

EPP0940**Ptsd among a sample of french students: A misdiagnosed condition with many implications. preliminary results.**

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Introduction: Students often suffer from stress, anxiety and depression (Saleh et al., 2019). However, research on PTSD is scarce among this population.

Objectives: We therefore wanted to explore the presence of PTSD and other psychopathological and psychological variables in this population.

Methods: We recruited 70 students -150 still planned- (22 years old, 70% women, 84.3% in the third year undergraduate) who filled out questionnaires at the university, after ethic committee's approval.

Results: 31.2% show PCL-5 scores in favor of a PTSD. The most frequently mentioned traumatic events (direct exposure) are physical assaults (49.3%), transport accidents (29.4%) and unwanted sexual experiences (23.2%). According to the Mann-Whitney U test, if they do not differ from students without PTSD in the number of traumatic events encountered (LEC 5 ns), they show more stress, anxiety and depression ($p < .02$), more dissociative symptoms ($p < .04$), less social support available ($p = .048$), a gap between the importance given to studies as a value and action directed towards this value ($p = .002$), idem for leisure activities ($p = .035$), and more rumination ($p < .001$) and more experiential avoidance ($p < .001$). These two latter appear to be powerful processes involved in PTSD, as the PCL5 score is 37% explained by avoidance and rumination, according to linear regression.

Conclusions: These preliminary results tend to show that PTSD should be investigated in students and seems to be linked to higher emotional difficulties, lower academic and social involvement. Rumination and avoidance could be an important therapeutic target.

Keywords: students; ptsd; Experiential Avoidance; rumination

EPP0937**Post-traumatic stress disorder and professional quality of life among psychiatric staff**

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Introduction: Psychiatric staff could be exposed to various types of violence that might have potential consequences on their psychological balance.

Objectives: To detect post-traumatic stress disorder (PTSD). To assess the professional quality of life among psychiatric hospital workers.

Methods: A descriptive cross-sectional study was conducted in the psychiatric department of the Hedi Chaker University Hospital in Sfax. The questionnaire study had three major components: the baseline participant characteristics, the post-traumatic stress disorder Checklist (PCL-5) for which a total symptom severity score cutoff of 38 was recommended as the cutoff for a positive screening test and the Professional Quality of Life Scale (ProQOL).

Results: Thirty-one participants completed the questionnaire. The sex-ratio was 0.93. The mean age was 41.5 years. All participants were exposed to physical or verbal assault. Physical aggression was the most traumatic behavior reported by 39.3% of psychiatric professionals. A feeling of insecurity when performing professional tasks was reported by 93.3% of participants. Among participants, 41.9% expressed the desire to change workplace. The mean score on the PCL-5 was 21.6 ± 15.35 . Five participants (16.7%) had a PCL-5 score ≥ 38 . The Compassion Satisfaction mean score was 37.48 ± 5.64 . The burnout mean score was 26.41 ± 7.3 and the mean score at the secondary traumatic stress scale was 27 ± 6.7 .

Conclusions: PTSD could result from stressful events encountered in the course of managing patients in mental health departments. Attention to post-traumatic event interventions may be useful both to reduce the rate of PTSD and to improve the professional quality of life among psychiatric staff.

Keywords: post-traumatic stress disorder; professional; psychiatric staff; quality of life

EPP0940**Exposure to violence and risk of post-traumatic stress disorder in family caregivers of psychotic patients**

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Introduction: Family caregivers of psychotic patients are exposed to violence and stress. However, associated psychological outcomes are poorly characterized in this population.

Objectives: The aim of this study was to clarify the relationship between violence directed towards caregivers of patients with psychosis and developing post-traumatic stress disorder (PTSD).

Methods: Participants were family caregivers of psychotic patients (n=95). They completed a questionnaire assessing sociodemographic characteristics. Sociodemographic and clinical data of patients were collected from medical records. We used the perceptions of prevalence of aggression scale (POPAS) to measure the frequency and severity of aggression directed at the respondent in the past and the Impact of Event Scale-Revised (IES-R) to evaluate PTSD.

