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**Introduction:** The investigation of alcohol use and its correlates during the ongoing COVID-19 pandemic is of utmost importance.

**Objectives:** This study aimed to examine alcohol use during COVID-19 pandemic, while nationwide lockdowns were in effect in Greece, and its relationship with demographic, clinical, and psychosocial factors.

**Methods:** The study included 378 individuals (225 women) with a mean age of 30.22 years who completed an online questionnaire during the third wave of the pandemic while restriction measures were in effect (March to April 2021). Participants completed Alcohol Use Disorders Identification Test (AUDIT), Fear of COVID-19 Scale (FCV-19S), Depression, Anxiety and Stress Scale (DASS-21), Coping Orientation to Problems Experienced Inventory (Brief-COPE) and the Multidimensional Scale of Perceived Social Support (MSPSS).

**Results:** According to the results, alcohol use was negatively associated with COVID-19 fear ($p = 0.011$), and positively associated with anxiety ($p = 0.024$), depression ($p<0.001$) and avoidance-focused coping strategies ($p = 0.003$). Furthermore, perceived social support emerged as a significant protective factor against alcohol use. Men presented higher alcohol use levels compared to women ($p = 0.002$). Additionally, individuals identified as problematic users, based on AUDIT scores, displayed increased levels of anxiety ($p = 0.028$) and depression ($p = 0.017$) and used avoidance-focused coping strategies to a greater extent ($p<0.001$). Of note, higher alcohol use was observed in participants who lived alone ($p<0.001$) and in those whose work status had changed during the pandemic ($p = 0.004$).

**Conclusions:** Our findings highlight the importance of identifying individuals with problematic alcohol use, as well as recognizing crucial psychosocial factors related to alcohol use especially during the pandemic.

**Disclosure of Interest:** None Declared

## EPP0153

### Clinical and demographic characteristics of hospitalized patients with COVID-19 referred to a Consultation - Liaison Psychiatry Unit

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**Introduction:** There is accumulating evidence that SARS-CoV-2 infection, apart from physical complications, can cause a variety of symptoms related to mental health, either during the acute phase of the infection or following the resolution of acute COVID-19 (i.e., long-COVID).

**Objectives:** To investigate the demographic and clinical characteristics of a sample of hospitalized patients with COVID-19.

**Methods:** Data were collected from 1 January 2021 to 31 May 2022. In particular, clinical and demographic characteristics of patients hospitalized with COVID-19 at the "Attikon" University General Hospital and who were referred for assessment to the Consultation Liaison Psychiatry unit were collected and analyzed.

**Results:** During the study period, 107 patients, 66 men (62%) and 41 women (38%) with a mean age of 63 years, with COVID-19 were referred to the Consultation Liaison Psychiatry unit for evaluation. Among them, 58 (54.6%) had a previous psychiatric history, while 49 (45.4%) were assessed for the first time by a mental health professional. The most frequent psychiatric manifestations included anxiety manifestations [38 patients (36%)], delirium [37 patients (35%)] and depressive manifestations [15 patients (14%)].

**Conclusions:** The description of demographic and clinical characteristics of hospitalized COVID-19 patients with concurrent psychiatric manifestations highlights the importance of early clinical detection of psychiatric comorbidity by physicians with a view to ensuring that patients' needs are supported in an integrated, holistic and patient-centric manner.

**Disclosure of Interest:** None Declared

## EPP0154

### infection and vaccination of Covid-19 rates in the psychiatric department of Monastir

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**Introduction:** The COVID-19 pandemic has created unprecedented challenges for the global health system. In this context, we have suggested as a research hypothesis that during this global health crisis, people with mental disorders, due to the phenomenon of "under medicalization", would be more affected by Covid infection and would have less chance to be vaccinated.

**Objectives:** To calculate the infection rate and vaccination rate for COVID-19 in patients with mental disorders.

**Methods:** This is a descriptive and cross-sectional study that took place over a period of one month (from March 2, 2022 to April 2, 2022) and involved patients attending the outpatient department of psychiatry at the Fattouma Bourguiba University Hospital in Monastir.

It was conducted using a predeveloped survey with 15 questions exploring sociodemographic characteristics, history of Covid infection (personal infection, hospitalization, infection in the family, death in the family…) and vaccination for Covid-19 and its modalities.

**Results:** The medium age of our sample was 44.9 ±13.7 years. The average duration of illness was 12.5 years and the average number of hospitalizations was 1.65.

Psychotic disorders were the most represented, 57.1%, compared to mood disorders and anxiety disorders.

Twenty-one percent (21%) of patients reported infection with COVID 19 and 3.1% required hospitalization.

Forty-six percent (46%) had an infected family member and 2.5% had a death in the family caused by COVID-19.

The rate of access to vaccination among our patients was 73.0%. The majority received 2 doses (60.0%), and they were vaccinated on their own initiative (68.0%) and by appointment (71.4%).

