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 ?

K. Nourchene[1,2]*, E. Khelifa[3], B. Abassi[4], S. Ben Aissa[5], O. Maatouk[3], I. Bouguerra[6] and L. Mnif[5]

[1]Razi hospital, Pedopsychiatry, Tunis, Tunisia; [2]Razi hospital, Skolly, Tunis, Tunisia; [3]Razi Hospital, F Adult Psychiatry Department, Manouba, Tunisia; [4]Razi Hospital, Psychiatry Ibn Omran, Manouba, Tunisia; [5]Hôpital Razi, Psychiatry F, Manouba, Tunisia and [6]Errazi hospital-Mannouba, F, Mannouba, Tunisia
*Corresponding author.
doi: 10.1192/j.eurpsy.2022.1303

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

M. Turki, A. Daoud, S. Blanji*, S. Ellouze, R. Ben Jmeaa, F. Ben Abdallah, N. Halouani and J. Aloulou

Hedi Chaker University Hospital, Psychiatry "b" Department, Sfax, Tunisia
*Corresponding author.
doi: 10.1192/j.eurpsy.2022.1304

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

I. Betbout[1]*, B. Amemou[1], A. Ben Haouala[1], Y. Touati[2], M. Benzarti[1], F. Zaafrane[1], A. Mhalla[1] and L. Gaha[1]

[1]fattouma bourguiba hospital, Psychiatry, Psychiatry Research Laboratory Lr05es10 "vulnerability To Psychoses" Faculty Of Medicine Of Monastir, University Of Monastir, monastir, Tunisia and [2]University Hospital of Sahloul and Farhat Hached, Emergency, sousse, Tunisia
*Corresponding author.
doi: 10.1192/j.eurpsy.2022.1305