

EPV0799

Cancer mortality and morbidity among patients with schizophrenia: A hospital-based cohort study, 1992-2020

M. Drevinskaite^{1,2*}, A. Kaceniene², R. Stukas¹, A. Germanavicius^{3,4} and G. Smailyte^{1,2}

¹Department of Public Health, Institute of Health Sciences, Vilnius University, Faculty of Medicine; ²Laboratory of Cancer Epidemiology, National Cancer Institute; ³Clinic of Psychiatry, Institute of Clinical Medicine, Vilnius University, Faculty of Medicine and ⁴Department of Psychiatry, Republican Vilnius Psychiatric Hospital, Vilnius, Lithuania
*Corresponding author.

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Introduction: The inconsistency in cancer incidence and mortality rates in terms of cancer site reported among patients with schizophrenia has been an interesting topic in epidemiology, and additional studies are necessary to gain a more comprehensive understanding.

Objectives: Due to the inconsistency of the evidence about the cancer risk among patients with schizophrenia, the aim of this study was to analyse cancer mortality and morbidity in patients with schizophrenia treated in a single centre in Lithuania during the study period of 1992-2020.

Methods: A retrospective cohort study was conducted in Vilnius Republican Psychiatric Hospital, the biggest specialised psychiatric hospital in Lithuania, with approximately 5000 hospital admissions annually. The patients' cohort was established by identifying all patients with the diagnosis of schizophrenia (ICD-10 code F20) in the hospital database from 1 January 1992 until 31 December 2017. The cancer cases and cancer deaths in the cohort were identified in the Lithuanian Cancer Register through linkage procedures. The analysis of risk was based on a comparison of observed and expected numbers of cancers and deaths. Expected number of cancer cases were calculated by multiplication of the exact person-years under observation in the cohort by sex, calendar year and a 5-year age-group-specific national incidence and mortality rate. All statistical analyses were carried out using STATA 15 statistical software.

Results: During the follow-up, out of 8553 patients, 673 cases of cancer were diagnosed in both sexes. Statistically significantly lower risk for overall cancer incidence was observed in men (SIR 0.74, 95% CI 0.66-0.83), but not in women (SIR 1.07, 95% CI 0.97-1.18). We observed lower risk for pancreatic cancer (SIR 0.36, 95% CI 0.14-0.96), non-melanoma skin cancer (SIR 0.54, 95% CI 0.33-0.88) and prostate cancer (SIR 0.69, 95% CI 0.55-0.87) in men and higher risk for malignant neoplasm of liver (SIR 2.58, 95% CI 1.53-4.36) and skin melanoma (SIR 2.03, 95% CI 1.12-3.66) in men and for breast cancer (SIR 1.38, 95% CI 1.14-1.66) and corpus uteri cancer (SIR 1.56, 95% CI 1.18-2.07) in women (Table 1). Statistically significant lower overall cancer mortality risk was observed in men (SMR 0.82, 95% CI 0.70-0.96), while in the women's group, risk of cancer deaths was significantly higher compared to the general population (SMR 1.28, 95% CI 1.11-1.48).

Conclusions: The current results of our study indicate lower risk of overall cancer incidence and mortality in male patients with schizophrenia, while female patients had a higher mortality risk, alongside variations in the risk of different cancer types. This information is important not only for patients, but for healthcare specialists to

develop effective disease-specific preventive interventions and programmes.

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EPV0800

The global burden of teacher burnout: Evaluating the roles of workload and social support in diverse educational contexts

A. El Alaiki^{1*}, F. Hadrya², Z. Boumaaize¹, H. Guider¹, M. A. Lafraxo³, A. Soulaymani¹, A. Mokhtari¹ and H. Hami¹

¹Laboratory of Biology and Health, Faculty of Science, Ibn Tofail University, Kenitra; ²University Hassan First of Settat, Higher Institute of Health Sciences, Health Sciences and Technologies Laboratory, Settat and ³Higher Institute of Nursing Professions and Health Techniques, Oujda, Morocco

*Corresponding author.

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Introduction: Teacher burnout is a pervasive challenge across the global educational sector, profoundly impacting educator well-being and the overall quality of education. A robust body of research highlights the link between organizational factors and burnout, underscoring the urgent need for an in-depth understanding of these dynamics across different cultural contexts.

Objectives: This systematic review aims to delineate how workload and social support dynamically influence teacher burnout. Through a detailed examination of the complex interrelationships among these factors, we endeavor to elucidate the underlying mechanisms by which they influence teachers' emotional and psychological health, thereby providing critical insights into potential evidence-based interventions.

Methods: We synthesized findings from a total of 40 relevant studies (35 cross-sectional and five longitudinal studies), adhering to the 2020 PRISMA guidelines. We utilized the Newcastle-Ottawa Scale for quality assessment due to its rigorous criteria, examining the impact of workload and social support on teachers' stress levels across diverse educational settings.

Results: High workload and insufficient social support were identified in 75% of the studies as significant predictors of emotional exhaustion among teachers globally. Excessive workloads were correlated with increased burnout levels, which negatively affected their mental health and job satisfaction. Conversely, strong social support networks, including collegial relationships and administrative support, were found to effectively mitigate burnout, bolstering teachers' resilience and overall well-being. Furthermore, the review underlined that the quality of the evidence was moderate, highlighting the need for further, more robust research.

Conclusions: This review confirms the complex interactions within organizational dynamics that contribute to teacher burnout. It underscores the critical need for tailored interventions, such as professional development in stress management and policies that foster supportive work environments. By strategically addressing workload challenges and enhancing social support, stakeholders can significantly improve teacher well-being and reduce burnout risks globally.

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