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emotional lability, organic depression, mild cognitive impairment and delirium. In 23.8% of patients, neurotic disorders were observed in the form of depressive reactions, panic and generalized anxiety disorder. In one case (4.8%), acute polymorphic psychosis with symptoms of schizophrenia was diagnosed. The PHMD group includes affective disorders - 45.7%; organic disorders, including dementia 26.1%; schizophrenic spectrum disorders -19.6% and neurotic somatoform disorders - 8.7%. In the acute and subacute periods of COVID-19, acute psychotic states (APS) developed in both groups of patients (in 23.3% and 30.4%, respectively) in the form of delirium, psychotic depression, or polymorphic psychosis. APS were more common in PHMD patients with organic (50%) and schizophrenic spectrum disorders (33.3%) with a predominance of delirium. In the long-term period of COVID-19, PHMD patients more often than non-PHMD (60.9% and 38.1%) developed cognitive impairment (CI), especially in schizophrenia-like (77.8%) and organic (83.3%) disorders. CI developed twice as often after APS (89.5% and 39.6%, p<0.001), reaching the degree of dementia in 15.8% of cases. APS were significantly associated (p<0.05) with the development of CI (0.567733), the age of patients (0.410696) and the presence of previous cerebrovascular insufficiency (0.404916).

Conclusions: The age-related features of the mental consequences of COVID-19 are the occurrence of APS in the acute period of infection and the deterioration of cognitive activity at a remote stage. The PHMD patients, especially with disorders of organic and schizophrenic spectrum, were found to be more vulnerable to the effects of COVID-19. In them, the occurrence of APS was a risk factor for the development of dementia, while in primary diseased, and patients with affective and neurotic disorders, CI was reversible or had the character of a mild cognitive disorder.

Disclosure of Interest: None Declared

EPP0573

Youth mental health resilience during the COVID-19 pandemic: A critical review

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Introduction: The COVID-19 pandemic has had a profound impact on mental health worldwide because of complex societal disruptions and neuropsychiatric consequences stemming from SARS-CoV-2 infection. All age groups have been affected by this pandemic, with particular focus on the vulnerabilities faced by children and adolescents who have experienced multiple stressors. These stressors involve various emotional, physiological, and behavioral challenges stemming from different factors, such as mandatory social distancing due to school closures, increased parental stress caused by the incessant spread of the pandemic, severe trauma from losing family members, a surge in cyberbullying linked to higher online activity, and a worrying rise in unreported incidents of child abuse. Empirical reports document an increase in

suicidal tendencies and suicide attempts among adolescents during this crisis.

Objectives: This study conducted a comprehensive review of existing literature focused on the mental health of individuals aged 0-24 years in both pre-pandemic and pandemic eras. This study conducted comparative analyses to identify significant changes.

Methods: Adhering strictly to the PRISMA guidelines, we conducted comprehensive searches on Google Scholar and PubMed to identify peer-reviewed articles published in English.

Results: Most studies revealed deteriorating mental health conditions among adolescents and young adults following pandemic onset. These conditions were characterized by high rates of depression, anxiety, and psychological distress. Furthermore, several studies have identified a notable increase in negative emotions and heightened feelings of loneliness. Primary school children experienced a decline in attention span, emotional regulation, hyperactivity, and enthusiasm for academic engagement.

Conclusions: Based on the analysis of data from both the prepandemic and pandemic periods, it is evident that the COVID-19 pandemic had a detrimental impact on the mental well-being of children and young individuals. Therefore, it is crucial to identify the risk factors and protective measures linked with pandemics to enhance mental health resilience and better equip societies to cope with future health emergencies and other crises.

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Emergency Psychiatry

EPP0574

Comparing IM Lorazepam and IM Clothiapine for Agitated Psychosis in Hospitalized Patients

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Introduction: When patients in a closed hospital ward experience acute psychosis and become highly agitated or pose a risk to themselves and others, it's often crucial to provide immediate sedative treatment. However, there is currently no consensus on whether the preferred medication for these situations should be antipsychotic drugs or benzodiazepines.

Objectives: This study aimed to compare how well a single intramuscular dose of 2-4 mg Lorazepam performs against 40 mg Clothiapine in terms of effectiveness and side effects. These treatments were administered as immediate emergency measures to patients experiencing psychosis with severe agitation or behaviors that posed a risk to themselves or their surroundings.

Methods: We conducted a retrospective clinical study involving 100 patients experiencing aggressive psychosis. These patients were divided into two groups. The first group comprised 50 patients who received a single intramuscular (IM) dose of up to 40 mg Clothiapine. The second group consisted of 50 patients who received IM treatment with 2-4 mg Lorazepam. We assessed the patients'