

Introduction: Clozapine is an effective second-generation antipsychotic that is approved for treatment-resistant schizophrenia and risk reduction of recurrent suicidal behavior in schizophrenia or schizoaffective disorder. Its available pregnancy pharmacokinetics data remain limited, which presents a challenge for clinicians managing women taking clozapine during perinatal period.

Objectives: The aim of this study was to provide new data of clozapine and norclozapine placental passage and neonatal outcomes.

Methods: We retrospectively studied a consecutive case series of six pregnancies where there was clozapine exposure (5 in polytherapy and 1 in monotherapy). Clozapine and norclozapine serum concentrations were determined in the mother-infant pairs on the day of delivery (intrapartum maternal blood and umbilical cord blood respectively) and measured using a validated high-performance liquid chromatography method. The within- and between-day precision expressed as the coefficient of variation (CV)% were both <10%. The limit of quantification (LoQ) was 5 ng/mL. Neonatal outcomes were reviewed from pediatric records.

Results: The mean infant-mother clozapine and norclozapine ratio at delivery were 0.44 (SD=0.13) and 0.28 (SD=0.05) respectively. There was a weak positive correlation between maternal and umbilical cord clozapine and norclozapine serum concentrations (Pearson correlation coefficient 0.183, $p=0.769$ and 0.827, $p=0.084$ respectively). The rate of neonatal complications was 16%. One neonate (16%), whose mother had drug abuse history during pregnancy, presented with a generalized neurodevelopment delay and the consequent need for continuous intensive care.

Conclusions: In our study, placental passage of clozapine and norclozapine was partial during delivery. Statistical power was limited for examining the association between neonatal clozapine levels and neonatal outcomes.

Disclosure: No significant relationships.

Keywords: Delivery; Mother-infant pair; Placental passage; clozapine

EPP0330

The Portuguese adapted version of the fear of covid-19 scale for the postpartum period

D. Pereira^{1,2*}, A.T. Pereira¹, B. Wildenberg^{1,2}, A. Gaspar³, C. Cabacos^{1,2}, N. Madeira^{1,2} and A. Macedo^{1,2}

¹Faculty of Medicine of University of Coimbra, Institute Of Psychological Medicine, Coimbra, Portugal; ²Centro Hospitalar e Universitário de Coimbra, Department Of Psychiatry, Coimbra, Portugal and ³Bissaya Barreto Maternity Hospital, Centro Hospitalar e Universitário de Coimbra, Department Of Gynecology And Obstetrics, Coimbra, Portugal

*Corresponding author.

doi: 10.1192/j.eurpsy.2022.611

Introduction: The Portuguese version of the *Fear of COVID-19 Scale* (FCV-19S; Cabaços et al. 2021), composed of seven items, presented good validity and reliability to be used in general

population. To be used within perinatal context, specifically in the postpartum period, we have added an item related to the baby (item 8 – “I’m afraid my baby will be infected with coronavirus-19”).

Objectives: To analyze the psychometric properties of Portuguese adapted version of the *Fear of COVID-19 Scale* for the postpartum period (FCV-19SP), namely construct validity, internal consistency, and convergent validity.

Methods: 207 women (mean age= 33.51 ± 5.23 years) recruited in the postpartum period (9,06 ± 8,52 months after delivery) fill in a set of self-reported validated questionnaires: Perinatal Depression Screening Scale (PDSS), Perinatal Anxiety Screening Scale (PASS) and Coronavirus-19 Fear Scale for the postpartum period (FCV-19SP).

Results: CFA revealed that the unifactorial model composed of eight items presented good fit indexes ($X^2/df=1.508$; CFI=.991; GFI=.974; TLI=.983; $p[RMSEA \leq .01] = .049$), better than those of the seven items version ($X^2/df=3.963$; CFI=.957; GFI=.909; TLI=.905; $p[RMSEA \leq .01] = .219$). Cronbach alpha for the FCV-19SP was $\alpha=.880$. The total score significantly ($p<.01$) and moderately correlated with PDSS ($r=.262$) and PASS ($r=.371$).

Conclusions: The FCV-19SP is a valid and reliable questionnaire to assess fear of COVID-19 in women in the postpartum period.

Disclosure: No significant relationships.

Keywords: Perinatal; Fear of COVID-19; Postpartum

Consultation Liaison Psychiatry and Psychosomatics 03 / Cultural Psychiatry 02

EPP0331

Art therapy focused on stimulating the emotional and expressive skills of the atypical children

L.-M. Hosu

CONSILIUL JUDEȚEAN CLUJ Direcția Generală de Asistență Socială și Protecția Copilului, Centrul Comunitar Județean Complex De Servicii Sociale Comunitare Pentru Copii și Adulți Cluj, CLUJ-NAPOCA, Romania

doi: 10.1192/j.eurpsy.2022.612

Introduction: The role of the art therapist can be to identify the creative potential, to value it and to support social integration through art. Detecting and developing the outstanding and hidden abilities of the atypical child can lead to a normal behavior and to a better social integration.

Objectives: Increasing self-esteem, through personal satisfaction, emotional development and the development of hidden and outstanding skills.

Methods: Stimulating the child through the environment, works as a non-directive method during the art therapy session. Work environments offer various possibilities of expression, he chooses the materials to which he shows an interest, developing his own technique over time.