laboratory, clinical and radiological markers as well as impact of psychotropic medications during the course of hospitalization in critically ill patients.

Objectives: The primary outcome measure was variability of clinical biomarkers and CORADS scores with severity of COVID-19 infections and the impact of psychotropic medications like risperidone and aripiprazole.

Methods: We screened 430 ICU patients admitted to our tertiary care hospitals, out of whom 67 were diagnosed positively with definitive neuropsychiatric sequalae and receive psychotropic interventions during their hospital stay. We compared their D-dimer levels, C-reactive proteins, serum ferritin levels, serum procalcitonin and Vitamin D levels and further analyzed CORADS severity score with psychiatric severity and outcome.

Results: The mean age of the patients was 42.38 years, majority (44.8%) of them belonged to 21-34 years with slight (52.2%) male preponderance and none of them were more than 60 years. We observed a 43.3% were having organic mood disorder and 37.3% of individual had significant history of alcohol dependence while hypertension and diabetes mellitus were noted in 34.3% and 29.9% respectively. Only D-dimer levels were found to be significant and positively associated with outcome of psychiatric disorders (p<0.05), accounting for 41% of covariance on linear regression analysis.

Conclusions: Our study has found significant association of elevated levels of D-dimer variability but not the other laboratory biomarkers among various neuropsychiatric comorbid sequalae in ICU admitted COVID 19 patients. This particular observation might have potential for serum D-dimer levels to be possibly used as an early biomarker to screen or suspect for comorbid neuropsychiatric presentations.

Disclosure of Interest: None Declared

EPP0977

Studying medicine from home: an cross-sectional study on the impact of online education in Romanian medical students

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Introduction: Despite the literature regarding the impact of the COVID-19 pandemic on education, there is little research that specifically targets medical students and their relationship with online courses in regards to engagement and feelings of inadequacy.

Objectives: This cross-sectional study aims to explore such questions by evaluating a small (N=169) sample of Romanian medical students and applying self-reporting questionnaires in order to quantify subjective levels of burnout and imposter phenomenon

Methods: Responders filled an online survey with question regarding miscellaneous socio-demographic factors, alont with the Academic Burnout Scale (ABS), Clarence Imposter Phenomenon Scale (CIPS) and Ohio Resilience Scale (ORS). Results were collected and analysed for subsequent correlations.

Results: Predictably, respondents already in favour with online courses showed less signs of burnout and higher levels of resilience. While higher-year students preferred online courses, particularly final year students, it was lower-year students who showed higher level of resilience and lower burnout and imposter phenomenon levels, possibly suggesting a more profound impact of online education on students in clinical rotations, as opposed to pre-clinical ones. No statistically significant correlations were found between socio-demographic factors and the self-reported ratings, showing that feelings of burnout and imposter phenomenon were equally distributed among genders.

Conclusions: The results of this study present a snapshot into the opinions of future Romanian medical professionals on their own education and, in spite of its methodological limitations, can function as a starting point for deeper and more exhaustive inquiry regarding medical education during COVID-19 times.

Disclosure of Interest: None Declared

EPP0978

Change in urgent psychiatric consultations during the first lockdown in Venezia: a multicenter, retrospective study

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Introduction: The COVID-19 pandemic has affected the mental health of the global population (Dragioti *et al.* J Med Virol 2022;94 (5):1935-49). The first lockdown brought the hardest and most sudden impact on work, educational, social, and recreational activities. Moreover, the fruition of mental health services was restricted, and non-urgent appointments were delayed or converted into telepsychiatry. Thus, it was reasonable to hypothesize different trends of urgent consultations regarding mental health.

Objectives: To detect quantitative and qualitative changes in patients presenting to our Emergency Departments (ED) during the early phase of the pandemic compared to the previous year.

Methods: We conducted a retrospective, multicenter study in Venezia (historical center, mainland) through systematically reviewing the psychiatric consultations in our ED, during the first 16 weeks since 8-Mar-2020 and the same period of 2019. The protocol was approved by the local Ethics Committee as UPSI-19 (Urgent PSychiatric consultations In COVID-19). The statistical analysis was conducted with the software R; Interval Risk Ratio (IRR) with 95% CI was calculated for absolute frequency, primary diagnosis, leading symptoms, and outcomes of these consultations.

