

P111: Responses of deferment of appointments during Circuit Breaker (CB) amongst psychogeriatric elderly patients

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Introduction: The coronavirus disease 2019 (COVID-19) outbreak was declared a public health emergency by the World Health Organization (WHO) on 30 January 2020. COVID-19 circuit breaker (CB) was implemented in our country from April 2020 to June 2020 to curb the outbreak. Healthcare Institutions were tasked to reduce 'non-essential' outpatient appointments. This research aimed to capture the responses of elderly patients and caregivers to the deferment of appointments. It also attempted to identify psychiatric symptoms which might be exacerbated during the pandemic.

Methods: This retrospective review captured patients' mental state and caregivers' responses and preferences for subsequent reviews; reasons for their decisions; as well as mental state findings post CB.

Results: Records of 323 patients with a mean age of 79.24 ± 8.02 were analyzed. 50% were diagnosed with dementia (18% severe, 38% moderate, 44% mild); 23% depression; 11% anxiety and 16% psychosis. 64% documented stable mental state before CB. There was no statistical difference in the diagnoses and stability of mental state or decisions to defer. 77% agreed to defer whereas 7% preferred to retain appointments. Those who brought forward appointments (1%) reported insomnia with increased mood and anxiety symptoms. Post-CB mental state showed 57% of patients remained stable; 15% had increased mood symptoms and 11% reported worsening cognition.

Discussions: Patients with stable mental state before CB were more agreeable to defer appointments regardless of psychiatric diagnoses. Amongst those with dementia, caregivers reported distress with patients' inability to comprehend need for safe-distancing measures and closure of day care programs. Some caregivers were concerned about increased food intake, lack of physical and social activity. 11% showed increase forgetfulness and 15% suffered increase in mood and anxiety symptoms post-CB.

Conclusions: Despite the cohort's advanced age, 57% remained stable during CB. The anticipation of challenges in abiding by the safe-distancing measures with supporting documents of patients with mental illness allowed us to improve our psychoeducation efforts of our community. Cognition, mood and anxiety symptoms were exacerbated as a result of the safe distancing and movement restrictions during the pandemic.

P112: Valladolid Multicenter Study: Diagnostic agreement between physicians and liaison psychiatry units in an elderly population in 7 hospitals in Spain

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