

particularly vulnerable to depression because of its close contact with patients.

Objectives: The aim of this work was to screen and evaluate depression in the frontline professionals during the pandemic and to study their associated factors.

Methods: In this study, we conducted a national descriptive and analytical cross-sectional study over a 2-month period from September to October 2020. We used “Beck Depression Inventory” to assess depression and “Brief Cope Scale” to detect a possible correlation between depression and coping mechanisms.

Results: We collected 78 professionals. The mean age was 29.86 years. 2/3 of workers were women. 67.9% of the staff were residents. 39.7% worked in Covid units. 7.7% had personal psychiatric history. 56.4% of the staff worked daily and 76.9% of them provided direct care to patients with Coronavirus. 52.6% of workers did not receive adequate training of protection against Covid-19. The staff reported 66.7% of death among their patients. 42.3% suffered from minor depression and only 2.3% suffered from severe depression. During this period we objectified an increase of 14.1% in the psychoactive substances use. Stigma affected 57.7% of professionals. We didn't objectify a significant correlation between Depression and coping mechanisms.

Conclusions: Screening depression among healthcare professionals should be considered in order to prevent it, ensure continuity of care and avoid sick leaves.

Disclosure: No significant relationships.

Keywords: Depression; frontline staff; Coronavirus-2019

EPV0497

Assessing sexual health status among Tunisian ICU healthcare providers in times of the COVID-19

A. Loghmari^{1*}, M. Kahloul², K. Bouassida¹, Y. Slama², A. Harzali², M. Friaa¹, M. Soussi², M. Jaidane¹ and W. Naija²

¹University hospital center of Sahloul, Urology Department, Sousse, Tunisia and ²Sahloul Academic Hospital, University of medicine, “Ibn Al Jazzar”, Sousse, Tunisia, Department Of Anesthesia And Intensive Care,, Sousse, Tunisia

*Corresponding author.

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Introduction: The COVID-19 pandemic has dramatically affected ones well-being. ICU healthcare providers are particularly concerned by this impact which includes physical, mental and socio-economic repercussions. Others health dimensions could be deeply affected but not well explored such as the psycho-sexual status.

Objectives: The aim of this study was to assess sexual health status among ICU healthcare providers.

Methods: This was a cross-sectional study enrolling Tunisian ICU healthcare providers and conducted between July and September 2021. Data collection was based on a self-administrated questionnaire. To assess sexuality, Arabic validated versions of the IIEF-15 and the FSFI was used for male and female respectively. The Fear of COVID-19 Scale and the Rosenberg Self-esteem questionnaire were also used.

Results: Twenty ICU workers (13 physicians and 7 nurses) were enrolled. The mean age was 28.2 years and the sex ratio was 2.3. All participants were involved in COVID-19 crisis management and

80 % reported an increase in their workload. The mean Rosenberg scale was 27 suggesting a low self-esteem. The mean Covid19 Fear Scale was 26 ± 2 . For the IIEF-15 the mean score was 17 ± 3 (moderate erectile dysfunction) and the most damaged dimension was the intercourse satisfaction. For the FSFI scale, the mean was 23 ± 5 with (a low sexual dysfunction). A high sexual desire with a lack in the satisfaction dimension was reported in 90% of cases. Only 4 participants have consulted a sexologist.

Conclusions: COVID-19 has a serious sexual impact in ICU healthcare providers justifying urgent psychological interventions.

Disclosure: No significant relationships.

Keywords: ICU healthcare providers; sexuality; Sexual health; covid 19

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Effects of the COVID-19 Pandemic on Social Determinants of Mental Health and Psychiatric Decompensation

J. Jay¹, E. Garrels^{1*} and P. Korenis²

¹BronxCare Health System, Psychiatry, Bronx, United States of America and ²Bronxcare Health System, Psychiatry, New York, United States of America

*Corresponding author.

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Introduction: The impact of the COVID-19 pandemic has propelled changes in healthcare delivery, incorporating new technologies and resulting in interruptions of care and access to treatment.

Objectives: To understand the ways that the COVID-19 pandemic has affected mental health, particularly in those with psychotic disorders. The unique nature and scale of the COVID-19 pandemic today presents an opportunity to learn more about the challenges faced by our patients and improvements that can be made in the delivery of mental healthcare.

Methods: We report five cases of patients with preexisting psychotic disorders seen on an inpatient psychiatry unit who decompensated for reasons relating to the COVID-19 pandemic. We conducted a review of the literature by searching the PubMed database for the keywords “mental health,” “psychosis,” “COVID-19,” “epidemic,” “pandemic,” and “coronavirus.”

Results: The prevalence of psychotic disorders in the US is estimated to be between 0.25% and 0.64%. In the context of an epidemic or pandemic, the incidence of psychotic symptoms in those infected with a virus is estimated to be between 0.9% and 4%, demonstrating increased risk to this group. The effects of the COVID-19 pandemic have contributed to psychiatric decompensation.

Conclusions: The COVID-19 pandemic is an opportunity to identify ways in which our patients are at risk and how we can attempt to alleviate those risks to provide improved care going forward. By appreciating the multifaceted ways in which the current situation has affected our patient population, we can extrapolate lessons that will allow us to better serve our patients even when this pandemic passes.

Disclosure: No significant relationships.

Keywords: pandemic; Covid-19; decompensation; Psychosis