

Thessaloniki, Greece and ⁵Faculty Of Social & Educational Sciences, University of Peloponnese, Corinth, Greece

*Corresponding author.

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Introduction: The illusion of invulnerability has been linked to lower perceived risk and increased engagement in risky behaviors among youth. Therefore, it has been purported to influence young people's poor adherence to public health measures aiming to contain the COVID-19 pandemic. Concomitantly, beliefs about the virus and mental health may also shape public health behaviours.

Objectives: To investigate the role of beliefs, perceived invincibility and mental health status in explaining frequency of hand-washing and hours outside the house among youth in Greece

Methods: A total of 1.899 students, aged between 18-29 years old, were recruited from the main universities of the country. An online questionnaire entailing: (i) popular beliefs about COVID-19, (ii) the DASS-21, (iii) the Adolescent Invincibility Tool and (iv) queries about health behaviours, was distributed during the lockdown period.

Results: Most participants reported washing their hands rarely/never within a day (78.6%) and spending 2-6 hours outside the house (68.1%). Handwashing was largely influenced by mental health [OR = 0.94, 95%CI= 0.91 – 0.98 for stress; OR = 0.96, 95% CI = 0.93-0.99 for anxiety and OR = 1.05, 95%CI= 1.02-1.08 for depression]; while hours outside the house by perceptions that the virus is out of control [OR=0.76, 95%CI = 0.61-0.95], manufactured [OR=1.21, 95%CI = 1.53, 95%CI =1.21 – 1.93] and airborne [OR= 0.78, 95%CI = 0.64-0.95].

Conclusions: Addressing stress and anxiety as well as health education interventions should be prioritized to foster young people's adherence to public health measures amid the pandemic.

Disclosure: No significant relationships.

Keywords: health behaviours; common mental disorders; health education; coronavirus

O062

Maintaining therapeutic continuity in adolescent psychiatric day hospital programs during the COVID-19 lockdown

G. De Vita^{1*}, A. Terrinoni¹, F. Di Santo¹, D. Calderoni¹, E. Rainò², A. Anichini² and M. Ferrara¹

¹Department Of Human Neuroscience, Section Of Child And Adolescent Neuropsychiatry, Sapienza University of Rome, Rome, Italy and ²Department Of Public Health And Pediatric, Division Of Child Neurology And Psychiatry, University of Turin, Turin, Italy

*Corresponding author.

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Introduction: The COVID-19 social lockdown imposed important limitation to non-emergency health care services in Italy, between March and May 2020, with many difficulties in the mental health assistance of those chronic conditions needing a continuative therapeutic support.

Objectives: Our study aimed to describe how therapeutic activities have been carried on by remote services in two Adolescent Psychiatric Day Hospital Units (Rome and Turin) and the outcome of these assistance interventions in youths with subacute psychopathology.

Methods: The patient cohort includes 162 adolescents (12-19 years old; QI>70) DH outpatients presenting a complete clinical and neuropsychiatric assessment before the lockdown. During the several phases of COVID-19 quarantine all patients were monitored and supported by telemedicine interventions. All data were recorded and standardized every 15 days: symptom severity was rated by global severity (CGI-S) and stress level by self-reported measures of stress (IES-R).

Results: Among patients, CGI score remained stable, IES-R score declined over time: higher IES-R score was significantly associated with female gender and but no differences was observed related with the primary diagnosis. 5 patients presented a clinical acute state needing a hospitalization. The rate of hospitalization was not significantly different compared with the rate observed in the same period of 2019.

Conclusions: In youth with psychopathological conditions, remote assistance for psychiatric cares resulted effective and it was associated with a clinical stability with decreasing stress levels.

Disclosure: No significant relationships.

Keywords: COVID-19; telemedicine; Adolescence Health Care Services; IES-R

O063

Rapid development of a decision-aid for people with dementia and their families during COVID-19

E. West^{1*}, N. Kupeli¹, K. Moore¹, E. Sampson¹, N. Aker², P. Nair² and N. Davies²

¹Division Of Psychiatry, University College London, Marie Curie Palliative Care Research Society, London, United Kingdom and

²Research Department Of Primary Care And Population Health, Centre for ageing population Studies, London, United Kingdom

*Corresponding author.

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Introduction: COVID-19 as a pandemic has disproportionately affected older adults, including those with dementia. The effects on health and social care systems has necessitated a rapid-response approach to care planning and decision-making in this population, with reflexivity and responsiveness to changing individual and system needs at its core. In light of this, a decision-making tool to help families of persons with dementia was developed using a combination of qualitative data and evidence synthesis.

Objectives: To develop a decision-aid using a combination of assessment and evidence-gathering methods for families of persons with dementia.

Methods: Semi-structured interviews with helpline staff from national end-of-life and supportive care organisations formed the basis of the tool design. Co-design with people living with dementia, current and former carers and experts in general practice and social care shaped the next stage. Simultaneously, a rapid review of current evidence on making decisions with older people at the end of life was undertaken.

Results: Output from interviews covered many topics, including trust, agency and confusion in making decisions in the context of COVID-19. The rapid review of existing evidence highlighted the need to consider both process and outcome elements of decision-making.

