professional seniority of between 6 and 10 years. The average K6 score was significantly higher in the public sector (9.01) compared to the private sector (7.35) (p-value = 0.01). The likelihood of experiencing psychological distress was lower in the private sector compared to the public sector (p= 0.034; OR= 0.37; 95% CI [0.14-0.95]).
Conclusions: These findings highlighted potential implications for the mental health of nurses based on their employment sector, showing that prolonged daily stress could have a negative impact on their psychological well-being.

Disclosure of Interest: None Declared

EPV0949

Screening for psychological distress among workaholic engineers

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Introduction: Several factors can threaten the mental health of engineers and seem to lead to anxiety and depressive disorders. Workaholism is an emerging phenomenon that has been the topic of much debate on its impact on workers' mental health.
Objectives: Determining the prevalence of workaholism among women and men engineers and screening for psychological distress among the workaholic engineers with a focus on gender differences.
Methods: This study is a descriptive-cross sectional analysis conducted on active engineers for one month. Data were collected through an online questionnaire, including socio-professional data, the WART (Work Addiction Risk Test) and the Hospital Anxiety and Depression scale.
Results: Our population consisted of 45 women and 62 men engineers with an average age of 28.62± 4.3 years and 29.61± 4.5 years respectively. A high risk of workaholism was present among 42.2% and 41.9% of women and men respectively.
Among workaholic engineers, anxiety and depression were present in 73.1% and 46.2% of cases respectively among men and in 78.9% and 42.1% of cases respectively among women.
Workaholic engineers women were likely to have anxiety (p=0.000) and reproach from their families for excessive professional commitment (p=0.007).
Among engineers men, associations were found between workaholism and anxiety (p=0.000), depression (p=0.024), the use of psychotropic medication (p=0.013), a job satisfaction less than 4/10 (p=0.024) and facing reproach from their families for excessive professional commitment (p=0.032).
Workaholism among both women and men engineers was negatively correlated with sports activities (p=0.006, p=0.042).
Conclusions: Workaholism is a significant phenomenon among engineers that can lead to anxiety and depression disorders. Therefore, the detection of early signs of workaholism and its associated symptoms seems essential among this vulnerable population in order to prevent its psychological impact.

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EPV0950

Impact of social support on the outcomes of upper limb occupational injuries

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Introduction: Upper limb occupational injuries constitute an important health problem affecting workers in their most productive years. The professional environment influences the outcomes of these injuries. The impact of social support among this vulnerable population may explain the difference in terms of outcomes of occupational injury.
Objectives: Evaluating the impact of social support in upper limb occupational injuries' outcomes.
Methods: A cross-sectional analysis was conducted during 9 months among workers victims of upper limb occupational injuries consulting for an Impairment Rating Evaluation. Socio-professional data and the accident' outcomes were collected. Social support was evaluated by the Social Support Scale. The pain was evaluated by a Visual Analogue Scale. Anxiety and depression were evaluated by the Arabic version of Hospital Anxiety and Depression scale. Unsuccessful return to work comprises all situations other than a satisfactory return to the same position held before the accident.
Results: Out of 90 injured workers, 78.9% were male. Hand and wrist injuries represented 63% of injured sites. The mean age was 43.10± 9.87 years. The mean pain scale was 5.75±2.78. The mean length of absence was 180.73±245.14 days. A proportion of 12.2 % had low social support. Unsuccessful return to work was found among 37.8% of participants. The prevalence of anxiety and depression were 31.1% and 20% respectively. Sleep disorders were mentionned by 56.7% of subjects. Low social support was associated with unsuccessful return to work (p=0.000), negative outlook of the professional future (p=0.000) and depression (p=0.002). No association was found with pain, length of absence and sleep disorders.
Conclusions: Social support may influence the outcomes of upper limbs occupational injuries. This finding highlights the need for further examination of social factors among this vulnerable population.

Disclosure of Interest: None Declared

EPV0951

Efficacy of a modified remotivational program for persons with Schizophrenia in community mental health center

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Introduction: Patients with schizophrenia often experience deficits in motivation, which can significantly impact their functional