

Objectives: The objective was to analyze the impact of Covid-19 on the feeling of loneliness in those over 65 years of age during the last year of the pandemic.

Methods: A bibliographic search was carried out in Pubmed with the terms “loneliness in elderly in the covid-19 pandemic” with the filters “abstract” and “in the last 1 year”, selecting the studies whose title included the terms “loneliness”, “elderly” or “older people” and “Covid-19” or “SARS-Cov-2”. The search gave rise to 13 results, of which the content of the abstracts was qualitatively analyzed.

Results: All studies found an increase in loneliness in the elderly, and more than 50% reported a decrease in this feeling in the elderly trained in new technologies. Other aspects that stood out to influence were comorbidity, resilience, economic situation, social support and subjective feeling of vulnerability.

Conclusions: Older adults avoid direct social contact to protect themselves. This may result in loneliness, that can have serious consequences in terms of morbidity and mortality. To mitigate loneliness they can use online social media, but older adults need to be trained. Institutions and public powers have the obligation to ensure individual and collective security, and protect the integrity of people from dangers.

Disclosure: No significant relationships.

Keywords: Covid-19; Elderly; Geriatric Psychiatry; Loneliness

EPP0421

The implementation of teletherapy with patients with Severe Mental Illness during the COVID-19 first wave and its longitudinal association with hospitalisations: A retrospective multicenter study from Spain

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Introduction: The COVID-19 related restrictions such as social distancing forced the search for feasible alternatives to the provision of care for patients with severe mental illness (SMI), with services opting for teletherapy as an substitute of face-to-face treatment.

Objectives: To examine the implementation of teletherapy (telephone, videoconference) with patients with SMI during the COVID-19 first wave, and explore its associations with reduced hospitalisations after the first wave was over.

Methods: We performed a retrospective assessment of 270 records of patients visiting fifteen outpatient mental health services across Spain during 2020. We retrieved sociodemographic and clinical data, including modality of received therapy (in-person, telephone, videoconference) in three time points (before, during and after the first COVID-19 wave) and hospitalisation rates two, four and six months later.

Results: During the first wave, services implemented teletherapy (telephone and videoconference) extensively, whilst they reduced face-to-face therapy, though this returned to previous levels after

the first wave. Hospitalisations two months later did not differ between patients who received teletherapy, and those who did not ($p=0.068$). However, hospitalisations were lower for the first group of patients four ($p=0.004$) and six months later ($p<0.001$). Multilevel analyses suggested that receiving teletherapy by videoconference during the first wave was the factor that protected patients most against hospitalisations six months later (OR=0.25; $p=0.012$).

Conclusions: Our findings suggest that teletherapy plays a protective role against hospitalisations, especially when face-to-face therapy is not feasible. Therefore, it can be considered a valid alternative to ensure continuity of care to patients with SMI.

Disclosure: No significant relationships.

Keywords: teletherapy; severe mental illness (SMI); outpatient mental health; Covid-19

EPP0422

Prevalence and covid 19 vaccination rate in a population of patients with schizophrenia and a substance use disorder

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Introduction: As of August 27th, 2021, the diagnosed cases of COVID 19 in Spain are 4 758 003 with a prevalence of 10.03%. 68.4% of the Spanish population is fully vaccinated

Objectives: Primary: To compare the prevalence of COVID infection in a cohort of patients with schizophrenia to patients with a dual diagnosis of schizophrenia and substance use disorder Secondary: To compare the rate of fully vaccinated patients diagnosed with schizophrenia with and without a coexisting substance use disorder.

Methods: Retrospective descriptive study. The population in study is made up of patients with schizophrenia (46) and dual diagnosis schizophrenia (28) (following DSM 5 criteria) Confirmed cases were those cases with positive PCR

Results: There was not a statistically significant difference in the prevalence of COVID 19 infection between both groups of patients. The prevalence of COVID infection among the dual diagnosis schizophrenia was 3.57% compared to 6.5% in those without coexisting substance abuse disorder. Relative to vaccination rate, we didn't find a statistically significant difference between both groups. However, there was a higher vaccination rate in the dual diagnosis schizophrenia group (82.12%) compared to the non-dual diagnosis schizophrenia group (69.56%)

Conclusions: The prevalence of COVID 19 infection in the dual diagnosis schizophrenia cohort is 3.57% and in the group of patients with schizophrenia without substance abuse disorder is 6.5%. In those with dual diagnosis schizophrenia the vaccination rate was un 82.12%. It was 69.56% in those without coexisting substance abuse disorder.

Disclosure: No significant relationships.

Keywords: schizophrenia; vaccination rate; covid 19; Prevalence