vs. 60%; temporary incapacity: 12.5% vs. 12.5%; unemployed: 25% vs. 20% and others: 7.5% vs. 7.5%. In the same period, the unemployment rate in the Spanish general population was from 13.8% to 14.5%. After 6 months the percentage of change on work status was 25% (15% improved their employment situation).

Conclusions: Preliminary results show worse work status of participants compared to the Spanish general population. It is recommendable to include well-established risk factor measurements to establish the effectiveness of interventions in mental health. More research is required to determine the impact of interventions on the employment status.

Disclosure: No significant relationships.
Keywords: mental health; Employment; group intervention; Mindfulness

EPV1098

The effects of Workplace violence on healthcare workers in Tunisia

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Introduction: Exposure to violence affects employees and has implications for the quality of care provided.
Objectives: This study aims to describe the effects of workplace violence on nurses in psychiatric and emergency departments.
Methods: This was a cross-sectional and descriptive study involving 60 nurses practising in the psychiatry and emergency services at the Hedi Chaker and Habib Borguiba University Hospital in Sfax. We collected the socio-demographic and professional data of the participants using a pre-established questionnaire.
Results: The average age was 35 years and 51 % of respondents were female. Ninety-three percent of the respondents were victims of an act of violence. The violence was verbal in 90%, physical in 70%, psychological in 62% and sexual in 11% of cases. The classification of acts of violence according to the scale of seriousness of the national observatory of violence in health care revealed a predominance of level 1 violence characterised by insults (66%) and level 2 violence with threats to physical integrity (65%). Level 3 violence (physical violence) was the most frequent (70%). Two cases of level 4 violence with knives were reported. These acts of violence generated wounds in 21%, fractures in 10%, haematomas in 10% and bruises in 8% of cases. Thirty-six nurses (60%) reported that the act of violence was responsible for a feeling of insecurity.
Conclusions: The results of this study indicate the need for hospital center managers to set up organizational policies against workplace violence and to apply them in a rigorous and transparent manner.

Disclosure: No significant relationships.
Keywords: healthcare workers; violence

EPV1099

Association Between Workplace Bullying Occurrence and post-traumatic stress disorder Among Healthcare Professionals in Tunisia.

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Introduction: Nurses may be particularly at risk of violence exposure at work which can cause psychological trauma and even develop post-traumatic stress disorder (PTSD), which is a serious mental health disorder.
Objectives: The aim of this study was to determine the prevalence of PTSD among nurses in psychiatry and emergency departments and to identify the factors associated with it.
Methods: This was a cross-sectional, descriptive and analytical study. It concerned 60 nurses working in the psychiatry (35 nurses) and emergency (25 nurses) departments of the Hedi Chaker and Habib Borguiba University Hospital in Sfax. The screening of PTSD was carried out by the « post-traumatic stress evaluation questionnaire » (PTSQ).
Results: Direct trauma exposure was reported by 93% of participants, of which 48.3% experienced the act of violence more than 4 times. According to the PTSQ, 48.3% of the nurses had PTSD with a mean score of 50.93. Hyper-arousal was the most frequently observed outcome in victims (85%), followed by re-experience (83%) and avoidance (80%) symptoms. The presence of PTSD was correlated with female gender (p=0.002), the young age of the nurse (p=0.04), and the absence of peri-traumatic reactions (p=0.001).
Conclusions: Our study shows that PTSD is a pathology frequently encountered in psychiatric and emergency nurses. Hence the need to put in place strategies against violence in hospitals and to apply them rigorously in order to better manage this phenomenon and manage its repercussions on health workers .

Disclosure: No significant relationships.
Keywords: Healthcare professionals; Post-traumatic stress disorder

EPV1100

Identification of violence in the hospital environment: perceptions of nurses

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Introduction: Violence is recognised by the WHO as a major and ubiquitous public health problem, that is constantly worsening.
Objectives: The aim of our work was to estimate the frequency of aggressions against nurses in psychiatric and emergency departments, and to identify the factors associated with it.
Methods: This was a cross-sectional, descriptive and analytical study. It took place between January and March 2021, at both hospitals of Sfax (Tunisia).This study targeted 60 nurses in the psychiatry and emergency services.
Results: The sample comprises 35 nurses (58%) from psychiatric services and 25 nurses (42%) from emergency services, mainly females (51%) and with average age of 35 years.(+/-9). The nurses interviewed were exposed to violence quite often, in 93% of cases. Almost all nurses (90 %) experienced verbal violence, 70 % experienced physical violence and more than half (62 %) experienced psychological violence. Nearly 11% of nurses reported a sexual violence. Factors that explain or contribute to violence mentioned by the participants were as follows; The Verbal violence was

significantly correlated with poor reception conditions (p=0.013). The Sexual violence was significantly correlated with young age of nurse (p=0.005). As for psychological violence, it was significantly correlated with work overload (p=0.004), a poor caregiver-patient relationship (p=0.02) and poor patient care (p=0.04).

