

outcomes, controlling for age, sex, smoking, being in a nursing home, and physical comorbidities.

Results: 785,378 subjects were included. Preliminary findings showed that patients diagnosed with psychosis and bipolar disorder had lower risk of infection [OR: 0.85 (95% CI: 0.79-0.92), $p < 0.001$; OR: 0.84 (95% CI: 0.76-0.92), $p < 0.001$], whereas individuals with stress-related and neurotic/somatoform disorders had higher risk of infection [OR: 1.08 (95% CI: 1.04-1.14), $p < 0.001$; OR: 1.06 (95% CI: 1.03-1.10), $p < 0.001$]. People with depressive, stress-related, and neurotic/somatoform disorders had lower risk of COVID-19 hospitalization [OR: 0.87 (95% CI: 0.78-0.97), $p = 0.01$; OR: 0.71 (95% CI: 0.61-0.84), $p < 0.001$; OR: 0.67 (95% CI: 0.60-0.76), $p < 0.001$]. In line with these results, individuals with stress-related disorders also experienced lower mortality [0.49 (95% CI: 0.33-0.70), $p < 0.001$]. Conversely, people with psychosis, bipolar disorder, and substance misuse exhibited higher risk of COVID-19-related death [OR: 2.9 (95% CI: 1.68-3.1), $p < 0.001$; OR: 1.95 (95% CI: 1.30-2.81), $p < 0.001$; OR: 1.82 (95% CI: 1.49-2.20), $p < 0.001$].

Conclusions: We found different risks of SARS-CoV-2 infection, COVID-19 hospitalization, and COVID-19 mortality for psychiatric disorder groups. Differences in vulnerability to COVID-19 among people with psychiatric disorders might be explained by factors such as shared living facilities, physical comorbidities, psychotropic medications, and difficulties in accessing high-intensity medical care. Special attention should be directed towards individuals with psychosis, bipolar disorder, and substance misuse.

Disclosure of Interest: None Declared

EPP0398

Clozapine and the Risk of Severe COVID-19: A Retrospective Cohort Study

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Introduction: Clozapine is the standard treatment for managing treatment-resistant schizophrenia (TRS). However, concerns arise due to potential hematologic side effects, such as agranulocytosis, especially during the COVID-19 pandemic.

Objectives: This study aims to investigate the association between clozapine treatment and an increased risk of severe COVID-19 infection in patients with TRS.

Methods: A retrospective study reviewed clinical records of forensic patients with TRS from 2020 to 2022 at Razi Hospital's forensic psychiatry department in Tunisia. Twenty-five patients, including 18 on clozapine treatment, were included.

Results: All patients were male, with an average age of 39.7 years. Twenty-three patients received at least one vaccine dose. Twenty-two patients contracted COVID-19. Among those treated with clozapine, two required intensive care unit admission and oxygen therapy without intubation. Clozapine treatment remained uninterrupted, with no dose escalation during infection episodes. Lymphopenia was the most commonly reported hematologic abnormality.

Conclusions: While there may be an association between clozapine use and an increased risk of COVID-19 infection, no clear correlation with infection severity and antipsychotic treatment was established in this study. Further research is needed to explore this potential association comprehensively.

Disclosure of Interest: None Declared

EPP0399

The influence of the COVID-19 pandemic on the occurrence of depressive symptoms in the Croatian adult population

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Introduction: The COVID-19 pandemic has led to a worsening of mental health among the Croatian general population. However, the overall prevalence of population depressive symptoms in Croatia over the COVID-19 pandemic is still unknown.

Objectives: This study aimed to investigate the influence of the COVID-19 pandemic on the occurrence of depressive symptoms among Croatian adults.

Methods: This cross-sectional questionnaire study was conducted from mid-February to mid-May 2022 period. A validated, anonymous questionnaire that contained questions regarding demographic data, as well as the Zung Self-Rating Depression Scale was self-administered to a convenient sample of adults from the city of Osijek in eastern Croatia.

Results: The study sample included 500 subjects with a median age of 34 years (interquartile range 26-53), 42.4% males, and 57.6% females. According to the Zung Self-Rating Depression Scale, there were 16.2% of subjects with mild or moderate depressive symptoms. Depressive symptoms were more frequent among older subjects (61 years or older) ($p = 0.001$), among subjects with a lower level of education (subjects with or without elementary school) ($p < 0.001$), among subjects who were retired ($p = 0.005$), among subjects who considered their socioeconomic status as under average ($p < 0.001$), and among subjects who experienced death of close family member caused by COVID-19 infection ($p = 0.004$).

Conclusions: The COVID-19 pandemic increased the prevalence of depression in the Croatian general population where some sociodemographic characteristics of study subjects seem to put those subjects at greater risk considering the occurrence of depressive symptoms. Development of appropriate supportive programs that enhance the mental health of the Croatian general population during pandemics is needed to potentially prevent the occurrence of depressive symptoms and to help the general population successfully overcome this important mental health challenge.

Disclosure of Interest: None Declared