

greater use that is being made to treat COVID-19 and the higher doses used in severe cases (up to 120 mg).

**Conclusions:** To conclude, we need to know characteristics of these episodes in order to be able to prevent and treat them properly (minimum effective dose and less time), since they will probably occur more frequently at this time.

**Keywords:** SARS-CoV-2; corticosteroids; Psychiatric symptoms; steroid-induced psychosis

## EPP0467

### Post-traumatic stress disorder among tunisian healthcare professionals facing the pandemic coronavirus (COVID-19)

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**Introduction:** The new coronavirus has spread rapidly across the planet confining entire populations, filling hospitals overwhelmed by massive arrivals of patients This new health situation was traumatic especially for health-professionals

**Objectives:** To study the prevalence and predictors of post-traumatic stress disorder, among health-workers.

**Methods:** Our study was descriptive and analytical cross-sectional, between May until June 2020. An anonymous online-survey was sent to collect those parameters Sociodemographic-information Physical symptoms The existence of contact with a suspected case The need for quarantine The stressful event The state of mental health, using: PCL-5: 20 items which measures the 20 symptoms of post-traumatic stress-disorder according to DSM-5. PSQI: 9 questions to see the existence or not of a disturbance in sleep

**Results:** 125 participants: 28 university-hospital doctors, 55 residents, 5 interns, 4 specialist-doctors, 2 general-practitioners, 14 nurses, 14 senior-technicians, 2 midwives and a pharmacist. The average seniority at the job was 6 years. Two factors were the most stressful: The characteristics of this pandemic 37.6% The fear of caching the virus and transmit it to their families: 37.6%. 42.4% of participants presented a post-traumatic stress disorder. 3 parameters were correlated with post-traumatic stress disorder: young age, having children ( $p = 0.007$ ) and fewer years of professional-experience. This pandemic altered the quality of sleep of caregivers, 62.4% of them had a bad quality of sleep. The bad sleepers developed more post-traumatic stress disorder

**Conclusions:** This health crisis had a major impact on the mental health of our heroes that is why we should provide them with the necessary psychological support.

**Keywords:** Post traumatic Stress Disorder; COVID-19; health professionals

## EPP0470

### Resilient care in times of covid: The stress buddy

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**Introduction:** The COVID-19 outbreak poses a challenge for health care professionals due to a surge in care demands, overwork, fear of contagion and concerns on the availability of protective equipment, and coping with distress of patients and their families. Although there is emerging evidence on prevalence of stress and its predictors, less is known on the trajectory of stress symptoms and the differences between cohorts of health care professionals.

**Objectives:** To sustain and restore health care professionals the Leiden University Medical Center has launched the Digital Stress Buddy, a mobile app, to assess psychological stress, depressive symptoms, anxiety and posttraumatic stress symptoms.

**Methods:** Participants fill in a 14-item questionnaire on stress and resilience resources, followed by a COVID-related questionnaire and finally a set of validated questionnaires on depression and anxiety (DASS-21), posttraumatic stress-symptoms (IES-R), burn-out (CBI) and resilience (RES).

**Results:** To date, 959 health care workers have completed the stress monitor, of whom 223 (23%) showed relevant stress levels. Within this group, anxiety and posttraumatic symptoms were most prevalent (45%), followed by depressive symptoms (15%). Predictors of stress were being female, coping with distress of patients and their families, teleworking, and overwork.

**Conclusions:** By identifying vulnerabilities and resilience for psychological distress, we are able to tailor the support interventions for health care workers within our hospital. This is an ongoing study and future follow-up during the second wave of the pandemic will provide more insight on the trajectories of stress-related symptoms.

**Conflict of interest:** No significant relationships.

## EPP0471

### Psychosocial consequences of the COVID-19 social isolation in the italian general population: Preliminary results

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**Introduction:** Although some philosophers recognize in the loneliness an evolutionary existential process, a 2019 declaration of World Health Organization underlines the major health problem in the worldwide is the perception of state of loneliness. The feeling of loneliness linked to the social isolation (SI) or a lack of social opportunity activate a stressful condition associated to an increase of social dependence. This 'learned social helplessness' can be dangerous so that it is associated with an increased prevalence of suicides (Cacioppo and Cacioppo, 2018; Bzdok and Dunbar, 2020). Considering the impact of loneliness on the mental health we can assume that the COVID-19 forced SI affects the state of health and psychosocial well-being.

