

therapy on negative symptoms, we were able successfully switch therapy form several different antipsychotic combinations to monotherapy and gain clinical benefits (Rancans et al, 2020).

Disclosure: No significant relationships.

Keywords: Treatment; Antipsychotics; schizophrénia

Update on the mental health consequences of the COVID-19 pandemic

S0131

Self-reported mental health among individuals with mental disorders during the COVID-19 pandemic

S. Østergaard^{1*}, P. Kølbaek², M. Speed^{1,3} and O. Jepsen⁴

¹Department Of Affective Disorders, Aarhus University Psychiatric Hospital, Aarhus, Denmark; ²Psychosis Research Unit, Aarhus University Hospital - Psychiatry, Aarhus N, Denmark; ³Department Of Affective Disorders, Aarhus University Hospital - Psychiatry, Aarhus N, Denmark and ⁴Department Of Affective Disorders, Aarhus University Hospital, Aarhus, Denmark

*Corresponding Author.

doi: 10.1192/j.eurpsy.2021.126

Background: Individuals with mental illness may be particularly vulnerable to the negative impact that the coronavirus disease 2019 (COVID-19) pandemic seems to have on mental health. Most prior studies on this topic are however limited by non-random sampling, lack of information on non-respondents, and self-reported diagnoses. Here, we aimed at overcoming these limitations by means of random sampling in a population of clinically diagnosed patients, acquisition of clinical and socio-demographic data on non-respondents, and weighting of results informed by attrition.

Methods: We conducted a cross-sectional questionnaire-based online survey inviting six-thousand randomly drawn patients from the psychiatric services of the Central Denmark Region. They survey data were merged with sociodemographic- and clinical data from medical records on all invitees, which enabled analysis of attrition and weighting of results. The questionnaire included the 18-item Brief Symptom Inventory (BSI-18), the 5-item World Health Organization Well-Being Index (WHO-5), and 14 questions evaluating the perceived severity of symptoms during the four-week nationwide lockdown of Denmark in March/April 2020 – using the pre-pandemic period as reference. Reasons for worsening or improvement in mental health during lockdown were also reported.

Results: The preliminary results are as follows: The response rate was ≈20%. Approximately half the respondents reported that their mental health had deteriorated during lockdown, while the other half reported either no change (≈33%) or improvement (≈16%). The most commonly reported reasons for deterioration in mental health were disruption of routines and loneliness.

Conclusion: The final results will be shown at the conference.

Disclosure: No significant relationships.

Keywords: COVID-19; psychopathology; pandemic; mental health

The four views of the future of psychiatry

S0133

The future of psychiatry: The perspectives from a senior psychiatrist

N. Sartorius

Mental Health, Association for the Improvement of Mental Health Programs, Geneva, Switzerland
doi: 10.1192/j.eurpsy.2021.127

The future of psychiatry as a discipline (and as the main source of knowledge in the construction and functioning of mental health services) can best be grasped on the basis of an examination of the development of psychiatry over the past century in the light of current options for its functioning. Such an examination demonstrates that psychiatrists will have to expand their field of work to include the management of comorbidity of mental and physical disorders and public health approaches to the primary prevention of mental and other brain disorders. Their engagement in research will have to become restricted to psychopathology and participation in the formulation of hypotheses which will be tested in laboratory and field work; and their involvement in teaching about mental health and illness will have to undergo a fundamental change in terms of content, methods and evaluation of effects of education which they will organize. The presentation will focus on the future tasks of psychiatrists in these areas

Disclosure: No significant relationships.

Keywords: Future of psychiatry

S0134

From mid-career professor to chairperson: What remains similar what is different?

P. Falkai

Department Of Psychiatry And Psychotherapy, University of Munich, Munich, Germany
doi: 10.1192/j.eurpsy.2021.128

For a Mid-career Professor in Germany, there are defined clinical and teaching responsibilities. One can focus either on one's research or on clinical work and teaching. When tasks are becoming more demanding or significant overarching decisions need to be taken, there is always a chairperson to be asked or to help delegate tasks. As chairperson, one is mostly independent from other persons except for the dean of the medical faculty. One is however, at least in Germany, the chairpersons fully responsible for keeping up teaching, patient care, research as well as running the department. The Chairperson is measured by the achievements of these four tasks. It need special attention to keep up a balanced time schedule to cover clinical care, research, teaching and departmental management. A good chairs means working together with your staff on long-term goals, developing the department fruitfully and trying to fulfil these goals.

Disclosure: No significant relationships.

