S602 e-Poster Presentation

fewer non-locals and to less frequent non-severe presentations. Despite the type of patients (for underlying diagnoses) remained unmodified, an interesting reduction of anxiety symptoms and suicidal behavior was noticed. Literature from ED studies during the first wave are consistent with our finding regarding the number of visits; suicide attempts seemed unmodified or decreased elsewhere (Giner *et al.* Curr Psychiatry Rep 2022;24(1):1-10). Limitations of our study include peculiarities of the Venetian territory, limited sample and time of observation. Future directions encompass the integration with data from the community setting and later developments.

Disclosure of Interest: None Declared

EPP0980

COVID-19 pandemic and associated factors in pregnant women in urban Bangalore, South India: A qualitative analysis

S. Thomas^{1*}, K. Srinivasan¹, T. Thomas² and M. Ekstrand³

¹Division of Mental Health and Neurosciences, St. John's Research Institute; ²Biostatistics, St. John's Medical College, Bangalore, India and ³Medicine, University of California, San Francisco, United States

*Corresponding author.

doi: 10.1192/j.eurpsy.2023.1256

Introduction: The World Health Organization declared COVID-19 as a pandemic in March 2020, and this was followed by a series of preventive measures that included social distancing, travel restrictions and lockdowns in India. Pregnancy is a vulnerable time, with several physical and psychological changes associated with it. The added burden of pandemic could lead to significant stress, and it would be helpful to understand the mitigating factors of stress in this population.

Objectives: The objective of this study was to examine the mitigating factors associated with COVID-19 pandemic among pregnant women

Methods: The study was conducted in an Urban Primary Health Center (UPHC) in Bangalore that provides maternity care to low-middle income population. Antenatal check-ups are conducted here daily. Pregnant women visiting the clinic for routine antenatal care were approached and informed consent was sought for an interview. 295 women consented to participate in the study. The qualitative interview was conducted in a quiet room. Open ended questions were used to understand the participants' personal, familial, occupational, and social factors related to COVID-19. The transcripts of the interviews were manually coded for recurring themes by two research assistants. These were examined and similar or identical themes were grouped together. These were further analyzed, and themes were summarized.

Results: The mean (SD) age of the participants was 24.9 (4.2) years, approximately half of the participants were in their first trimester and primiparous. The majority were high school educated and self-employed. 25% of the participants reported mild to moderate depressive symptoms assessed using PHQ-9. The most predominant theme among personal factors was negative emotions that included fear and anxiety. The uncertainty about the transmission and the lack of clarity about the causes during the pregnancy were

the reasons for these fears. They reported that they found news and media more stressful. They reported that even though the lockdown restricted their movement, they enjoyed the time they spent with the family, especially their husbands. Most participants reported job loss, theirs and their husbands' and had to encounter severe economic difficulties. However, the predominant theme was the social support that they received from family, friends, neighbors, and local governing bodies.

Conclusions: Social support was reported to be the most predominant factor that helped the pregnant women to cope with the problems presented during the pandemic. Social support, both instrumental and emotional were important mitigating factors for stress during the pandemic. Strengthening the social support system by support groups and community networking should be a crucial component in government-led initiatives as a factor that may promote resilience in difficult situations like the pandemic.

Disclosure of Interest: None Declared

EPP0981

Mental health challenges in health care workers during COVID pandemic

S. Bilichodu Rangappa^{1,1}* and S. Avula²

¹Psychiatry, Chamarajanagar Institute of Medical Sciences, Mysore, India and ²Endocrinology, University of Minnesota, Eden Prarie, United States

 ${}^* Corresponding \ author.$

doi: 10.1192/j.eurpsy.2023.1257

Introduction: Mental health issues of the health care workers (HCW) are often overlooked. It's often presumed that situations like COVID are handled well by this group of population and hence their own mental wellbeing is ignored and neglected.

Objectives: The objective of this study was to evaluate the depression and anxiety levels in healthcare workers who were on COVID duty.

Methods: This study was performed over telephonic interview of all the healthcare workers who were performing COVID duty from March 2021 to December 2021. Hospital Anxiety and Depression Scale (HADS) was administered. Various factors influencing the presentation were then analyzed.

Results: Over 534 healthcare workers were screened for psychiatric symptoms. About 76 fulfilled HADS criteria. 7.86% (42) scored above the anxiety cut off point and 6.36% (34) scored above the depression cut off point. About 373 (69.85%) expressed concerns about their safety and security as they were staying away from their families and about 469 (87.8%) expressed concerns about uncertainties about duty patterns.

Conclusions: Health care workers should be screened for psychiatric illness if they are in constant stress. They should be well trained to carry out COVID duties which will reduce the anxiety about the duty patterns. Better awareness about COVID 19 may lead to decreased levels of anxiety and depression.

Disclosure of Interest: None Declared