

Methods: We performed a literature search, using Pubmed, EMBASE, Scopus and Cochrane library databases, to search for new scales identifying COVID-19 related mental health problems.

Results: During the first half of the year 2020, we found five published new self-report measurement instruments: Coronavirus Anxiety Scale (CAS), the COVID Stress Scales (CSS), the Fear of COVID-19 Scale (FCV-19S), the Obsession with COVID-19 Scale (OCS), and the Questionnaire on Perception of Threat from COVID-19. These instruments have been validated in a group of middle-aged ambulatory patients.

Conclusions: These new instruments might be useful in non-clinical settings. Although the psychometric reports are promising, the instruments have been validated in a less vulnerable group of patients. Future validation studies should also comprise other age groups, particularly the old and more vulnerable population.

Disclosure: No significant relationships.

Keywords: mental health; Covid-19

EPV0450

Schizophrenia in Covid-19 crisis : Is it a mortality risk factor ?

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Introduction: Patients with mental disorders mainly schizophrenia represent a vulnerable population. In Covid-19 pandemic situation, could schizophrenia be considered as a significant mortality risk factor ?

Objectives: In this study, we aimed to explore the odds of significant COVID-19 mortality among schizophrenia patients

Methods: Our literature review was based on the PubMed interface and adapted for 2 databases: Science Direct and Google Scholar using the following combination (schizophrenia [MeSH terms] AND (COVID-19, mortality[MeSH terms])

Results: Our review included 4 population-based cohort studies covering the period from december 2019 to May 2021. The data showed increased mortality risk among individuals with schizophrenia who have had COVID-19. Indeed, this high rate of mortality maybe associated with multiple factors such as unhealthy lifestyle, low socioeconomic status and comorbidities as obesity, diabetes and cardiovascular conditions. The use of antipsychotics can be considered as a risk factor regarded its immunomodulatory effects. Furthermore, stigma and discrimination towards mental illnesses particularly schizophrenia might have contributed to a worse prognosis.

Conclusions: Schizophrenia is a severe mental disorder, associated with an increased high risk Covid-19. Thus, this population require enhanced preventive and disease management strategies.

Disclosure: No significant relationships.

Keywords: Covid-19; schizophrénia; mortality

EPV0451

Factors Associated With The Covid-19 Infection Severity In Patients With Mental Disorders

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Introduction: Recent research showed that persons with mental disorders may represent a population at increased risk for coronavirus disease (COVID-19) infection with more adverse outcomes.

Objectives: We aimed to analyze clinical profile of psychiatric inpatients during their infection with COVID-19, and to explore factors associated with the disease progression.

Methods: We analyzed retrospectively the medical records of 32 psychiatric inpatients, hospitalized in psychiatry “B” department at Hedi Chaker hospital (Sfax, Tunisia), and who contracted the COVID-19 infection. We used “Charlson Comorbidity Index Score” (CCIS), predicting 10-year survival in patients with multiple comorbidities.

Results: Somatic history was reported in 50% of patients. The CCIS ranged between 0 and 4. Psychiatric diagnosis was schizophrenia in 81.3% and bipolar disorder in 18.7% of cases. The clinical symptoms reported were fever (50%), dry cough (75%); dyspnea (34.4%). Biological assessment showed a lymphopenia in 40.6% and a high C-Reactive Protein (CRP) in 53.1%. Among our patients, 37,5% needed oxygen, and 25% were transferred to the intensive care unit. The COVID-19 complications were mostly bacterial pulmonary superinfections (21.9%) and pulmonary embolism (9.4%). Only three (9.4%) patients died from the virus. Patients with medical history were more likely to need oxygen (p<0.001). Clinical and paraclinical parameters associated with oxygen need were: fever (p<0.001); dyspnea (p<0.001); lymphopenia (p<0.001); high CRP (p=0.001). Patients presenting pulmonary superinfection or embolism were more likely to require oxygen (p=0.006 and p=0.044 respectively).

Conclusions: This study highlighted factors that may worsen the COVID-19 infection evolution, and which require special attention, in order to improve the prognosis of this disease.

Disclosure: No significant relationships.

Keywords: COVID19; psychiatry; Mental Disorders

EPV0454

Factors Associated with Mental Health Outcomes and the Level of Work Engagement Among Health Care Workers Exposed to Coronavirus Disease 2019 in Tunisia

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Introduction: Health workers especially in the emergency rooms and emergency medical services are exposed to sustained stress which had increased due to the Pandemic situation

Objectives: To search for factors associated with mental disorders among health workers during the Covid 19 pandemic

Methods: Data were collected through a questionnaire, with demographic variables and different scales to evaluate the degree of symptoms of depression, anxiety, insomnia, distress, and the level of work engagement (PHQ-9, GAD-7, ISI, IES-R, UWES-9).