Keywords: Mid-career; Professor; Chairperson; Responsibilities

S0135

From mentee to mentor: Becoming an early career professor in psychiatry

A. Fiorillo

Department Of Psychiatry, University of Campania "L. Vanvitelli", Naples, Italy

doi: 10.1192/j.eurpsy.2021.129

In the last years several social, economic and scientific changes have occurred, which have had a significant impact on psychiatric clinical practice, research and training. Some traditional syndromes seem to be disappeared, while new forms of mental health problems are coming to psychiatric consultation. The psychosocial distress caused by the current ongoing crisis due to the COVID-19 or the maladaptive use of the new technologies among the younger generation, are some good examples of psychosocial factors causing new mental health disturbances. Psychiatrists and mental health professionals are not yet well-equipped for managing these, which represent major unmet needs in modern clinical practice. Furthermore, in this evolving social context, the societal role of psychiatrists is completely changed, moving from being "alienist" working in asylums to "mental health care providers" working in the communities. The role of psychiatrists is to improve global mental health and to promote well-being in the general population according to a life-span perspective. Nowadays, early career psychiatrists report several unmet needs that we are not able to manage. In this symposium, I will describe my personal experience of moving from my role of mentee to mentor.

Disclosure: No significant relationships.**Keywords:** early career psychiatrist; mentor; Future of psychiatry

S0136

The way forward: Insights and suggestions from an early career psychiatrist

M. Pinto Da Costa

Unit For Social And Community Psychiatry (who Collaborating Centre For Mental Health Services Development), Queen Mary University of London, London, United Kingdom

doi: 10.1192/j.eurpsy.2021.130

People with psychosis are commonly socially isolated, both due to their condition, and the stigma towards them. Remote volunteering over smart-phone can be a way to overcome social isolation and physical distance, promoting social inclusion. This talk will present the qualitative findings from a feasibility study – the Phone Pal – which connected in the United Kingdom patients with psychosis with community volunteers, to communicate with each other for up to 12 weeks via smart-phone (through texts, WhatsApp messages, e-mails, audio or video calls). Participants described at the end of the study their experiences of communicating with their match over the smart-phone in terms of frequency, duration and timing of communication, their communication method, content and style, and the changes of communication over time. Several participants reported a positive impact of being connected with someone, meeting a new person, feeling supported and feeling better, and a few described challenges, such as disappointment, guilt and burden. These

interview findings show that some matches were able to develop a positive and friendly relationship, and were willing to continue to be in contact with each other beyond the study duration. It is hoped that this talk will generate a lively discussion, gathering further understanding about the potential benefits and challenges of remote volunteering over smart-phone for patients and volunteers, and its potential usefulness in the current pandemic times.

Disclosure: No significant relationships.**Keywords:** Interviews; Volunteering; Technology; psychosis**Integrating real world evidence and mobile technology to reduce treatment gaps in mental healthcare: Lessons from COVID-19**

S0137

Insights from electronic health record data to improve mental health service delivery during the COVID-19 pandemicR. Patel^{1*}, J. Irving¹, A. Brinn¹, M. Broadbent², H. Shetty², M. Pritchard², J. Downs³, R. Stewart³ and R. Harland²

¹Department Of Psychosis Studies, Institute of Psychiatry, Psychology & Neuroscience, KCL, London, United Kingdom; ²Nihr Maudsley Biomedical Research Centre, South London and Maudsley NHS Foundation Trust, London, United Kingdom and ³Department Of Psychological Medicine, Institute of Psychiatry, Psychology & Neuroscience, KCL, London, United Kingdom

*Corresponding Author.

doi: 10.1192/j.eurpsy.2021.131

Background: Remote consultation technology has been rapidly adopted due to the COVID-19 pandemic. However, some health-care settings have faced barriers in implementation. We present a study to investigate changes in rates of remote consultation during the pandemic using a large electronic health record (EHR) dataset.

Methods: The Clinical Record Interactive Search tool (CRIS) was used to examine de-identified EHR data of people receiving mental healthcare in South London, UK. Data from around 37,500 patients were analysed for each week from 7th January 2019 and 20th September 2020 using linear regression and locally estimated scatterplot smoothing (LOESS) to investigate changes in the number of clinical contacts (in-person, remote or non-attended) with mental healthcare professionals and prescribing of antipsychotics and mood stabilisers. The data are presented in an interactive dashboard: <http://rpatel.co.uk/TelepsychiatryDashboard>.

Results: The frequency of in-person contacts was substantially reduced following the onset of the pandemic (β coefficient: -5829.6 contacts, 95% CI -6919.5 to -4739.6, $p < 0.001$), while the frequency of remote contacts increased significantly (β coefficient: 3338.5 contacts, 95% CI 3074.4 to 3602.7, $p < 0.001$). Rates of remote consultation were lower in older adults than in working age adults, children and adolescents. Despite the increase in remote contact, antipsychotic and mood stabiliser prescribing remained at similar levels.