EPV0376

Housing and youth mental health during a COVID-19 lockdown

J. Groot[1]*, A. Keller[1], A. Joensen[1], T.-L. Nguyen[1], A.-M. Nybo Andersen[1] and K. Strandberg-Larsen[2]

[1]Department Of Public Health, University of Denmark, Copenhagen K, Denmark and [2]Section Of Epidemiology, University of Copenhagen, Copenhagen, Denmark

*Corresponding author.

doi: 10.1192/j.eurpsy.2021.1938

Introduction: Declines in mental health among youth in the COVID-19 pandemic have been observed, yet longitudinal studies on how housing may impact these declines are lacking.
Objectives: Our aim was to determine whether changes in mental health among Danish youth were dependent on their housing conditions.
Methods: Young participants from the Danish National Birth Cohort, who had responded to an online questionnaire at 18 years of age, and later during the initial national Danish lockdown, were included. Associations between housing conditions (direct access to outdoor spaces, urbanicity, household density, and household composition) and changes in mental health (mental well-being, quality of life (QoL) and loneliness) were examined in multivariate linear and logistic regression analyses.
Results: We included 7455 participants. Greater decreases in mental well-being were observed for youth with no access to direct outdoor spaces and those living in denser households (mean difference -0.83 [95 % CI -1.19, -0.48], -0.30 [-0.43, -0.18], respectively). Onset of low mental well-being was associated with no access and living alone (odds ratios (OR) 1.68 [1.15, 2.47] and OR 1.47 [1.05, 2.07], respectively). Household density was negatively associated with QoL (mean difference -0.21 [-0.30, -0.12]). Youth living alone experienced more loneliness (OR 2.12 [95 % CI 1.59, 2.82]).
Conclusions: How youth's mental health changed from before to during lockdown was associated with housing conditions. Among the Danish youth in our study, greater decreases in mental health during lockdown were observed among youth without access to outdoor spaces, living alone, or living in denser households.

Disclosure: No significant relationships.
Keywords: public health; mental health; COVID-19; housing

Migration and mental health of immigrants

EPV0377

The worms that invade your brain

G. Marinho[1]*, J. Peta[2], S. Vieira[1] and M. Marguilho[3]

[1]Clinica 6, CHPL, Lisbon, Portugal; [2]Psychiatry, Centro Hospitalar Psiquiátrico de Lisboa, Lisboa, Portugal and [3]Clínica 5, Centro Hospitalar Psiquiátrico de Lisboa, Lisboa, Portugal

*Corresponding author.

doi: 10.1192/j.eurpsy.2021.1939

Introduction: Neurocysticercosis is a parasitic infection of the central nervous system and caused by the pork tapeworm Taenia solium. Humans become infected after consuming undercooked food or water contaminated with tapeworm eggs, or through poor hygiene practices. The clinical manifestations of neurocysticercosis (NCC) largely depend on the number, type, size, localization, and stage of development of cysticerci, as well as on the host immune response against the parasite. Seizures are the most common manifestations of NCC (70–90%) of patients, followed by headache (38%), focal deficits (16%) and signs of intracranial hypertension (ICH) (12%), but psychiatric symptoms can also be seen.
Objectives: Literature review on neuropsychiatric manifestations of neurocysticercosis, based on a clinical case.
Methods: Pubmed search using the keywords neurocysticercosis, psychiatric comorbidity, neuropsychiatric manifestations.
Results: We present a clinical case of a 29-year-old male patient, with history of an epilepsy, that immigrated to Portugal with his family from Cape Verde for specialized medical care. He presented to the ER with an acute psychotic episode characterized by disorientation, persecutory ideation, psychomotor agitation and violent behavior. Brain CT scan showed multiple calcifications in cerebral parenchyma and CSF was positive for antibodies against T. solium.
Conclusions: The polymorphous symptomatology seen in NCC is mimicked only by neuro-tuberculosis and neurosyphilis in developing countries, and multiple sclerosis in the Western countries. Psychiatric symptoms are a part of the clinical presentation of infectious diseases. It is important to consider NCC in endemic areas presenting with psychiatric symptoms, especially those showing poor response to the standard treatment and in those with history of seizures.

Disclosure: No significant relationships.
Keywords: neurocysticercosis; psychiatric comorbidity; neuropsychiatric manifestations

EPV0378

Psychotic disorders in migrant population

P. Felgueiras* and P. Barbosa

Psychiatry, Vila Nova de Gaia Hospital Center, Vila Nova de Gaia, Portugal

*Corresponding author.

doi: 10.1192/j.eurpsy.2021.1940

Introduction: One of the defining features of the modern world is a large scale migration that occurs due to a range of factors, from political conflicts to personal and voluntary reasons. This process can cause a severe disruption in individuals' biography and can be followed by a large period of adaptation and a phenomenon of acculturation. Surprisingly, there is little research on the impact of migration and settlement on risk of psychosis.
Objectives: Regarding a clinical case, we aim to enphasize the current evidence about the risk of psychotic disorders in migrants.
Methods: We present a qualitative review of this topic using the Pubmed database.
Results: 27 years old portuguese female, with hyperthymic temperament and history of depressive episode. Her process of migration in 2016 was motivated by an academic purpose. In context of