

Neurosciences, Pepit, Paris, France; ⁵Université Paris Nanterre, UFR Spse, Laboratoire Clipsyd, Nanterre, France and ⁶Inserm, U1018, Cesp, Paris, France

*Corresponding author.

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Introduction: Health student's mental health is considered a public health issue that dramatically increased with COVID 19's pandemic. However, very few studies assessed the prevalence of mental health in medical, pharmacist, and dental students.

Objectives: Our goal was to assess mental health in health students from the same university one year after pandemic's beginning and look at for associated factors.

Methods: An online survey was realized in Paris university which has the 3 specialties (medicine, pharmacy, and dental). We used the Hospitalization Anxiety and Depression scale, Composite International Diagnostic Interview - Short Form questionnaire, Maslach Burnout Inventory (with 2 versions (Student survey and Human Services Survey)). We also asked for 12 months of suicidal ideation, humiliation, sexual harassment, and sexual aggression. We did multivariable logistic regression analyses to identify Major Depressive Episode (MDE) associated factors.

Results: We included 1925 students: 95 dental, 233 pharmacists, 541 medical preclinic, 587 medical clinic and 469 residents. Overall prevalence of 7- days anxiety symptoms, 7- days depressive symptoms, 12-month MDE, 12-month suicidal ideation, humiliation, sexual harassment and sexual aggression were 55%, 23%, 26%, 19%, 19%, 22% and 6% respectively. There were significant differences between groups for anxiety and depressive symptoms and MDE ($p < 0.001$ for all). Associated factors to MDE in multivariable logistic regression were humiliation (OR=1.71, IC95[1.28-2.28]), sexual harassment (OR=1.60, IC95[1.19-2.16]), sexual abuse (OR=1.65, IC95[1.04-2.60]) and moderate (OR=1.49, IC95[1.17-1.90]) or important (OR=2.32, IC95[1.68-3.20]) subjective financial difficulties.

Conclusions: Health student's prevalence of psychiatric symptoms is significant, but it seems possible to intervene on several risk factors.

Disclosure: No significant relationships.

Keywords: Anxiety; Depression; burnout; students

EPV0735

Socioeconomic factors and regional differences in mental disorder-based disability pensioning in Finland

T. Karolaakso^{1*}, R. Autio¹, T. Näppilä¹, K. Nurmela¹, H. Leppänen², P. Rissanen¹, M. Tuomisto¹, S. Karvonen³ and S. Pirkola¹

¹Tampere University, Faculty Of Social Sciences, Tampere, Finland;

²Tampere University, Medicine And Health Technology, Tampere, Finland and ³The Finnish Institute for Health and Welfare (THL), Health And Welfare, Helsinki, Finland

*Corresponding author.

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Introduction: Prior literature has indicated low socioeconomic status (SES) and regional differences as epidemiological risk factors for disability pension (DP) due to mental disorders.

Objectives: Our studies aimed to examine these associations and differences in greater detail, with separate consideration of the risk factors for mood disorders (F30–39) and non-affective psychotic disorder (F20–29) DP.

Methods: Subjects (N = 36 879) were all those granted DP due to a mental disorder for the first time between 2010 and 2015 in Finland. All the subjects were matched with three controls. Education, income and occupational status were used as measures of SES. Conditional logistic regression models were used to study SES differences. Negative binomial regression analysis was used to study the levels of DP risk in the Finnish hospital districts.

Results: DP recipients had low educational and income levels and often lived alone. The risk of DP was greater in white-collar occupational groups compared with blue-collar workers. Students had the greatest risk of DP for all mental and mood disorders. Significant differences in the regional mental disorder DP risks did not appear to follow the traditional Finnish health differences.

Conclusions: We found evidence of SES factors and regional variation associating with mental disorder-related severe loss of working and studying ability in a disorder-specific way. The increased risk of white-collar worker DP could be related to the psychosocially demanding contemporary working life. Regional variation in DP may at least partly relate to differences in regional mental health service systems.

Disclosure: No significant relationships.

Keywords: Disability pension; Socioeconomic; Mental health services; Regional differences

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Mortality from suicide among adolescents and young people in the Altai Republic, Russia, for the period of 1990-2019

N. Semenova

Scientific Research Institute of Medical Problems of the North, Department Of Child's Physical And Mental Health, Krasnoyarsk, Russian Federation

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Introduction: The Altai Republic (AR) is the national subject of the Russian Federation where suicidal situation is unfavorable as the death rate from suicide exceeds the national rates by three times. The high level of suicide among adolescents and young people is especially alarming.

Objectives: To analyze the dynamics of mortality from suicide among adolescents and young people in the AR for the period from 1990 to 2019.

Methods: Data on mortality of the population were obtained from the Russian databases of demographic indicators and analyzed in terms standardized per 100,000 population.

Results: The highest mortality rates from suicide are recorded in the 20-24 age group. The suicide rate, compared to 1990, decreased slightly from 82.5 (in 1990) to 79.7 per 100 thousand (in 2019). The dynamics of mortality from suicide among adolescents aged 15-19