

Results: Findings indicated five themes: (1) Meaningful Emotional Relations (86%); (2) Intimacy with Partners (68%); (3) New Emotional Connections (61%); (4) Sensory Stimulation (55%); and; (5) Physical Enjoyment (23%). As for the second objective, three main themes emerged from the content analysis: (1) Decreasing Depressive and Anxiety Symptoms (73%); (2) Easing Feelings of Loneliness (68%); and (3) Reducing Mood Swings (43%).

Conclusions: The affective relationship between older adults and their pets was relevant during the COVID-19 pandemic, since it allowed for solidifying affection relationships with their partner and creating new ones. Additionally, it contributed for deepening the affective relationship with themselves, in terms of sensory stimulus, physical touch and physical pleasure. Owning a pet, was important for improvement in mental health symptoms, associated to depression, anxiety, and mood swings.

Keywords: Affective relationship; animal companionship; COVID-19 pandemic; mental health; older adults; pets.

Disclosure of Interest: None Declared

EPP0116

SARS-CoV-2 infection and psychological distress : a prospective sero-survey in southern Switzerland

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Introduction: The COVID-19 pandemic has had an impact on the mental health of the population that, to some extent, may be due to the neurotropism of SARS-CoV-2. However, evidence is extremely sparse on the prospective association between serological evidence of COVID-19 infection and psychological distress.

Objectives: We aimed to explore the prospective association between seropositivity and psychological distress – assessed by symptoms of depression, anxiety and stress – in the general adult population in southern Switzerland. Further, we investigated whether this association varied over time and between pandemic waves.

Methods: We used data from 305 adults who participated in the Corona Immunitas Ticino (CIT) prospective sero-survey cohort study. We tested the association between serologically confirmed SARS-COV-2 infection at baseline (June–December 2020) and depression, anxiety and stress scores as measured by the DASS-21 scale at three time points between December 2020 and March 2021, also taking into account for sociodemographic characteristics (age, gender, education level, presence of chronic diseases, smoking, obesity).

Results: In our sample, 84.3% (mean age of 51.30, SD= ± .93) were never infected. Seropositive participants were significantly younger on average (M=46.90, SD= ±2.00, P= .04). At the first follow-up (see Table 1), seropositive participants had higher rates of mild

conditions for depression (OR= .64; P= .014) and anxiety (OR= .50; P= .030), than seronegatives. Overall, after the 6-month follow-up, seropositive participants had significantly lower rates of mild conditions for DASS-21 subscales. In addition, prevalence of mild conditions for depression, anxiety and stress decreased more rapidly over time among infected vs. never infected (see Figure 1). Older age and the presence of chronic diseases were associated with mild anxiety (OR= .97; P= .013; OR=3.47; P= .001) and stress (OR= .96; P= .003; OR= 2.56; P= .010).

Table 1. Associations (Odds Ratios) between seropositive immunological status and mental health between December 2020 and March 2021 in Ticino, southern Switzerland (N=305)

DASS-21 defined mild condition	OR	P value	CI (95%)
Depression	0.641	0.014	0.449 – 0.914
Anxiety	0.502	0.030	0.270 – 0.936
Stress	0.712	0.113	0.468 – 1.083

Note. Generalized estimating equation models results. Co-variables include time, age, gender, chronic diseases, obesity, smoking and education level.

Conclusions: Our results provide new evidence on the association between COVID-19 seropositivity and poor mental health and underline the public health implications of the pandemic because the number of infected individuals largely exceed the 770 million of recorded COVID-19 (symptomatic) cases.

Disclosure of Interest: None Declared

E-mental Health

EPP0118

Differential attrition in randomized controlled trials of digital mental health interventions in the workplace: A systematic review and meta-analysis (EMPOWER H2020 project)

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Introduction: Digital interventions have been found to be successful in preventing occupational mental health concerns, however, they seem to be affected by attrition bias through high attrition rates and differential attrition. Differential attrition arises when the rates

of participant dropouts differ across different treatment conditions and is considered a significant challenge to internal validity.