Results: Of the 217 participants, 46% were physicians, 42% were nurses and 12% were emergency medical technicians. We also found a female predominance of 66%, 55% were single and a total of 155 participants of whom 71% were frontline health workers. In our study, 54.8% of the HCWs had symptoms of depression, 68.2% had symptoms of anxiety and insomnia and 71.4% had symptoms of distress. Binary logistic regression analysis showed that being married was associated with depression, anxiety, and insomnia, and being a frontline worker appeared to be a risk factor for depression and insomnia. Psychiatric support was an independent risk factor for all psychiatric symptoms. In addition, living in a rural area was associated with depression, and age 31 or older was associated with anxiety. In addition, having a history of psychiatric illness was a risk factor for insomnia. Being a nurse was identified as a risk factor for psychiatric distress. We also found a moderate level of professional commitment to be a protective factor.

Conclusions: Protecting healthcare workers is a crucial part of the public health response to the COVID-19 outbreak.

Disclosure: No significant relationships.

Keywords: Covid-19 pandemic-mental health-health care workers-depression-insomnia-distress-anxiety-work engagement

EPV0455

The support of healthcare workers suffering from COVID 19.

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Introduction: The COVID-19 pandemic has focused attention on the challenges and risks faced by frontline healthcare workers (HCW).

Objectives: To describe the quality of management of HCW affected by the COVID-19.

Methods: This is a cross-sectional study enrolling all HCW of Farhat Hached Academic hospital who had been affected by COVID-19 during the period from September to December 2020.

Results: During the study period, 267 HCW were affected with a mean age of 42.3 ± 10 years and a ratio-sex of 0.25. The most represented category was nurses (33.3%) followed by technicians (26.1%). Gynecology department had the highest number of affected HCW (14.4%). The majority of participants (97.4%) reported a medical care. Twelve HCW (4.5%) were hospitalized

with an average length of hospital stay of 7.55 ± 6.12 days. The average length of sick leave was 18.68 ± 10.99 days. During the lockdown, 38.6% of HCW took care of their children without any external help. All of the HCW were supported by phone calls from colleagues in 88.4% of cases, the hierarchy in 67.4% of cases, occupational medicine in 60.3% of cases.

Conclusions: The impact of COVID 19 is greater in HCW than in the general population. The affected staff should have a multidimensional management to avoid post covid sequelae in both physical and mental levels.

Disclosure: No significant relationships.

Keywords: support; healthcare workers; covid 19

EPV0456

The relationship between burnout and self-regulation resources in teachers during COVID-19 pandemic

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Introduction: Burnout is understood as a stable professional and personal deformation, which can be typical for teachers (Maslach, Schaufeli, 1993). Multilevel structure of burnout that include physiological, affective-cognitive, and behavioral dimensions was described (Perlman, Hartman, 1998). C. Maslach proposes a three-dimensional burnout model, including emotional exhaustion, depersonalization and reduction of personal achievements (Maslach, 2000; Schaufeli, Enzman, 1998). It is especially important to prevent burnout by effective using of self-regulation resources during the COVID-19 pandemic, when the level of stress increases (Samanta et al., 2020; Pascale, 2020).

Objectives: The study was held in 50 teachers, who worked remotely during the self-isolation due to COVID-19 pandemic, and aimed to estimate the relationship between psychological resources of self-regulation and signs of reduced professional burnout in teachers during the COVID-19 pandemic.

Methods: The assessment methods included: 1) Maddi's "Hardiness survey"; 2) Hobfoll's "SACS"; 3) Maslach's "Burnout inventory".

Results: The results revealed that the teachers with high and medium burnout differ in terms of engagement as a component of hardiness ($p=0,002$). The teachers with less pronounced burnout syndrome have more developed involvement, which means that these teachers enjoy their own activities and, perhaps, this is what becomes a psychological resource and allows to overcome emotional exhaustion. There is an inverse relationship between such a sign of professional burnout as emotional exhaustion and involvement as a component of hardiness ($r=-0,521, p=0$).

Conclusions: The results of the study can be applied to develop programs to improve the psychological well-being and performance of teachers working under stress due to COVID-19 pandemic.

Disclosure: No significant relationships.

Keywords: COVID-19; burnout; self-regulation resources; hardiness