

EPV0599

Impact of multiple sclerosis on mental health: A Cross-Sectional Study

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Introduction: When we think of multiple sclerosis (MS), we usually talk about the sensory and motor symptoms of the disease and their impact on the functioning of the individual affected. However, this disability can lead to a wide range of symptoms, including psychological and cognitive manifestations that also have a significant impact on the quality of life of patients

Objectives: To estimate the incidence of psychiatric disorders in patients with MS.

Methods: A cross-sectional descriptive study that interested MS patients referred to the occupational pathology consultation of the Charles Nicolle Hospital, during the period from July 1, 2020, to September 30, 2022. The data collected concerned the characteristics of the disease. The detection of psychiatric disorders was studied through a validated self-questionnaire GHQ-12 (General Health Questionnaire).

Results: The study population consisted of 26 cases. The average age was 38 ± 9 years. A predominance of females was noted in 77% of cases. Eight patients (31%) were smokers. Nine cases (47%) had a relapsing-remitting form and six cases (32%) had a primary progressive form. All patients were on disease-modifying therapy. The average duration of the disease was 6 ± 3 years. The average duration of work during the illness was 4 years [one year-12 years]. The average duration of work stoppage in the last 12 months of activity was 63 days [2-240 days], of which 54% was long-term sick leave. The mean GHQ-12 score was 4.38 [0-10]. Twenty patients (77%) had psychological disorders.

Conclusions: This study shows the high frequency of psychiatric disorders in our MS patients. The role of the neuropsychologist is therefore often crucial in the care of these patients.

Disclosure of Interest: None Declared

EPV0600

Increased violence and aggression levels during the SARS-Cov-2 pandemic; data from three London acute psychiatric inpatient facilities.

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Introduction: The COVID-19 pandemic has significantly impacted mental health services, with the literature reporting an increase in the incidence of psychiatric admissions.

Objectives: The aim of this study was to assess the impact of the pandemic on clinical presentations, characteristics of admission and incidents occurring in three acute inpatient mental health facilities in the UK.

Methods: This was a retrospective study comparing data from the first and third UK lockdown to the five years prior to the pandemic. Data was acquired from electronic clinical records and addressed two acute psychiatric inpatient wards and one psychiatric intensive care unit. Key outcomes of comparison were clinical presentations, number of admissions, length of hospital stay, number of incidents and characteristics of incidents.

Results: Compared to the previous 5 years, a higher number of incidents characterized by violence and aggression were reported during the first (56.8% vs 44.3%, $\chi^2=16.56$, $df=1$, $p<0.001$) and third lockdown (100.0% vs 86.2%, $\chi^2=36.40$, $df=1$, $p<0.001$). An increase in non-psychotic disorders was observed in the first lockdown (20.0% vs 13.1%, $\chi^2=4.76$, $df=1$, $p=0.029$), whilst increased first episode psychosis (19.7% vs 11.3%, $\chi^2=8.1$, $df=1$, $p=0.004$) and schizophrenia spectrum disorders (74.4% vs 57.2%, $\chi^2=7.6$, $df=1$, $p=0.006$) were diagnosed during the third lockdown. There were no significant changes in the diagnosis of mood disorders in both lockdowns compared to previously. The median length of inpatient stay significantly reduced during the first lockdown (28 days vs 36 days, $\chi^2=7.66$, $df=1$, $p=0.006$).

Conclusions: Increased inpatient incidents may be explained by the impact of the pandemic on staffing levels and resources, combined with increased emotional distress amongst patients in the face of uncertainty. The pandemic may have increased substance misuse potentially linked with the increased incidence of first episode psychosis.

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Mental Health Policies

EPV0602

A social consensus to prioritize humanization strategies for Mental Health in Castilla y León

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