Objectives: We aimed at systematically review and meta-analyse differential attrition of digital mental health interventions in the workplace setting.

Methods: On January 2, 2022, we performed a search in the following electronic databases: PubMed, Scopus, and Web of Science Core. We utilized a combination of terms from five distinct areas, namely mental health, intervention, workplace, implementation, and study design. The study encompassed adult employees who took part in a randomized control trial aimed at preventing mental health issues in the workplace through an online intervention. A team of six reviewers collaborated on the study selection process, while two independent researchers conducted the data extraction for the selected studies. We performed a meta-analysis of the log-transformed relative attrition rates of the included studies using a random-effects model with limited maximum-likelihood (REML) estimation to account for the degree of heterogeneity.

Results: A total of 19 studies were included in the meta-analysis. For baseline to post-intervention, the average total attrition was 26.27% (SD = 21.16%, range = 0 – 66.3%) and the random effects model revealed a higher attrition rate in the intervention group compared to the control group, with a pooled risk ratio of 1.05 (95% CI: 1.01 - 1.10, $p = .014$). For baseline to follow-up measurement the average total attrition was 27.71% (SD = 20.80%, range = 0 – 67.78%), however, in this case the random effects model did not indicate a higher attrition in the intervention group when compared to the control group (pooled risk ratio = 1.05, 95% CI: 0.98 – 1.12, $p = .183$).

Conclusions: There is an indication of higher attrition in the intervention group as compared to the control group in occupational e-mental health interventions from baseline to post-intervention, however this does not seem to be the case for baseline to follow-up attrition. These results should be taken into account in the design process of studies and statistical analyses should be adapted to counteract the bias that could result from differential attrition.

Disclosure of Interest: None Declared

EPP0120

University students' perspectives towards digital mental health: a qualitative analysis of interviews from the cross-country 'CAMPUS study'

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Introduction: Poor mental health of university students is a growing concern for public health. Indeed, academic settings may exacerbate students' vulnerability to mental health issues. Nonetheless, university students are often unable to seek mental health

support due to barriers, at both individual and organisational level. Digital technologies are proved to be effective in collecting health-related information and in managing psychological distress, representing useful instruments to tackle mental health needs, especially considering their accessibility and cost-effectiveness.

Objectives: Although digital tools are recognised to be useful for mental health support, university students' opinions and experiences related to such interventions are still to be explored. In this qualitative research, we aimed to address this gap in the scientific literature.

Methods: Data were drawn from "the CAMPUS study", which longitudinally assesses students' mental health at the University of Milano-Bicocca (Italy) and the University of Surrey (United Kingdom). We performed detailed interviews and analysed the main themes of the transcripts. We also performed a cross-cultural comparison between Italy and the United Kingdom.

Results: Across 33 interviews, five themes were identified, and an explanatory model was developed. From the students' perspective, social media, podcasts, and apps could be sources of significant mental health content. On the one hand, students recognised wide availability and anonymity as advantages that make digital technologies suitable for primary to tertiary prevention, to reduce mental health stigma, and as an extension of face-to-face interventions. On the other hand, perceived disadvantages were lower efficacy compared to in-person approaches, lack of personalisation, and difficulties in engagement. Students' opinions and perspectives could be widely influenced by cultural and individual background.

Conclusions: Digital tools may be an effective option to address mental health needs of university students. Since face-to-face contact remains essential, digital interventions should be integrated with in-person ones, in order to offer a multi-modal approach to mental well-being.

Disclosure of Interest: None Declared

EPP0122

Advancing schizophrenia care: Ongoing Study of a Mobile Application for Personalized Support

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Introduction: Psychiatric care faces a significant challenge in the regular monitoring of patient states, predicting relapses, and ensuring treatment adherence. To address this, we aim to develop a mobile application tailored to individual patient needs. This application will revolutionize mental health care by offering real-time monitoring, education, evidence-based interventions, and enhanced communication between patients and clinicians.

Objectives: This ongoing study seeks to develop and evaluate a mobile application for individuals with schizophrenia spectrum