

healthcare workers (HCWs) who were massively mobilized to deal with the crisis.

**Objectives:** To assess the frequency of anxiety-depressive disorders in HCWs who have contracted the SARS-Cov2 virus.

**Methods:** Cross-sectional descriptive study interested the HCWs of the Charles Nicolle Hospital of Tunis having had COVID-19 during the period from September 1, 2020, to December 31, 2020. The psychological impact was studied through the HAD questionnaire (anxiety and depression assessment scale), administered to hospital workers at the time of the medical visit to return to work.

**Results:** The study population consisted of 531 Hcws. The mean age was 40 years with extremes ranging from 24 to 63 years. A female predominance of 76.6% was noted. The average professional seniority was 10 years [one year-37 years]. Nurses were the main professional category (32.4%). The study population belonged mainly to the departments of gynecology (8.3%), general surgery (7.2%), internal medicine (6.4%), and emergency (5.5%). A pathological history was found in 89.6% of cases, 7.2% of which were psychiatric. Anxiety (total score >10) was noted in 36.5% of patients. On the other hand, a certain depression (total score "depression" >10) was found in 33.3% of HCWs.

**Conclusions:** The COVID-19 pandemic induced a significant psychological impact on the HCWs placed in the first line in the management of this health crisis. As a result, long-term psychological follow-up of healthcare workers is essential in order to preserve health at work in care settings.

**Disclosure of Interest:** None Declared

## EPV0368

### Socio-professional stigmatization among healthcare workers with COVID-19

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**Introduction:** The COVID-19 pandemic had deeply altered the social and professional lives of people with SARS-COV2. The anxiety of being contaminated by the virus during the first waves had created avoidance behaviors and established a climate of rejection towards healthcare workers (HW) with COVID.

**Objectives:** The aim of this study was to assess stigmatization among healthcare workers with COVID-19

**Methods:** This is a retrospective cross-sectional study carried out on HWs in a university hospital in Tunis who were affected by COVID-19 and who consulted the occupational medicine department. The study was conducted between March 2021 and June 2021. Data collection was based on pre-established forms. The questionnaire assessing stigmatization was inspired by the questionnaire assessing stigma in AIDS patients

**Results:** The study included 100 health personnel. The sex ratio (M/W) = 0.29. The average age was 39.22 ± 9.3 with extremes ranging from 24 to 58 years. The average professional seniority was 11.39±9.4. Nurses were the most represented professional category

(26%). The psychiatric history was: Depressive disorder (14%) and anxiety disorder (10%). Eighty HW were infected with SARS-COV2 for the first time. Contamination was intra-hospital in 50% of cases. Eighteen HW had been rejected. Verbal abuse towards HW with COVID was noted in 8% and physical abuse in 11%. Twenty-six HW had lost their friends and 36 of them no longer had as much social activity as before. In the workplace, rejection was noted in 21% cases, 10 health personnel reported a discriminatory orientation for the care of patients with COVID and 19 HW felt useless at work.

**Conclusions:** Socio-professional stigmatization should help us to understand the vulnerability and psychological impact of this health crisis on health workers. Control and prevention strategies need to be established.

**Disclosure of Interest:** None Declared

## EPV0369

### COVID-19 related Delusional Beliefs: A Case Report

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**Introduction:** A delusion is a fixed false belief based on an inaccurate interpretation of an external reality despite evidence to the contrary. The diagnosis of a delusional disorder is made when a person has one or more non-bizarre (situations that are not real but also not impossible) delusional thoughts for one month or more that cannot be explained by any other condition. In patients with delusional disorder, delusions(s) do not impact the functionality and the patient's behavior is not overtly bizarre. Although delusional core themes tend to be the same throughout different epochs (i.e., persecution, grandiosity, guilt, religion, hypochondria, love, or jealous), clinicians commonly notice how delusions tend to rapidly incorporate popular hot topical issues. Hence, delusions are dynamic and often represent a combination of psychopathology and external events.

**Objectives:** The COVID-19 outbreak has affected millions of people globally and it also has a huge psychological impact. The objective of this case report is to outline the possible effect of the COVID-19 pandemic to delusional disorder in patients with healthy person.

**Methods:** The 40-year-old gentleman, a drum major (field commander), married, living with his wife and daughter (4,5 years old). He's current complaints started when he did not want to have the Covid vaccine in April 2021 and therefore was exposed to mobbing at work. It is understood that the patient had irrevocable ideas about vaccine and PCR testing (radioactive lights were coming out from the PCR rod in a video he watched). For this reason, it is understood during the clinical interview that the patient was exposed to social restrictions at work and in his social life (he could not travel by public transport, plane, bus, and enter social facilities because he did not have a vaccination card or did not have a PCR test). He was admitted to our ward for the purpose of arranging his diagnosis and treatment.