Results: In the early phase of the pandemic, in our ED we assisted to a significant decrease in psychiatric consultations: 372 vs 441, IRR=0.84(0.73-0.96). Data revealed a reduction of referral for suicidal behavior (IRR=0.52(0.33-0.80)) and anxiety symptoms (IRR=0.60(0.42-0.87)). Primary diagnoses of patients were not different between the two periods explored. There was a slight increase in admissions (150 vs 121), and a significant decrease in less severe clinical pictures.

Conclusions: In the timeframe considered, we assisted to a significant decrease in referrals from the ED, possibly related both to

fewer non-locals and to less frequent non-severe presentations. Despite the type of patients (for underlying diagnoses) remained unmodified, an interesting reduction of anxiety symptoms and suicidal behavior was noticed. Literature from ED studies during the first wave are consistent with our finding regarding the number of visits; suicide attempts seemed unmodified or decreased elsewhere (Giner *et al.* Curr Psychiatry Rep 2022;24(1):1-10). Limitations of our study include peculiarities of the Venetian territory, limited sample and time of observation. Future directions encompass the integration with data from the community setting and later developments.

Disclosure of Interest: None Declared

EPP0980

COVID-19 pandemic and associated factors in pregnant women in urban Bangalore, South India: A qualitative analysis

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Introduction: The World Health Organization declared COVID-19 as a pandemic in March 2020, and this was followed by a series of preventive measures that included social distancing, travel restrictions and lockdowns in India. Pregnancy is a vulnerable time, with several physical and psychological changes associated with it. The added burden of pandemic could lead to significant stress, and it would be helpful to understand the mitigating factors of stress in this population.

Objectives: The objective of this study was to examine the mitigating factors associated with COVID-19 pandemic among pregnant women.

Methods: The study was conducted in an Urban Primary Health Center (UPHC) in Bangalore that provides maternity care to low-middle income population. Antenatal check-ups are conducted here daily. Pregnant women visiting the clinic for routine antenatal care were approached and informed consent was sought for an interview. 295 women consented to participate in the study. The qualitative interview was conducted in a quiet room. Open ended questions were used to understand the participants' personal, familial, occupational, and social factors related to COVID-19. The transcripts of the interviews were manually coded for recurring themes by two research assistants. These were examined and similar or identical themes were grouped together. These were further analyzed, and themes were summarized.

Results: The mean (SD) age of the participants was 24.9 (4.2) years, approximately half of the participants were in their first trimester and primiparous. The majority were high school educated and self-employed. 25% of the participants reported mild to moderate depressive symptoms assessed using PHQ-9. The most predominant theme among personal factors was negative emotions that included fear and anxiety. The uncertainty about the transmission and the lack of clarity about the causes during the pregnancy were

the reasons for these fears. They reported that they found news and media more stressful. They reported that even though the lockdown restricted their movement, they enjoyed the time they spent with the family, especially their husbands. Most participants reported job loss, theirs and their husbands' and had to encounter severe economic difficulties. However, the predominant theme was the social support that they received from family, friends, neighbors, and local governing bodies.

Conclusions: Social support was reported to be the most predominant factor that helped the pregnant women to cope with the problems presented during the pandemic. Social support, both instrumental and emotional were important mitigating factors for stress during the pandemic. Strengthening the social support system by support groups and community networking should be a crucial component in government- led initiatives as a factor that may promote resilience in difficult situations like the pandemic.

Disclosure of Interest: None Declared

EPP0981

Mental health challenges in health care workers during COVID pandemic

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Introduction: Mental health issues of the health care workers (HCW) are often overlooked. It's often presumed that situations like COVID are handled well by this group of population and hence their own mental wellbeing is ignored and neglected.

Objectives: The objective of this study was to evaluate the depression and anxiety levels in healthcare workers who were on COVID duty.

Methods: This study was performed over telephonic interview of all the healthcare workers who were performing COVID duty from March 2021 to December 2021. Hospital Anxiety and Depression Scale (HADS) was administered. Various factors influencing the presentation were then analyzed.

Results: Over 534 healthcare workers were screened for psychiatric symptoms. About 76 fulfilled HADS criteria. 7.86% (42) scored above the anxiety cut off point and 6.36% (34) scored above the depression cut off point. About 373 (69.85%) expressed concerns about their safety and security as they were staying away from their families and about 469 (87.8%) expressed concerns about uncertainties about duty patterns.

Conclusions: Health care workers should be screened for psychiatric illness if they are in constant stress. They should be well trained to carry out COVID duties which will reduce the anxiety about the duty patterns. Better awareness about COVID 19 may lead to decreased levels of anxiety and depression.

Disclosure of Interest: None Declared