**Conclusions:** The disability presented by mental disorders, particularly psychotic disorders, can expose patients to marginalization. Indeed, patients with severe mental disorders could constitute a vulnerable population to COVID-19 infection because of their difficulty in accessing care, especially during the COVID-19 pandemic, hence the recommendations.

Particular attention must always be paid to patients with mental health disorders, regarding their access to care and the promotion of health for this population.

**Disclosure of Interest:** None Declared

## EPP0155

### How the COVID-19 Pandemic affected the Bereavement Process

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**Introduction:** The COVID-19 pandemic has caused millions of deaths worldwide. However, unlike a natural disaster, it has also affected end-of-life care and funeral rites through social restrictions.

**Objectives:** Understand how the COVID-19 pandemic affected the grieving process.

**Methods:** A PubMed literature search for all relevant studies was conducted used terms such as "prolonged gried disorder", "grief", "mourning", "bereavement" and "COVID-19". The articles were selected after two different analysis, a first one based on their titles and abstracts and a second one based on their full texts.

**Results:** Based on the evidence extracted from these articles, it is clear that the COVID-19 pandemic has had an important effect on the bereaved population. More specifically, several articles found there to be an increase in the prevalence of severe grief symptoms caused by deaths that occur during the pandemic period, regardless of cause of death (Eisma and Tamminga 2020, Tang and Xiang 2021, Breen, Mancini et al. 2022, Downar, Parsons et al. 2022, Gang, Falzarano et al. 2022). These results were explained by the disruption the grieving cycle due to social restriction which occurred during the pandemic period. These restrictions prevented the bereaved person from saying goodbye and being present at the time of death, holding mourning ceremonies, as well as having the needed social support during the mourning period (Goveas and Shear 2020, Kokou-Kpolou, Fernández-Alcántara et al. 2020, Mortazavi, Assari et al. 2020, Tang and Xiang 2021, Downar, Parsons et al. 2022). Regarding causes of death, the result were inconsistent, namely one study found to be higher grief levels associated with COVID-19 deaths when compared to natural causes, but not when compared to unnatural deaths, such as accidents and homicides (Gang, Falzarano et al. 2022). While another study found COVID-19 deaths caused are severe grief reactions when compared to natural deaths (Eisma and Tamminga 2022).

**Conclusions:** The COVID-19 pandemic has increased the prevalence of severe grief symptoms and therefore it is important for the scientific community to be sensitized to this effect. However, there is still a lack of studies concerning this theme, which are essential to define a course of action.

**Disclosure of Interest:** None Declared

## EPP0156

### PTSD and post-traumatic growth among healthcare workers during COVID-19

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**Introduction:** The COVID-19 pandemic has strongly impacted mental health outcomes of healthcare workers (HWs). In spite of the large literature reporting on Post-Traumatic Stress Disorder (PTSD) symptoms, only a few studies focused on potential positive aspects that may follow the exposure to the COVID-19 pandemic, namely post-traumatic growth (PTG) among HWs.

**Objectives:** In a large sample of Italian HWs, we aimed to investigate the prevalence of PTSD, its correlates and whether PTG dimensions independently affect the risk of PTSD during the first COVID-19 wave.

**Methods:** An online self-report survey was submitted to HWs throughout physicians' and nurses' associations, social networks and researchers' direct contacts, between April 4th and May 13th, 2020. Sociodemographic data, information about possible COVID-19 related stressful events, Impact of Event Scale-Revised (IES-R) and PTG Inventory-Short Form (PTGI-SF) scores were collected. IES-R and PTGI-SF scores were compared between subjects based on main sociodemographic, work- and COVID-19-related variables using the Student T-test or the one-way ANOVA where appropriate. Post-hoc comparisons were conducted using the Tukey test. Participants with total IES-R score >32 were assigned a provisional PTSD diagnosis and binary logistic regression analysis was conducted to investigate the contribution of each variable to the provisional PTSD diagnosis.

**Results:** Out of 930 respondents, 256 (27,1%) reported a provisional PTSD diagnosis. Female sex (p<.001), separation from cohabiting family (p<.001), family members infected with (p<.05) or deceased due to (p<.05) COVID-19, increased workload (p<.05), relocation to a different work unit (p<.05) and unusual exposure to sufferance (p<.001) were significantly associated with higher IES-R mean scores. The median PTGI-SF score was 24. Factors associated with greater mean PTGI-SF scores were female gender (p<.001), being a nurse (p<.05), being older than 40 years (p<.05), and increased workload (p<.05). The logistic regression model showed that previous mental disorders (OR=1.65; 95% CI= 1.06-2.57) working in medical (OR=2.20; 95% CI=1.02-4.75), or service units (OR=2.34; 95% CI=1.10-4.98) (compared to frontline unit), relocation to a COVID-19 unit (OR=1.90; 95% CI=1.06-3.36), unusual exposure to sufferance (OR=2.83; 95% CI=1.79-4.48) and exposure to a traumatic event implying threat to self (compared to other work-related events) (OR=2.07; 95% CI=1.10, 3.89) significantly increase the risk of receiving a provisional diagnosis of PTSD, while