

Conclusions: Despite biases due to the one-site evaluation, the strength of the present study relies in the retrospectively cross-sectional observation design conducted to evaluate a three-year timeframe, spanning throughout the pandemic. The sharp reduction of admissions rates in 2020, is in line with other data regarding ED accesses' trends during pandemic. Increasing rates of admission of patients between 18 and 30 years could be a result of a stronger impact of the pandemic on young people's mental health. Moreover, increasing trends of admission of patients with substance abuse disorders may be potentially addressed to distress symptoms brought by the pandemic.

Disclosure of Interest: None Declared

EPP0684

Google trend analysis and lockdown impact on mental health during the COVID-19 pandemic

T. Mastelić¹, T. Borovina Marasović^{1*}, S. Kozina² and T. Glavina¹
Clinic for Psychiatry, Clinical Hospital Centre Split and ²Psychological medicine, School of Medicine, Split, Croatia

*Corresponding author.

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Introduction: The COVID-19 pandemic has affected the mental health of the world's population in numerous ways. One of the methods are certainly lockdown measures. The countries of the European Union (EU) were affected by the pandemic in different ways, but their response was partly coordinated. Google trend analysis has so far proven to be a useful tool for monitoring the reactions of the population and the state of their mental health.

Objectives: The aim of our research was to examine the impact of lockdown measures on the state of mental health through an internet search for terms related to mental health.

Methods: We observed three countries of the European Union in the period from February 1, 2020, until May 17, 2021. According to the average value of the CSI (covid stringency index), as an indicator of the strength of the lockdown measures, we chose Estonia, Belgium and Italy. CSI uses nine indicators (such as school closures, travel bans, ...) to assess the strength of the lockdown. Italy is the country that, according to the average value of the CSI, had the strongest closure measures in the mentioned period (average CSI 69.19468). In Estonia, the measures were the mildest (CSI 42.87324895), and Belgium represents the average (CSI 57.6381). We observed to what extent, in the mentioned countries, changing the CSI, i.e. the strength of lockdown measures, correlates with the search for terms in the field of mental health. We used Google trends data for the terms: tension, anxiety, depression, insomnia, concern. We also compared Croatia with the mentioned countries.

Results: In Estonia, there is no significant correlation between lockdown measures and searches for mental health terms. In Belgium, there is a correlation between CSI and searches for the term "anxiety" ($r=0.31$, $p<0.01$). In Italy, there is a correlation between CSI and searches for the terms "concern" ($r=0.22$, $p=0.067$), "tension" ($r=0.33$, $p<0.01$), "anxiety" ($r=0.55$, $p<0.001$). In Croatia, which is the 4th country with the weakest lockdown measures (CSI 46.90232), there is only a correlation between the strength of lockdown measures and searches for the term "tension" ($r=0.27$, $p<0.05$).

Conclusions: In countries with a higher CSI, i.e., stronger lockdown measures, there is a stronger correlation, i.e., a greater influence on the search for terms related to the state of mental health. We can assume that at some point the lockdown measures start to have a negative effect on the state of mental health.

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EPP0685

Efficiency of a psychiatric support for PTSD on a cohort of relatives of patients hospitalized in intensive care unit during the French lockdown – the OLAF (Opération Liaison et Aide aux Familles in French) dispositive

V. Raymond^{1*}, J. Salles¹, C. Aïtout², G. Ducos², S. Silva²,
C. Arbus¹ and P. Birmes¹

Psychiatry and ²Anesthesiology, Toulouse University Hospital, Toulouse, France

*Corresponding author.

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Introduction: Having a family member admitted in Intensive Care Unit (ICU) can cause a severe psychological stress, and various psychological disorders gathered into the notion of Post intensive care syndrome-family (PICS-F). In this way, Family-centered care in ICU represents the aim of international accepted recommendations focusing on a partnership approach to health care decision-making between the family and health care provider to prevent PICS-F. During the first SARS-CoV-2 linked lockdown, social restrictions impaired the right application of these recommendations, increasing risk of PICS-F, particularly Post-Traumatic Stress Disorder (PTSD).

Objectives: The main objective was to compare the PTSD prevalence at 6 months in a group of relatives including during OLAF implementation with a control group in a cohort of ICU-patient relatives.

Methods: Considering this, the psychiatric team and the ICU team of the Toulouse University, France, proposed the creation of a temporary device called OLAF (*Opération de Liaison et d'Aide aux Familles* in French), aiming to bring a psychological phone support to ICU-patient relatives. Besides this operational approach we designed a research approach that aimed to investigate the impact of OLAF device on PICS-F.

Results: We noted that 12 participants (11.5 %) presented a PTSD at 6 months without statistically significant differences between the groups ($p=0.8$). Considering that OLAF group presented higher PDI (Peritraumatic Distress Inventory) score at screening we also considered a mediation model suggesting that OLAF could have played a role to diminish the PCL-5 score as a covariable. In the multinomial logistic regression analysis, we found that the only factor associated with the PTSD diagnosis was the level of Anxiety and Depression Signs measured with HADS (Hospital Anxiety and Depression Scale) at screening ($OR=1.2$, $p<0.001$).

Conclusions: We found no difference in PTSD prevalence according to OLAF intervention. Nevertheless, our result suggested that the intervention could have played a role in reducing PTSD by acting on anxiety and peri traumatic distress in a mediated model. We found that anxiety score could serve as a risk marker to predict