

**Conclusions:** Despite biases due to the one-site evaluation, the strength of the present study relies in the retrospectively cross-sectional observation design conducted to evaluate a three-year timeframe, spanning throughout the pandemic. The sharp reduction of admissions rates in 2020, is in line with other data regarding ED accesses' trends during pandemic. Increasing rates of admission of patients between 18 and 30 years could be a result of a stronger impact of the pandemic on young people's mental health. Moreover, increasing trends of admission of patients with substance abuse disorders may be potentially addressed to distress symptoms brought by the pandemic.

**Disclosure of Interest:** None Declared

## EPP0684

### Google trend analysis and lockdown impact on mental health during the COVID-19 pandemic

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**Introduction:** The COVID-19 pandemic has affected the mental health of the world's population in numerous ways. One of the methods are certainly lockdown measures. The countries of the European Union (EU) were affected by the pandemic in different ways, but their response was partly coordinated. Google trend analysis has so far proven to be a useful tool for monitoring the reactions of the population and the state of their mental health.

**Objectives:** The aim of our research was to examine the impact of lockdown measures on the state of mental health through an internet search for terms related to mental health.

**Methods:** We observed three countries of the European Union in the period from February 1, 2020, until May 17, 2021. According to the average value of the CSI (covid stringency index), as an indicator of the strength of the lockdown measures, we chose Estonia, Belgium and Italy. CSI uses nine indicators (such as school closures, travel bans, ...) to assess the strength of the lockdown. Italy is the country that, according to the average value of the CSI, had the strongest closure measures in the mentioned period (average CSI 69.19468). In Estonia, the measures were the mildest (CSI 42.87324895), and Belgium represents the average (CSI 57.6381). We observed to what extent, in the mentioned countries, changing the CSI, i.e. the strength of lockdown measures, correlates with the search for terms in the field of mental health. We used Google trends data for the terms: tension, anxiety, depression, insomnia, concern. We also compared Croatia with the mentioned countries.

**Results:** In Estonia, there is no significant correlation between lockdown measures and searches for mental health terms. In Belgium, there is a correlation between CSI and searches for the term "anxiety" ( $r=0.31$ ,  $p<0.01$ ). In Italy, there is a correlation between CSI and searches for the terms "concern" ( $r=0.22$ ,  $p=0.067$ ), "tension" ( $r=0.33$ ,  $p<0.01$ ), "anxiety" ( $r=0.55$ ,  $p<0.001$ ). In Croatia, which is the 4th country with the weakest lockdown measures (CSI 46.90232), there is only a correlation between the strength of lockdown measures and searches for the term "tension" ( $r=0.27$ ,  $p<0.05$ ).

**Conclusions:** In countries with a higher CSI, i.e., stronger lockdown measures, there is a stronger correlation, i.e., a greater influence on the search for terms related to the state of mental health. We can assume that at some point the lockdown measures start to have a negative effect on the state of mental health.

**Disclosure of Interest:** None Declared

## EPP0685

### Efficiency of a psychiatric support for PTSD on a cohort of relatives of patients hospitalized in intensive care unit during the French lockdown – the OLAF (Opération Liaison et Aide aux Familles in French) dispositive

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**Introduction:** Having a family member admitted in Intensive Care Unit (ICU) can cause a severe psychological stress, and various psychological disorders gathered into the notion of Post intensive care syndrome-family (PICS-F). In this way, Family-centered care in ICU represents the aim of international accepted recommendations focusing on a partnership approach to health care decision-making between the family and health care provider to prevent PICS-F. During the first SARS-CoV-2 linked lockdown, social restrictions impaired the right application of these recommendations, increasing risk of PICS-F, particularly Post-Traumatic Stress Disorder (PTSD).

**Objectives:** The main objective was to compare the PTSD prevalence at 6 months in a group of relatives including during OLAF implementation with a control group in a cohort of ICU-patient relatives.

**Methods:** Considering this, the psychiatric team and the ICU team of the Toulouse University, France, proposed the creation of a temporary device called OLAF (*Opération de Liaison et d'Aide aux Familles* in French), aiming to bring a psychological phone support to ICU-patient relatives. Besides this operational approach we designed a research approach that aimed to investigate the impact of OLAF device on PICS-F.

**Results:** We noted that 12 participants (11.5 %) presented a PTSD at 6 months without statistically significant differences between the groups ( $p=0.8$ ). Considering that OLAF group presented higher PDI (Peritraumatic Distress Inventory) score at screening we also considered a mediation model suggesting that OLAF could have played a role to diminish the PCL-5 score as a covariable. In the multinomial logistic regression analysis, we found that the only factor associated with the PTSD diagnosis was the level of Anxiety and Depression Signs measured with HADS (Hospital Anxiety and Depression Scale) at screening ( $OR=1.2$ ,  $p<0.001$ ).