Conclusions: Combining different sources and forms of evidence was efficient and valuable in creating a novel decision-making tool for persons with dementia and their families within the context of COVID-19. The decision-aid covered care planning, caregiver support systems, access to information and contingency considerations. Upon publication, the tool was adopted by NHS England and other leading healthcare organisations.

Disclosure: No significant relationships.

Keywords: COVID-19; Decision-making; Place of Care / Place of Death; Advance Care Planning

O065

Perinatal depression and developmental risk of the infant: Analysis of a clinical sample and assessment of the impact of the COVID-19 pandemic

C. Pucci*, M. Caccialupi O. P., M. Panfili, N. Giacchetti, F. Aceti and C. Sogos

Human Neuroscience, University of Rome - La Sapienza, Rome, Italy

*Corresponding author.

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Introduction: Studies on large samples agree on the negative impact of maternal perinatal depression (PD) on child's cognitive development. Early experience with insensitive maternal interactions appears to be predictive of poorer cognitive functioning. These children present a higher risk for the onset of socioemotional development, nutrition, growth and sleep disorders. Research on Covid-19 pandemic suggests that families, particularly mothers, may be at increased risk of psychological distress.

Objectives: This study evaluates the effect of perinatal depression on child development and the impact of distress caused by the Covid-19 pandemic.

Methods: We designed a case-control study comparing, during Covid-19 pandemic, a group-A of children of mothers with PD (n=19), with a group-B of children of healthy mothers (n=21). The age of the children recruited was 4-35 months. Participating mothers underwent DP3-Interview and the socioemotional and adaptive-behavior Bayley's scales by telephone and completed an online survey (IES-R).

Results: We found significantly lower scores on the Bayley socio-emotional scale and in all the DP3-scales, in group-A. There is an inversely proportional correlation between the age of these children and overall development score of the DP3. On the IES-R scale, the medium scores in both groups show no psychological distress as a consequence of the Covid-19 pandemic, although mothers with PD show borderline total scores and higher hyper-arousal scale values.

Conclusions: This study confirms that PD is a risk factor for the onset of disorders in all areas of the child's development. Mothers with PD are less likely to manage psychological distress secondary to the pandemic.

Disclosure: No significant relationships.

Keywords: Mother-child interaction; Child development; COVID-19; Perinatal depression

O066

The impact of COVID-19 pandemic on suicides in portugal during the emergency state

S. Freitas Ramos*, M.I. Fonseca Marinho Vaz Soares, J. Martins Correia, B. Jesus, D. Cruz E Sousa and J. Mendes

Department Of Psychiatry And Mental Health, Local Health Unit of Guarda, Guarda, Portugal

*Corresponding author.

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Introduction: The mental health impact of the COVID-19 pandemic is well documented. Portugal entered the emergency state on 19th march due to rising numbers of infected patients. The emergency state introduced regulatory measures that restricted people's movements, applied a curfew, and closed most non-essential spaces and activities, such as shops and religious celebrations.

Objectives: To evaluate the rates of suicides during the emergency state in Portugal.

Methods: We obtained the number of probable suicides during 19th march and 2nd may 2020, 2019 and 2018 from SICO/eVM (Real Time Mortality Electronic Surveillance). This system is used for health planning in Portugal and provides provisory data which is updated every 10 minutes. Excel[®] was used for the statistical analysis.

Results: During the Emergency State in Portugal there were 57 probable suicides. Comparing to the same period in 2018 and 2019, there were 62 and 70 probable suicides, respectively. Social isolation, anxiety, fear of contagion, chronic stress, and economic difficulties may lead to the development or exacerbation of depressive, anxiety, substance use, and other psychiatric disorders. Literature on suicides due to COVID-19 mention not only fear of infection, but also social isolation and distancing and economic recession as causes for suicide attempts and completions.

Conclusions: During the emergency state there was not an increase of probable suicides, compared to previous years. The greater vigilance of people's movements may have deterred many attempts. However, policymakers and health care providers must be alert as the current psychosocial predispose to an increase in suicide rates.

Disclosure: No significant relationships.

Keywords: Suicide; COVID-19

O067

In this study: Adapting to the new normal in COVID-19 pandemic; a global survey & literature review

F. Arain^{1*}, A. Tohid², A. Arain³, D. Adam⁴, F. Khan⁵, A. Talpur⁶, A. Arain⁷ and W. Azeem⁸

¹Psychiatry, BronxCare Health System Mount Sinai, NY, United States of America; ²Psychiatry, University of Southern California, Los Angeles, United States of America; ³Psychology, City College of New York, New York, United States of America; ⁴Psychiatry, ICNA Relief Medical Clinic, Dallas, United States of America; ⁵Family Medicine, Brooklyn Hospital, New York, United States of America; ⁶Psychiatry, University of Louisville, Kentucky, United States of America; ⁷Internal Medicine, Ziauddin University Hospital, Karachi, Pakistan and ⁸Psychiatry, Sidra Medicine, Weill Cornell Medical College, Doha, Qatar, Doha, Qatar

*Corresponding author.

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