

Screening for somatoform symptoms (Rief, Hiller, 2003) and Illness Perception Questionnaire - Revised (Moss-Morris et al., 2002).

**Results:** 2 (Groups)  $\times$  2 (Time: Before / After) ANOVA with repeated measures revealed major effect of time with both groups demonstrated equal decrease in somatoform symptoms during treatment ( $F=101.42$ ,  $p<.01$ ,  $\eta^2=.52$ ). Patients from both groups after treatment appraised their illnesses as having shorter duration without cycles, less severe consequences on their lives, reported increase in treatment control, understanding of their illness and decrease in emotional reactions ( $F=7.13-30.62$ ,  $p<.01$ ,  $\eta^2=.07-.24$ ). In group analysis condition only patients demonstrated increased beliefs that psychological and risk factors could impact their illness (interaction:  $F=4.58-7.24$ ,  $p<.05$ ,  $\eta^2=.05-.07$ ).

**Conclusions:** Patients with somatoform disorders almost equally benefitted from both psychoeducation and group analysis but group analysis psychotherapy led to better awareness of psychological and risk factors of their illness.

**Keywords:** group analysis; somatoform disorders; illness representation

### EPP0018

#### Iatrogenesis as a possible cause of chronification of mental disorders.

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**Introduction:** Most mental disorders tend to relapse (severe or mild pathologies such as anxiety or dystimia disorders), which are potentially recoverable and yet, tend to evolve poorly, persisting residual symptoms without achieving a complete recovery.

**Objectives:** The objective of this paper is to analyze the factors that influence process of recurrence and chronification, among which are our own therapeutic interventions.

**Methods:** A bibliographic search was performed from different database (Pubmed, TripDatabase) about the iatrogenic potential of our intervention (psychopharmacological or psychotherapeutic), analyzing influence and mechanisms involved, and the way to prevent them.

**Results:** Anxiety is a necessary element for the development of people, both from a biological perspective (natural and adaptive psychological response that allows us to respond adequately to possible threats); as an evolutionary psychological (element involved in conflict resolution, in turn necessary for personal development). It would be a mistake to consider it as pathological and try to eliminate it through medication or psychotherapy, since we could interfere with the natural recovery processes, contributing to its chronification and preventing possibility of change. At times, anxiety can be pathological when it occurs disproportionately and exceeds ability to adapt, but we must not eliminate it but to study origin and factors involved, to achieve complete resolution.

**Conclusions:** In conclusion, we must consider possible iatrogenesis of our therapeutic interventions in process of chronification of mental disorders and try to avoid them by adequately studying individual factors and characteristics, before intervening.

**Keywords:** iatrogenesis; chronification; Anxiety; therapeutic interventions

### EPP0019

#### Preoperative anxiety in patients admitted for brain surgery: A systematic review

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**Introduction:** Up to 80% of patients scheduled for surgery experience preoperative anxiety, which may implicate perioperative psychological and physical discomforts. Several studies focused on this phenomenon in neurosurgical setting, still controversial evidence exists.

**Objectives:** Our aim is to synthesize this evidence, investigating prevalence, implications and therapy of preoperative anxiety in brain surgery patients.

**Methods:** We performed a systematic review of literature by searching PubMed, Embase, and Cochrane Library databases. Data were extracted using the PICO framework. PRISMA guidelines were applied, and the risk of bias was assessed using the RoB 2 and ROBINS tools, as was the methodological quality of the included studies, following GRADE criteria; we excluded articles with serious risk of bias and/or low quality.

**Results:** We included 27 articles, accounting for 2558 patients of twelve different countries. Prevalence of anxiety before brain surgery was up to 89%, reaching higher levels in women. Anxiety concerned mostly anesthesia and surgical outcome. No correlation emerged between level of anxiety and laterality, histological type of tumor or survival rate. Before surgery, anxious patients performed worse in cognitive tasks and had worse subjective evaluation of their cognitive abilities. After surgery, preoperative anxiety was associated with depression, longer hospitalization, increase of physical disability and lower quality of life. Effective approaches to reduce anxiety were acupuncture, music therapy, virtual reality and pharmacological support.

**Conclusions:** Preoperative anxiety in brain surgery patients is a common experience that should not be underestimated to achieve a better perioperative care through early detection and adequate pharmacological or non-pharmacological management.

**Keywords:** preoperative anxiety; brain surgery; quality of life; Systematic review

### EPP0022

#### Prevalence of health anxiety in indian ophthalmologists during COVID-19: a survey

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**Introduction:** Mental health concerns are common in health care workers during pandemic. There are no studies of the prevalence of health anxiety in ophthalmologists in India.