Results: A rate of 75.8% of caregivers reported experiencing moderate to severe levels of aggression. Decreased contact with patient ($p=0.00$), male gender ($p=0.00$), older age ($p=0.00$) and parent relationship ($p=0.01$) of caregivers, diagnosis of schizophrenia or

schizoaffective disorder ($p=0,00$) and poor adherence to treatment ($p=0,00$) in affected relatives were associated with experiences of moderate–severe aggression. More than a half of caregivers (54.7%) reported potentially significant levels of PTSD which correlated with the level of aggression ($p=0.00$).

Conclusions: Our findings suggest that a large proportion of family caregivers of patient-initiated violence in psychosis reported experiencing a great distress and a high level of PTSD symptomatology. So, more attention should be paid to the support needs of caregivers who are faced with potentially life threatening aggressive behaviour by psychotic family members.

Keywords: Aggression; caregivers; psychosis; post-traumatic stress disorder

EPP0941

Factors associated with post-traumatic stress disorder in family caregivers of psychotic patients

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Introduction: An association can be found between patient with psychosis and perpetrating acts of violence. So, the caregiving role can impact negatively on psychosis carer psychological health and wellbeing.

Objectives: The aim of this study was to identify the factors associated with post-traumatic stress disorder (PTSD) in family caregivers of psychotic patients following exposure to aggression.

Methods: This cross-sectional study was carried out involving 95 family caregivers of psychotic patients followed in psychiatry. Data were gathered from caregivers about their experiences in providing care. Sociodemographic and clinical data of patients were collected from medical records. We used the perceptions of prevalence of aggression scale (POPAS) to measure the frequency and severity of aggression directed at the respondent in the past and the Impact of Event Scale-Revised (IES-R) to evaluate PTSD.

Results: The caregivers were male in 51.6% and with low educational level in 46.3% of cases. A rate of 75.8% of caregivers reported experiencing moderate to severe levels of aggression. More than a half of caregivers (54.7%) reported potentially significant levels of PTSD. Decreased contact with patient ($p=0.01$), male gender ($p=0.00$), older age ($p=0.00$), living far from patient ($p=0.00$), parent relationship of caregivers ($p=0.00$), diagnosis of schizophrenia or schizoaffective disorder ($p=0.00$) and poor adherence to treatment ($p=0.00$) in affected relatives were associated with the presence of PTSD following exposure to moderate to severe aggression.

Conclusions: These findings highlight the need for interventions to promote family psychoeducation and to provide psychosocial support for caregivers of patients in order to prevent the traumatic impact of violence on them.

Keywords: Aggression; caregivers; post-traumatic stress disorder; psychosis

EPP0942

Prevalence of post traumatic stress disorder in children with mild traumatic brain injury

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Introduction: Children with traumatic brain injury (TBI) are at risk for post-traumatic stress disorder (PTSD). The vast majority of TBI are of mild severity (MTBI), however, they may develop persistent neurophysiological symptoms.

Objectives: The purpose of this study was to investigate the incidence of PTSD in children with MTBI in Western Greece.

Methods: A one-year prospective study was conducted at the Children Hospital of Patras. A total of 175 children aged 6-14 years screened for risk of PTSD at one-week and one-month post-injury, completing the Child Trauma Screening Questionnaire (CTSQ). The Children’s Revised Impact of Event Scale (CRIES 13) was administered to the parents, to inquire their assessment of PTSD in the children. Statistical analysis was performed with IBM SPSS v.22.0

Results: There were 59 (33.7%) children (27.2% boys, 45.9% girls) whose screen result was at risk. At the rescreening one-month postinjury, 9.9% were still at risk. Parents assessed presence of PTSD in 19% of their children at one-week and in 3.9% at one-month post-injury. There was a positive correlation between parenting and child reporting on symptoms of PTSD in children. However, 23.4% mistakenly estimated their children did not experience stress while in fact they did and 24.2% mistakenly estimated the contrary.

Conclusions: The findings revealed the risk of PTSD even in mild TBI, justifying thus the screening to identify these children for intervention strategies. On the other hand, the rescreening demonstrated that not all at-risk children required intervention, since a natural remission in PTSD symptoms was observed one-month post-injury.

Keywords: PTSD; Children; brain; injury

EPP0945

Post-traumatic stress disorder and stroke in the elderly

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