**Conclusions:** We found no difference in PTSD prevalence according to OLAF intervention. Nevertheless, our result suggested that the intervention could have play a role in reducing PTSD by acting on anxiety and peri traumatic distress in a mediated model. We found that anxiety score could serve as a risk marker to predict

PTSD and should probably be precociously screened and treated in this population.

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## EPP0686

### Psychological impact of the covid 19 pandemic on health care workers

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**Introduction:** The COVID 19 pandemic had a significant psychological impact worldwide. Health care workers (HCWs) were the most affected because of the pandemic burden and occupational exigencies.

**Objectives:** To describe epidemiological characteristics of HCWs with post COVID19 anxiodepressive disorders.

**Methods:** A descriptive cross-sectional study was carried out. It included HCWs of a university hospital who consulted the Occupational Medicine Clinics for the three-month post-COVID's medical visit. The study was carried out during the period March 2020 to January 2022. The data was collected using a questionnaire including socio-occupational and medical characteristics. Psychometric evaluation was carried out using « the Hospital Anxiety and Depression Scale »

**Results:** We have collected 164 HCWs. The sex ratio (M/F) was 0.29. The average age was 41±9.8 years. They belonged to the pneumology (27%), intensive care (11%) and biology laboratory (11%). The prevalence of anxiety and depression was 34% and 30% respectively. We found an association between sleep disorders and anxiety (p=0.000), OR=5 IC95%[2.4-10.3] and depression (p=0.000), OR= 4 IC 95%[2.0-9.3]. We found an association between anxiety and persistent fatigue (p=0,000), OR=4[2,0-8,6], anxiety and concentration and memory difficulties (p=0,000), OR=3 IC 95%[1,7-6,9]. Referral to psychiatric consultations were done in 16% of the cases.

**Conclusions:** Post-COVID anxiety disorders were frequent among HCWs and associated with neurocognitive disorders. Psychiatric support and early treatment are necessary to prevent mental deterioration.

**Disclosure of Interest:** None Declared

## EPP0687

### Anxio-depressive disorders among healthcare workers in COVID-19 department

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**Introduction:** The COVID pandemic has troubled the world and disrupted the professional and personal lives of healthcare workers, putting their mental health at risk.

**Objectives:** Determine the prevalence of anxiety-depressive disorders among health personnel assigned to the COVID-19 circuit.

**Methods:** Cross-sectional study carried out on healthcare personnel assigned to departments dedicated to the care of patients hospitalized for a SARS-COV2 infection. The study took place between March and September 2021. Data collection was done from a pre-established sheet. Anxiety-depressive disorders were screened using the HAD scale.

**Results:** The study included 140 health personnel. The sex ratio (M/W) was 0.62 with 54 men and 86 women. The mean age was 36.4±9 years. Nurses represented the largest professional category (64.6%). Professional seniority was 10 ± 9 years. Staff had been caring for patients with COVID for an average of 9 ±5 months. They worked an average of 4 days a week. The number of patients ranged from 1 to 55 per department. Psychiatric history was found in 29 participants, depression in 7% and anxiety in 2%. The workload was rated very hard at 42.1% and hard at 37.1%. Thirty percent of the population declared having received the moral support necessary to face the wave. The prevalence of anxiety and depression were 75.7% and 72.9% respectively. With 48.6% of patients presenting with definite anxiety and 27.1% with probable anxiety. Depression was certain in 40% of cases and doubtful in 32.9% of cases.

**Conclusions:** Anxio-depressive disorders are common among healthcare staff assigned to the COVID circuit. Setting up listening cells with regular monitoring of these staff is very important to avoid psychological impact

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## E-mental Health 02

### EPP0689

#### Experiences with a blended cognitive behavioral therapy (bCBT) intervention for the treatment of depression and anxiety in university students: A qualitative study

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**Introduction:** Internet-based cognitive behavioral therapy (iCBT) programs have been widely acknowledged as effective resources to treat common mental health disorders (CMDs) like depression or anxiety. However, real-world uptake rates remain low, which could be associated to low individualization options of iCBT. Blended cognitive behavioural therapy (bCBT) allows for more personalized care by combining regular face-to-face therapy sessions with digital therapeutics (DTx). However, in-depth experiences with DTx in bCBT programs have yet rarely been examined. In this study, we