

of the data was carried out using the methods of descriptive statistics and correlation analysis of the IBM SPSS Statistics, v.22 software package.

Results: The values of the total sums of scores of individual clusters (depression, anxiety, sleep disorders) of the HDRS-17 scale in the “COVID” and “non-COVID” groups did not differ statistically. The exception was a significantly higher ($p>0.01$) number of complaints of somatic disorders (weakness, heaviness and pain in the muscles, a feeling of loss of energy, loss of strength, decreased libido) in patients who had COVID compared to those who did not (2.4 ± 1.0 and 1.4 ± 1.1 points, respectively). In the “non-COVID” group, the HDRS-17 somatic disorder cluster scores positively correlated with SP values of beta2 EEG (20–30 Hz) in leads F3, F8, and P3, which reflects the increased activation of brain stem structures, characteristic for depressive conditions. In the “COVID” group, these scores correlated with the SP values of alpha3 (11–13 Hz, in leads F4, F8, C4 and T4) and beta2 (20–30 Hz, in C4) not positively, but negatively. Thus, the severity of somatic complaints in patients of this group is associated not with greater, but with less activation of the brain (in particular, of the right hemisphere), which, presumably, may be associated with the “exhaustion” of the central mechanisms of regulation of autonomic functions after suffering COVID disease.

Conclusions: COVID (in a mild or asymptomatic form) did not show a significant effect on the overall severity of depression of the studied group of patients who recovered from COVID, with the exception of a significantly greater severity of their somatic complaints compared to the group of patients who had not been ill with COVID. The study supported by the RSF grant No. 21-18-00129.

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EPV0292

A Complicated Case: Presenting Neuropsychiatric Symptoms After COVID Infection

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Introduction: The COVID-19 pandemic has affected millions of people worldwide. Among a large number of deaths, COVID-19 has caused significant health-related sequelae involving many systems of the body. Some results include increased anxiety, depression, insomnia, and other distress symptoms. Additionally, there are reports of sudden onset of psychosis in patients with no psychiatric history following COVID-19.

Objectives: Emphasizing the importance of Covid 19 causing many psychiatric diseases, although its etiology is not yet known.

Methods: Report of a clinical case

Results: We report a 68-year-old previously healthy woman with no personal or family history of mental illness who was hospitalized due to COVID-19 and then started to have psychiatric complaints. She had complaints such as refusal to speak, eat and drink, fear of death which started after her discharge from the hospital due to COVID-19.

On 14.07.2021, she applied to the psychiatry outpatient clinic of our hospital for the first time. In addition to the existing complaints, we have considered the preliminary diagnoses of dementia and

psychotic depression due to the increasing fear of being alone, going out alone, confusion in the interim periods, and thoughts that someone will harm her and her family. We consulted the neurology clinic and she was admitted to the neurology service with a preliminary diagnosis of encephalitis. During her hospitalization, the patient’s EEG and MRI were taken, LP was performed, and no pathology was detected in the examinations. Her current psychiatric treatment (escitalopram 10mg/d, medazepam 2mg/d, and olanzapine 2,5mg/d) continued throughout her hospitalization in the neurology service, but her complaints did not change. She was fed formula with an NG tube, IV hydration was provided, and a urinary catheter was inserted.

After ruling out neurological disease on 12.08.2021, the patient was admitted to our psychiatry service with a prediagnosis of catatonic-psychotic depression. Electroconvulsive therapy was planned because the visual hallucinations and persecutory delusions persisted. Total of 7 sessions of ECT were received. The patient’s oral intake started with the current treatment, and her fluent speech began. Olanzapine dose was increased to 7.5mg/d, and escitalopram dose was increased to 20mg/d due to persistent depressive and psychotic symptoms. The patient was discharged on 02.09.2021 with the current treatment. Her complaints had improved before she was discharged.

Conclusions: COVID-19 remains an emerging disease with unknown psychological sequelae. Caution should be exercised regarding psychiatric symptoms and associated risks in patients with a recent diagnosis of COVID-19. Cytokine storm may also be involved in the etiology, in addition to many psychological factors such as fear of illness, uncertainty, and isolation. Potential risk factors and underlying biological mechanisms should be investigated.

Disclosure of Interest: None Declared

EPV0293

Affective state of people suffering from long covid and associated factors. Cross-sectional descriptive study

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Introduction: The “Post-COVID Syndrome” affects approximately 10% of people who have been infected with Covid-19. These people have a physical and mental impact.

Objectives: The objective of this study is to analyze factors related to poorer mental health in these patients from primary health care.

