential for maintaining high-quality psychiatric care.

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Augmenting pharmacotherapy with physical exercise: review of the principles

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Introduction: Observed structural and functional changes in the central nervous system as a result of physical exercise are beneficial from biological, psychological and social standpoint. The studies published so far confirm that physical exercise, understood as planned, ordered and repetitive activity, can improve severity of symptoms, general functioning, and quality of life in patients with mood disorders, schizophrenia/psychotic disorders, anxiety, PTSD or addictions. This seems to be particularly important in relation to the growing number of patients facing resistance to classical pharmacological treatment as well as its side effects (e.g. metabolic syndrome, cardiovascular complications).

Objectives: Review of effective implementation of treatment programs based on physical exercise within mental health services.

Methods: Scoping review was performed by identifying relevant studies available in the PubMed and Scopus databases that were 1) peer-reviewed 2) in English language 3) focused on physical exercises 4) published within the last 10 years. Selection of the studies from the initial group of search results was performed manually.

Results: Majority of studies present programs covering relatively small, diverse groups of patients with mixed types of physical exercise modalities and intensity introduced, which makes generalization to basic principles very difficult. Needs assessment of patients from various diagnostic categories is vital in the process of implementation and evaluation. Barriers indicated by service users include lack of psychoeducation on perceived benefits, limitations within healthcare system (e.g., time limits, cost, access), side effects of medication, and psychosocial factors such as isolation. The assessment of factors engaging and motivating to maintain physical activity seems particularly important.

Conclusions: Identification of patients that may especially benefit from the inclusion of physical exercise, and recognition of therapeutic programs' elements that ensure the maintenance of the physical activity require further research.

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