

of Professional Technical Training “Humberto Velásquez García” in Ciénaga, Colombia.

**Methods:** Cross-sectional observational study involving a sample of 344 undergraduate students who completed the WHOQOL-BREF questionnaire, a sociodemographic form, and were asked about their academic performance in the last semester. Data were analyzed using RStudio, where categorical variables were interpreted through relative and absolute frequencies, and quantitative variables through medians. Bivariate analysis was conducted using non-parametric tests such as Mann-Whitney U and Kruskal-Wallis for group comparisons, and Kendall for correlations.

**Results:** Academic performance had a median of 4.00, and the quality of life had a median of 47.57. The Mann-Whitney U test showed  $p=0.03$  for gender-based performance comparison. Kruskal-Wallis comparison by age group regarding performance showed  $p=0.003$ . The correlation between academic performance and quality of life showed  $\tau=0.120$  and  $p=0.004$ .

**Conclusions:** The median academic performance is above the approval point, but the quality of life is below average levels (on a scale of 1 to 100). There are significant differences in median performance among gender and age groups, as well as a very low, positive, and statistically significant correlation between academic performance and levels of quality of life.

**Disclosure of Interest:** None Declared

## EPV0574

### Domestic and international medical students' need for mental health services

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**Introduction:** Heavy academic loads imposed on medical students explain why it is so important for a university to pay more attention to the issues of maintaining their students' mental health.

**Objectives:** To compare the level of mental health and the need for mental health services in domestic and international medical students

**Methods:** The survey covered 305 domestic and 241 international university students of the Faculty of Medicine. Their mental health level was measured with the SCL-90R questionnaire, their interest to mental health services - by means of a 5-point questionnaire.

**Results:** The data achieved by measuring the level of mental health with the SCL-90R revealed that in both groups this level is within standard limits. However, the international students showed a higher level of psychopathological distress reflected by GSI index ( $\chi^2=2.14$ ;  $p=.03$ ). Both groups have experienced a visit to a psychiatrist or psychotherapist (12.13% and 8.3% correspondingly). Some of them have undergone treatment in connection with their

emotional and behavioral problems (3.28% и 3.73%). Currently, they claim, with the same frequency, that they are in need of a psychiatrist's or psychotherapist's help (14.43% и 13.28%). Domestic students, as compared with international students show higher need ( $\chi^2=24.55$ ;  $p=.001$ ) for a psychologist's help (34.75% and 16.18%). With different frequency, 65.15% of the international students and 89.5% of the domestic students consider mental health services as necessary.

**Conclusions:** When providing medical support to medical students, it is important to take into account their need for mental health services and to keep in mind their different cultural backgrounds.

**Disclosure of Interest:** None Declared

## EPV0575

### How to manage work-related stress in healthcare professionals: organizational and individual interventions.

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**Introduction:** Workplaces can be source of significant stress for employees, leading to a series of mental health problems, such as burnout syndrome. Healthcare professionals and other helping professions are especially vulnerable to work-related stress.

**Objectives:** The aim of the present review is to assess available intervention aiming at improving work-related stress symptoms.

**Methods:** We conducted a thorough search of relevant articles on PubMed, APA PsycInfo, and Scopus databases, using specific keywords such as “occupational stress,” “stress,” “anxiety,” “depression,” “health personnel,” “health care facilities, manpower and services,” “prevention,” and “control.”

**Results:** Although significant methodological heterogeneity has been found among studies, regarding assessment tools, target population, and intervention types, we can still draw some satisfactory results. Healthcare professionals have access to various interventions to manage work-related stress symptoms, which can be classified into three categories: 1) individual cognitive-behavioral therapy approaches, 2) relaxation techniques at the individual level, and 3) organizational-level interventions. Mindfulness techniques, relaxation techniques, emotional freedom techniques, and integrated interventions have demonstrated effectiveness in alleviating work-related stress.

**Conclusions:** To prevent work-related stress among healthcare professionals, interventions should be targeted towards specific categories of healthcare workers based on factors such as age, tasks, and patient types. Well-structured and reliable randomized controlled trials focusing on the most promising interventions, such as mindfulness, need to be carried out in larger samples and with a solid methodology in order to confirm these evidences.

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