Materials and Methods A longitudinal cohort study was carried out between July 2020 and July 2022 in a large Italian hospital. At T1 (July 2020-July 2021), 990 HCWs took part in the study. For each subject, we administered a set of scales General Health Questionnaire (GHQ-12), Impact of Event Scale (IES-R), General Anxiety Disorder (GAD-7). The same set was re-administered at T2 (July 2021-July 2022). We performed McNemar’s test to measure potential changes in symptoms trajectories in time and Generalized Estimating Equation (GEE) to evaluate potential risk factors associated with scorings above the cut-off.

Results Three hundred and ten subjects participated to the follow-up evaluation. At T2, percentages of overpassing relevant cut-offs were significantly lower (p<0.001) than T1 for all scales (23% vs 48% for GHQ-12; 11% vs 25% for IES-R; 15% vs 23% for GAD-7). Being a nurse (IES-R OR=3.21, 95%CI 1.92–9.23; GAD-7 OR=2.34, 95%CI 1.25–4.37) or a health assistant (IES-R OR=4.43, 95%CI 1.12–13.6) and having had an infected family member (GHQ-12 OR=1.88, 95% CI 1.01–3.49) resulted as risk factors for psychological distress. Differently from T1, gender and working in COVID-19 area did not show significant associations with psychological symptoms.

Conclusions In the second year of the pandemic, mental health among HCWs improved compared to the previous year and risk factors for psychological distress were slightly different. Longitudinal studies may help occupational health and safety professionals to address various levels of prevention.

Results Of the 1453 participants, 54.2% reported withholding treatment due to fear of exposure (4.3%), as directed by their service (76.5%) or both (19.2%). Participants who withheld treatment reported higher rates of PTSD (M=2.6, p < .01) and depression (M=8.2, p < .001) symptoms than those that did not withhold treatments (MPTSD=2.3; Mdepression=6.4). Reason for withholding treatment and PTSD symptom severity were associated (p<.01). Paramedics who withheld treatment due to fear of exposure were more likely to report probable PTSD symptoms (23.5%) than those who withheld treatments as directed by their service (8.7%) or both (12.2%). Depression symptom severity did not differ by reasons for withholding treatment.

Conclusions Withholding treatment is potentially traumatic and may influence the development of depression and PTSD symptoms. Withholding due to fear of exposure rather than being directed to increased PTSD symptoms. Further research will investigate the mental health impact of withholding treatment and reported reasons for withholding over time.

Bullying/Stress/Violence

P-152 MENTAL HEALTH AND EMPLOYMENT CONSEQUENCES AMONG INFORMAL CAREGIVERS AT WORK A DANISH NATIONWIDE REGISTER-STUDY

Introduction Frequencies of mental health conditions are increasing among children and adolescents. Providing long-term informal care for family members has been associated with detrimental stress-related outcomes. This study examines health and job impacts for working caregivers, who have children with mental disorders.

Material and Methods This Danish nationwide register-study is part of the project ‘Informal caregivers at work’ (www.ppjob.dk), phase II, and examines health and job impacts for primary caregivers to children with a mental disorder in the period from 2000 to 2005. We will assess these possible longitudinal associations with follow-up up to 10 years after their child’s incident mental disorder. The exposure group (i.e., primary caregivers to children with a mental disorder) will be matched to a similar reference group (primary caregivers to children without a mental disorder) established from the background working population. We will use data from national and administrative registers merged with psychosocial job-exposure matrices (www.doc-x.dk) to evaluate the mitigating role of specific psychosocial factors on the associations between information caregiving and negative outcomes, including if specific occupational groups carry particular risk. The present study will be conducted between 2023–2024. Communication with target-population representatives and stakeholders

Abstracts
Respiratory effects/Diseases

P-160  COMPARISON OF OCCUPATIONAL ASTHMA CHARACTERISTICS RELATED TO HIGH AND LOW MOLECULAR WEIGHT AGENTS


10.1136/OEM-2023-EPICOH.103

Introduction Occupational asthma (OA) is one of the major occupational health problems given its high prevalence and significant socio-economic impact. Several studies have focused on analyzing the differences between irritant-induced asthma and allergen-induced asthma, but few researchers have evaluated the impact of the molecular weight of allergens on asthma phenotype.

Objective To describe the socio-professional characteristics of individuals with OA caused by low molecular weight agents (LMW) and those with OA caused by high molecular weight agents (HMW).

Methods Between 2016 and 2022, a cross-sectional descriptive study was conducted among asthmatic workers referred to the occupational medicine department of Charles Nicolle Hospital in Tunis for diagnostic and etiological exploration. Socio-professional data were collected from medical records. We have focused on the agents’ nature to which each was exposed in the course of his work to obtain two study groups A group of workers with asthma due to an LMW (G1) and a group of workers with asthma due to an HMW (G2). The analysis of the data was compared between the two groups.

Results A total of 51 workers were included (G1=42; G2=9). The mean age was 47.78 ±9.2 years (G1=49.7 ±8.8 years; G242.7±8.3 years) with a female predominance in both groups (G1=56.8%; G2=71.4%). The mean occupational seniority was 21.33 ± 9 years (G212.3 ± 9.1 years; G218.7 ± 8.3 years). The average time between the onset of the first symptoms and the start of labor was G1 13.27±9.8 years and G2 8.38 ± 6.48 years. The most registered LMW agents were isocyanates (32.4%) and formaldehyde (27%). The most observed HMW agents were vegetable textile dust (78.6%).

Conclusion More large-scale studies are planned to analyze whether patients with (OA) caused by LMW agents differed from patients with OA caused by HMW with regard to risk factors, asthma presentation, and severity.

Noise

P-165  CAN ACOUSTIC TRAUMA BE CONSIDERED AN ACCIDENT AT WORKPLACE?


10.1136/OEM-2023-EPICOH.104

Introduction Acoustic trauma exists in the workplace and its evolution can be spontaneously favorable as well as serious.