**Results:** On our ward, the patient showed poor insight with persistence of delusions. The impression was delusional disorder. He was treated with olanzapine up to 5 mg/day and sertraline up to 100 mg/day, with a progressive resolution of symptoms.

**Conclusions:** There are other case reports on COVID-19 delusional themes in patients with schizophrenia and patients with no history of mental illness, which means that this phenomenon is not exclusive to affective disorders. In this case, different from the literature, the patient has never had covid. An area of clinical concern is the potential of the pandemic's psychological context to trigger psychotic disorders and influence their symptomatology. A review of contemporary epidemics and pandemics psychosis research found no evidence of changes in the form and content of psychotic symptoms. Further research should examine those biopsychosocial COVID-related factors that predispose to, precipitate, and perpetuate psychosis.

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### EPV0370

#### COVID-19: Neurologic complications and management of neurological symptoms

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**Introduction:** Neurologic complications in patients with COVID-19 are common in hospitalized patients. More than 80 percent of hospitalized patients may have neurologic symptoms at some point during their disease course. Rates vary by geographical location and patient characteristics.

**Objectives:** The aim of this research is to evaluate the frequency of neurological complications in patients with covid-19.

**Methods:** A literature review was made using the Pubmed Platform and the keywords: neurological symptoms, Covid-19 pandemic

**Results:** Myalgias, headache, encephalopathy, and dizziness may be most common, occurring in approximately one-third of patients in China, Europe, and the United States. Neurologic symptoms such as dysgeusia or anosmia may be less common, but accurate ascertainment of symptoms may be limited in patients with severe cognitive or cardiorespiratory dysfunction. Stroke, movement disorders, motor and sensory deficits, ataxia, and seizures appear uncommon

**Conclusions:** Reports of severe neurological involvement such as encephalitis, encephalopathy, status epilepticus, ischemic and hemorrhagic strokes and severe neuropathies (Guillain-Barré syndrome) in COVID-19 are increasing, which makes this problem particularly relevant to neurological critical care therapy.

**Disclosure of Interest:** None Declared

### EPV0371

#### Neuropsychiatric consequences of Covid 19- CASE REPORT

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**Introduction:** SARS-CoV-2 is a virus with a multisystem effect, and it can cause numerous neuropsychiatric disorders, both in the acute phase of infection and in the period after the disease has passed. According to Nalbandian et al. (2021), post-acute COVID-19 syndrome is a condition of persistent symptoms and/or delayed long-term complications caused by SARS-CoV-2 infection lasting longer than four weeks after the onset of symptoms.

**Objectives:** To indicate the possible role of the SARS-COV 2 virus in the development of long-term neuropsychiatric and cognitive consequences of COVID-19.

**Methods:** We undertook a search of the available medical literature in the period after 2020 with the keywords COVID 19 and neuropsychiatric complications

**Results: Case report:** Female patient, 40 years old, unemployed, married, mother of two children. She was admitted for the first hospital treatment at the Psychiatry Clinic of the UCC of Niš due to psychological disturbances in the form of experiencing her own body changes and changes in the environment, moodiness, anxiety, the conviction that she is suffering from incurable diseases, the experience of being centered and existentially threatened, insomnia. In 2020, one month after the recovery from COVID-19, she was treated at the Neurology Clinic of the UCC of Niš for a crisis of consciousness, diagnosis at discharge: encephalitis, encephalopathy. At the end of the treatment, cognitive-mnemonic deficits remain. In April 2021, after reinfection with the SARS-COV2 virus, a depressive-interpretive syndrome developed, which is the reason for the current hospitalization. Depersonalization and derealization phenomena, time disorientation, hypochondrial delusions, ideas of self-accusation, cenesthetic hallucinations, impaired volitional-instinctual dynamism and deficits in cognitive-mnemonic functioning are observed during hospitalization. NMR of the endocranium with contrast shows changes in the form of encephalomalacia, porencephaly, which indicates a condition after a cerebrovascular insult. She was treated with low doses of haloperidol (2 mg pd), antimemoria and vasoactive therapy, which led to a reduction of psychotic symptoms as well as an initial improvement in cognitive-mnemonic functioning.

**Conclusions:** This case report confirms the neurotoxicity of the SARS-CoV-2 virus and it is in accordance with the available literature. The neuropsychiatric and cognitive complications that accompany COVID-19 are different and have a significant impact on the health of people who recovered from COVID-19. It is necessary for the health system to recognize this problem in time and provide organized neuropsychiatric and cognitive monitoring to patients suffering from COVID-19.

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