**Objectives:** To evaluate the psychosocial impact of the SI in Italy.

**Methods:** An ad hoc survey have been sent from May to June 2020.

**Results:** These results refer to the Italian survey of a multicenter investigation with partnership of Spain and Portugal universities. The investigation is in progress being a longitudinal study. Of the total 292 subjects investigated (age xM: 34; sD14.13), 118 (40,41%) had been in SI. Subjects forced into SI report more interference in the life satisfaction ( $p=0.003$ ) though no more anxiety, depression and hostility we found in the SI group.

**Conclusions:** During the phase 2 of Italian COVID-19 diffusion, we found an impact on the life satisfaction more than psychopathology. We can assume that the impact of mental health it may occur as the reduction in life satisfaction associated with forced SI continues.

**Keywords:** social isolation; Health Survey; COVID-19; Life satisfaction

## EPP0472

### Emergency state in COVID-19 pandemic: Hungarian patients' experiences

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**Introduction:** The COVID-19 pandemic made necessary the declaration of emergency state in Hungary from 11 March 2020 to 18 June 2020. During this period hospitals were reserved for emergency use, ambulatory care was limited and replaced by telemedicine.

**Objectives:** We assessed the opinions of patients of two ambulatory psychiatric care units in Budapest regarding the emergency state.

**Methods:** We enrolled 438 outpatients in the survey (305 women and 133 men, mean age:  $51.9 \pm 16.2$  years). Our questionnaire comprised 10 items on emotions and mental state and a 12 item „Problem evaluation scale” (included 'Fear', 'Isolation' and 'Health status' subscales). General linear model (GLM), pairwise comparison and Tukey's post hoc test were performed.

**Results:** Up to 34% of patients considered that their condition worsened during this period, but 12% of them thought that this was not related to emergency state. Twice as many participants (12.8%) were concerned about their financial situation than about their health status (6.1%). Worsening health status, higher fear and more common adaptation difficulties were reported by patients < 50 years, than by subjects > 50 years ( $p=0.001$ ;  $p=0.045$ ;  $p=0.003$ ). Isolation caused higher distress among women than in men ( $p=0.003$ ). The abundance of information caused higher distress in patients with anxiety disorder than with psychotic disorders ( $p=0.024$ ). Patients with affective disorders perceived higher vulnerability compared to subjects with psychotic disorders ( $p=0.004$ ).

**Conclusions:** Adaptation difficulties were reported by the half of the sample. Depletion of psychological resources can be expected during the next stage of the pandemic.

**Keywords:** isolation; adaptation; pandemic; Fear

## EPP0473

### Effects of the COVID-19 pandemic on mental health - what do we know so far?

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**Introduction:** The devastating effects of the current pandemic are profoundly affecting peoples' physical and psychological health. Numerous studies on the effects of previous infectious outbreaks have been published. Similarly, an increasingly growing body of research on COVID-19 has been developed and released, reporting a substantial psychological impact of both the outbreak and the response, suggesting that the population may express high levels of psychological symptoms.

**Objectives:** This presentation aims to synthesize existent literature that reports on the effects of COVID-19 on psychological outcomes of the general population, groups with higher vulnerability and its associated risk factors.

**Methods:** Bibliographic research was made through scientific databases such as PubMed and EMBASE. No time limit was used. Pertinent articles were carefully reviewed for additional relevant citations.

**Results:** Generally, there is a higher prevalence of symptoms of adverse psychiatric outcomes among the public when compared to the prevalence before the pandemic. Psychological reactions to pandemics include maladaptive behaviours, emotional distress and symptoms of stress, anxiety, depression, and avoidance behaviors. The groups known to be at higher risk for mental health problems during the pandemic are: women, healthcare workers, people under 40 years old and with chronic diseases. Other risk factors are: frequent exposure to social media/news relating to COVID-19, poor economic status, lower education level, and unemployment.

**Conclusions:** The COVID-19 pandemic represents an unprecedented threat to mental health. In addition to flattening the curve of viral transmission, special attention needs to be paid to the challenges it poses to the mental health of the population at a global scale.

**Keywords:** COVID19; mental; health; psychological

## EPP0475

### The impact of protective face masks and coverings on patient-health provider communication

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**Introduction:** Amid the COVID-19 pandemic the trend points to universal use of protective face masks. The impact posed on verbal and non-verbal communication by masks is yet another challenge to be addressed in clinical care.