

**Methods:** We performed a literature search, using Pubmed, EMBASE, Scopus and Cochrane library databases, to search for new scales identifying COVID-19 related mental health problems.

**Results:** During the first half of the year 2020, we found five published new self-report measurement instruments: Coronavirus Anxiety Scale (CAS), the COVID Stress Scales (CSS), the Fear of COVID-19 Scale (FCV-19S), the Obsession with COVID-19 Scale (OCS), and the Questionnaire on Perception of Threat from COVID-19. These instruments have been validated in a group of middle-aged ambulatory patients.

**Conclusions:** These new instruments might be useful in non-clinical settings. Although the psychometric reports are promising, the instruments have been validated in a less vulnerable group of patients. Future validation studies should also comprise other age groups, particularly the old and more vulnerable population.

**Disclosure:** No significant relationships.

**Keywords:** mental health; Covid-19

## EPV0450

### Schizophrenia in Covid-19 crisis : Is it a mortality risk factor ?

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**Introduction:** Patients with mental disorders mainly schizophrenia represent a vulnerable population. In Covid-19 pandemic situation, could schizophrenia be considered as a significant mortality risk factor ?

**Objectives:** In this study, we aimed to explore the odds of significant COVID-19 mortality among schizophrenia patients

**Methods:** Our literature review was based on the PubMed interface and adapted for 2 databases: Science Direct and Google Scholar using the following combination ( schizophrenia [MeSH terms]) AND (COVID-19, mortality[MeSH terms])

**Results:** Our review included 4 population-based cohort studies covering the period from december 2019 to May 2021. The data showed increased mortality risk among individuals with schizophrenia who have had COVID-19. Indeed, this high rate of mortality maybe associated with multiple factors such as unhealthy lifestyle, low socioeconomic status and comorbidities as obesity, diabetes and cardiovascular conditions. The use of antipsychotics can be considered as a risk factor regarded its immunomodulatory effects. Furthermore, stigma and discrimination towards mental illnesses particularly schizophrenia might have contributed to a worse prognosis.

**Conclusions:** Schizophrenia is a severe mental disorder, associated with an increased high risk Covid-19. Thus, this population require enhanced preventive and disease management strategies.

**Disclosure:** No significant relationships.

**Keywords:** Covid-19; schizophrénia; mortality

## EPV0451

### Factors Associated With The Covid-19 Infection Severity In Patients With Mental Disorders

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**Introduction:** Recent research showed that persons with mental disorders may represent a population at increased risk for coronavirus disease (COVID-19) infection with more adverse outcomes.

**Objectives:** We aimed to analyze clinical profile of psychiatric inpatients during their infection with COVID-19, and to explore factors associated with the disease progression.

**Methods:** We analyzed retrospectively the medical records of 32 psychiatric inpatients, hospitalized in psychiatry "B" department at Hedi Chaker hospital (Sfax, Tunisia), and who contracted the COVID-19 infection. We used "Charlson Comorbidity Index Score" (CCIS), predicting 10-year survival in patients with multiple comorbidities.

**Results:** Somatic history was reported in 50% of patients. The CCIS ranged between 0 and 4. Psychiatric diagnosis was schizophrenia in 81.3% and bipolar disorder in 18.7% of cases. The clinical symptoms reported were fever (50%), dry cough (75%); dyspnea (34.4%). Biological assessment showed a lymphopenia in 40.6% and a high C-Reactive Protein (CRP) in 53.1%. Among our patients, 37,5% needed oxygen, and 25% were transferred to the intensive care unit. The COVID-19 complications were mostly bacterial pulmonary superinfections (21.9%) and pulmonary embolism (9.4%). Only three (9.4%) patients died from the virus. Patients with medical history were more likely to need oxygen (p<0.001). Clinical and paraclinical parameters associated with oxygen need were: fever (p<0.001); dyspnea (p<0.001); lymphopenia (p<0.001); high CRP (p=0.001). Patients presenting pulmonary superinfection or embolism were more likely to require oxygen (p=0.006 and p=0.044 respectively).

**Conclusions:** This study highlighted factors that may worsen the COVID-19 infection evolution, and which require special attention, in order to improve the prognosis of this disease.

**Disclosure:** No significant relationships.

**Keywords:** COVID19; psychiatry; Mental Disorders

## EPV0454

### Factors Associated with Mental Health Outcomes and the Level of Work Engagement Among Health Care Workers Exposed to Coronavirus Disease 2019 in Tunisia

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