Conclusions: Our study showed that violence against nurses was frequent in psychiatric and emergency departments. Various factors could modulate their occurrence such as training and improvement of the working conditions.

Disclosure: No significant relationships.
Keywords: violence; psychiatric departments; emergency departments

Psychoneuroimmunology

EPV1101

From Mild Encephalitis Hypothesis to Autoimmune Psychosis - and remaining challenges

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Introduction: The mild encephalitis (ME) hypothesis of severe mental disorders, ME to be caused by infections, autoimmunity , toxicity and trauma (Bechter 2001, updated Bechter 2013), is now emergingly supported from neuroimaging and CSF and postmorten findings.
Objectives: Review about the present status of ME hypothesis and autoimmune psychosis and remainig challenges to assess and categorize mild neuroinflammation.
Methods: expert review
Results: Autoimmune Encephalitis presenting with exclusive psychiatric symptoms and all cases of Autoimmune Psychosis (international consensus criteria in Pollak et al, Lancet Psychiatry, 2020) match the proposed ME criteria (Bechter 2001 & 2013). Majority of these cases of an autoimmune type of ME are well treatable with immune modulatory treatments. It remained unclear, whether CNS antibodies are causal or contributive by shaping the observed clinical syndrome. The increasing evidence of mild neuroinflammation present in considerable subgroup of schizophrenia or psychosis spectrum cases from ongoing clinical studies, including CSF (Bechter et al 2010, Endres et al 2018, 2020, aso.) and neuroimaging plus the observed clinical improvement with immune modulytory therapies, strongly support ME hypothesis, potentialy even in considerably larger subgroup of SMDs,supported by brain biopsy (Najjar et al , several papers) and post mortem studies (Bogerts et al group , Weickert et al group, several papers).
Conclusions: Beyond ME even more refined categories of mild neuroinflammation, including parainflammation (proposed by Medzhitov 2008) and neuroprogression (proposed by Berk et al 2010/11) need to be considered in further research on the possible role of mild neuroinflammation in SMDs (Bechter 2020, Frontiers Psychiatry).

Disclosure: No significant relationships.
Keywords: Mild encephalitis; autoimmune psychosis; immune therapies; neuroinflammation

EPV1102

Immune regulatory gene polymorphisms, frequent cannabis use, and psychosis: implications to Treg hypofunction

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Introduction: We have previously shown that the association between frequent cannabis use and psychosis is more likely in subgroups with low-grade inflammation than subgroups without (PMID: 33736715). The role of immune-related polymorphisms remains unknown.
Objectives: To explore whether polymorphisms affecting the function of key immune regulatory proteins moderate the association between cannabis and psychosis, namely: *ENTPD1* and *NT5E*, involved in the synthesis of CD39, CD73, respectively, and anti-inflammatory adenosine; *CTLA4* and *FOXP1,* essential for Treg functional capacity.
Methods: We genotyped blood samples from 283 community-based controls and 140 recent-onset psychosis patients in Brazil (EU-GEI consortium, Ribeirão Preto/SP) for twelve polymorphisms (*ENTPD1*: rs3814159, rs3176891, rs10748643; *NT5E*: rs9444348, rs2295890; *CTLA4*: rs3087243, rs231775, rs5742909, rs4553808; *FOXP1*: rs6803008, rs6786408, rs830599; Illumina Human Core Exome-24). Cannabis frequency (daily, less than daily, never) was assessed by self-report (Cannabis Experience Questionnaire). Binary logistic regression models (OR,95%CI) included case status as the outcome, genotype (dominant model), cannabis frequency, and an interaction term between the two as exposure, adjusting for confounders (age, sex, ethnicity, tobacco smoking).
Results: We found significant interactions between cannabis use and polymorphisms for *ENTPD1* (rs3814159), *NT5E* (rs9444348), and *FOXP1* (rs6786408). Less than daily or daily use were, in a dose-response fashion, only associated with psychosis in those with the variant and heterozygous genotypes; less than daily: *ENTPD1* AG/GG (3.34,1.71-6.50); *NT5E* AG/AA (3.71,1.87-7.33); *FOXP1* AC/CC (2.98,1.54-5.77); daily: *ENTPD1* AG/GG (16.81;5.89-47.96); *NT5E* AG/AA (21.20,6.81-66.01); *FOXP1* AC/CC (13.75,5.22-36.21).
Conclusions: Variation in genes that affect Treg function appears to modify the effect of cannabis consumption on psychosis in keeping with Treg hypofunction hypothesis (PMID:33713699).

Disclosure: No significant relationships.
Keywords: Psychosis; Adenosine; Cannabis; Immune system