Methods: Cross-sectional study. The study population was post-COVID-19 patients aged 18 years or older and treated by Primary Health Care (PHC). The main variable was Affective state through the Hospital Anxiety and Depression Scale (HADS) questionnaire. The rest of the variables were: Socio-demographic variables, number of residual symptoms, cognitive using the Montreal Cognitive Assessment (MoCA), physical functioning variable will be measured by Sit to Stand Test and Sleep quality through the Insomnia Severity Index (ISI). A bivariate analysis and also a lineal multivariate model were developed. Ethics approval was granted by the Clinical Research Ethics Committee of Aragón (PI21/139 and PI21/454).

Results: A total of 100 individuals participated, of whom, 80 were women and 20 were men. The median scores in HADS was 16 and the interquartile range was 12. Multilevel analysis shows that better physical functioning (sit to stand test) and worse sleep quality (Insomnia severity index) are predictors of worse affective state. The models explain 36.5% of the HADS variance.

Conclusions: It is relevant to take account these variables in the treatment of the affective state of patients with long covid.

Disclosure of Interest: None Declared

EPV0294

Evolution of the affective state of a cohort of people suffering from long covid and associated factors

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Introduction: Long COVID patients have experienced a decline in their quality of life caused, in part but not wholly, by its negative emotional impact. Some of the most prevalent mental symptoms presented by Long COVID patients are anxiety, depression and sleep disorders.

Objectives: The objective of this study is to increase understanding of the affective state of people diagnosed with Long COVID, the evolution and associated factors.

Methods: Longitudinal study of three months of duration. The study population was 100 post-COVID-19 patients aged 18 years or older (80 women and 20 men). The main variable was the affective state through the Hospital Anxiety and Depression Scale (HADS) questionnaire. The rest of the collected variables were: Socio-demographic variables, number of residual symptoms, cognitive functioning using the Montreal Cognitive Assessment (MoCA), physical functioning variable measured by Sit to Stand Test and Sleep quality through the Insomnia Severity Index (ISI). A statistical analysis comparing baseline and 3months follow up measures were performed, using a Student T for related samples statistical. A lineal regression analysing associated factors to a reduction in HADS score was also performed. Ethics approval was granted by the Clinical Research Ethics Committee of Aragón (PI21/139 and PI21/454).

Results: At baseline the score in anxiety, depression and total score were 9,10 (SD: 4,67), 8,25 (SD: 4,51) and 17,35 (SD: 8,43) respectively, and 74% of the participants were considered cases. At three months, there is a slightly decrease but not significative in the score of HADS, both in anxiety, depression and total score (pvalue 0,465; 0,236; and 0,216 respectively). 64,4% of the participants had a positive diagnosis of depression/anxiety. About the rest of the variables there were also a slight decrease but without being significant There was not a predictive model that explained the decrease in the HADS score.

Conclusions: The evolution of the people suffering long covid is very slow along the time, and also the affective state.

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EPV0295

PSYCHOLOGICAL IMPACT OF COVID-19 LOCKDOWN ON A POPULATION WITH SERIOUS MENTAL DISORDER: DIAGNOSTIC GROUP ANALYSIS

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Introduction: Since its emergence at the end of 2019, the COVID-19 virus has spread worldwide. In Spain, mandatory home confinement was established on March 15, 2020, and lasted 99 days. Previous studies on events that required isolation situations suggest a worsening in the mental health of general population, and in particular, of especially vulnerable groups such as individuals with severe mental disorder (SMD).

Objectives: The aim of this study is to evaluate the psychological effect (anxiety and depression) of confinement in patients with SMD and to study the dissimilarities among the different diagnostic groups.

Methods: In this study, assessments were performed using the IDER and STAI questionnaires, in order to evaluate symptoms of depression and anxiety, respectively. The evaluations were carried out in patients who had required at least one admission to the Psychiatric Hospitalization Unit of the University Hospital of Basurto. The Shapiro-Wilk test was used to verify the normality of the sample. ANOVA test was used to study differences among diagnostic groups. Posteriorly, Bonferroni correction was performed.

Results: 95 participants completed the IDER questionnaire, obtaining a mean score of 24.56 (SD=8.18) for the state and 23.57 (SD=8.14) for the trait. In the STAI questionnaire, a mean score of 27.86 (SD=15.19) was obtained for the state and 30.49 (SD=14.71) for the trait. ANOVA test indicated presence of differences among groups. However, differences did not persist after Bonferroni correction.

Conclusions: Increased levels of anxiety and depression were found in the sample studied with respect to the general population. No statistically significant differences were found among different diagnostic groups. Further studies should be performed in order to increase the knowledge around this research area.

Disclosure of Interest: None Declared

EPV0296

A case report of post-acute COVID-19 encephalopathy

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