Methods: The intervention included a 12-week aerobic exercise program and a session of lifestyle psychoeducation. Effectiveness was measured in terms of a wide range of outcomes involving physical and psychological health, functioning, quality of life, physical activity, and changes in motivation to exercise. Maintenance of effects after 24 months of follow-up was observed identified regulation to exercise and also for negative symptoms of psychosis (Table).

Results: The active intervention group showed benefits after Bonferroni correction over clinical global impression, identified motivation to exercise and changes of physical activity pattern.

Results: The prevalence of schizophrenia is close to 1 percent internationally. According to the 2019 census, the population in the province of León, our study population, is 460,001 inhabitants.

Introduction: The development of obesity and metabolic abnormalities that seed future ill-health occur early with antipsychotic treatment. In 2013, the 12-week Keeping the Body in Mind (KBIM) pilot lifestyle intervention was delivered to a small sample of youth experiencing first-episode psychosis (FEP) with <4 weeks antipsychotic exposure in a cluster-controlled design. The control group experienced significant increases in weight (mean 7.8kg) and waist circumference (mean 7.1cm) compared to non-significant increases (mean 1.8kg) in the KBIM group.

Objectives: To study the distribution of schizophrenia in the area covered by the Complejo Asistencial Universitario de León, Spain.

Methods: This is a retrospective and cross-sectional descriptive study. The data of the hospitalizations of the last 10 years (2009-2019) will be obtained in any service of the CAULE of the 28 basic health areas of the province of León, with a diagnosis of schizophrenia. Prevalence will be calculated. The rate of schizophrenia will be calculated for the decade per 1000 inhabitants.

Conclusions: Hospitalizations for schizophrenia is concentrated in the decade of 40-49 years. The diagnosis of schizophrenia is frequently delayed until negative symptoms appear. There is an upward trend in hospitalizations per year in the last decade. The rate of schizophrenia is higher in areas where consanguinity is present and where the prison is located.

Disclosure: No significant relationships.

Keywords: schizophrenia; distribution; Hospitalizations

EPP0018

Schizophrenia: Study of Tendency and Distribution

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Introduction: The prevalence of schizophrenia is close to 1 percent internationally. According to the 2019 census, the population in the province of León, our study population, is 460,001 inhabitants.

Objectives: To study the distribution of schizophrenia in the area covered by the Complejo Asistencial Universitario de León, Spain.

Methods: This is a retrospective and cross-sectional descriptive study. The data of the hospitalizations of the last 10 years (2009-2019) will be obtained in any service of the CAULE of the 28 basic health areas of the province of León, with a diagnosis of schizophrenia. Prevalence will be calculated. The rate of schizophrenia will be calculated for the decade per 1000 inhabitants.

Results: 3133 admissions identified 1576 unique patients. It is the decade of 50-59 where the largest number of hospitalizations is concentrated. Most entered directly into the psychiatry hospital care. It is 2019 where the most income is produced and 2017 the one with the least. The rate of schizophrenia is 3.2 Per 1000 inhabitants.

Conclusions: Hospitalizations for schizophrenia is concentrated in the decade of 40-49 years. The diagnosis of schizophrenia is frequently delayed until negative symptoms appear. There is an upward trend in hospitalizations per year in the last decade. The rate of schizophrenia is higher in areas where consanguinity is present and where the prison is located.

Disclosure: No significant relationships.

Keywords: schizophrenia; distribution; Hospitalizations

EPP0019

Implementation of a lifestyle and life-skills intervention to prevent weight-gain and cardiometabolic abnormalities in people with first-episode psychosis: the Keeping the Body in Mind program

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Introduction: The development of obesity and metabolic abnormalities that seed future ill-health occur early with antipsychotic treatment. In 2013, the 12-week Keeping the Body in Mind (KBIM) pilot lifestyle intervention was delivered to a small sample of youth experiencing first-episode psychosis (FEP) with <4 weeks of antipsychotic exposure in a cluster-controlled design. The control group experienced significant increases in weight (mean 7.8kg) and waist circumference (mean 7.1cm) compared to non-significant increases (mean 1.8kg) in the KBIM group.

Objectives: To evaluate the effect of KBIM as routine care on anthropometry and metabolic biochemistry in a larger sample of youth with FEP across three mental health services.

Methods: This retrospective chart audit was conducted on youth with FEP, prescribed a therapeutic dose of antipsychotic medication, and who engaged with KBIM between 2015 and 2019. Primary outcomes were weight and waist circumference. Secondary outcomes were blood pressure, blood glucose and blood lipids. Outcomes were collected in a pre-post design. Implementation elements were also obtained from the participant’s medical file.
**Results:** One-hundred and eighty-two people met inclusion criteria. Follow-up data were available on up to 134 people for individual outcomes. Mean number of sessions attended was 11.1 (SD=7.3). Weight and waist changes were limited to 1.5kg (SD=5.3, t(133)=3.2, p=0.002) and 0.7cm (SD=5.8, t(109)=1.2, p=0.23). Nineteen percent experienced clinically significant weight gain. There were no changes to blood pressure or metabolic biochemistry.

**Conclusions:** The positive outcomes for weight and waist circumference found in the initial pilot study were maintained with implementation as routine care.

**Disclosure:** No significant relationships.

**Keywords:** First-episode psychosis; Antipsychotics; weight-gain; Metabolic

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**EPP0021**

**Alert plan-application “MySolutions” - lived experiences of users with a serious mental illness**

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**Introduction:** In daily life an alert or relapse prevention plan can be a helpful tool in preventing patients with severe mental illness (SMI) from relapse. However, patients often find it hard to keep the paper version close by. A smartphone version could be a solution. “MySolutions” is a webapplication providing the possibility to add e.g. pictures or music to the alert plan, which could be helping in time of need.

**Objectives:** To describe the lived experiences of patients with (SMI) with the webapplication ‘MySolutions’ and get insight in the helping and hindering characteristics of the application.

**Methods:** Qualitative research in a fenomenological framework. Eight interviews were held with outpatients with SMI. All interviews where methodically analyzed using the steps of Colaizzi (1978).

**Results:** In general, users were enthousiastic about the look and feel of the application. Using the application was considered easy. Lived experiences of participants displayed the following themes: Autonomy, Acceptance, Frustration, Self confidence, and Reassurance. By practicing and adding photos and music, they perceived the webapplication to be a personal aid tool for experienced problems related to mental vulnerability in daily life. Participants also reported more difficulties in using the application in times of dysregulation.

**Conclusions:** The webapplication can be a valuable addition to the alert plan for people with SMI due to the possibility of personalization and the fact it is always available on a mobile phone. The application seems particularly suitable for people in a stable phase. Future research should focus on phase of recovery in relation to use of the application.

**Disclosure:** No significant relationships.

**Keywords:** users experience; Serious mental illness; relapse prevention plan; alert plan

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**COVID-19 and Related Topics 01**

**EPP0023**

**Symptoms of anxiety/depression during the COVID-19 pandemic and associated lockdown in the community: longitudinal data from the TEMPO cohort in France**

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**Introduction:** The COVID-19 pandemic and associated preventive measures have an impact on the persons’ mental health, including increasing risk of symptoms of anxiety and depression in particular. Individual experiencing mental health difficulties in the past could be especially vulnerable during lockdown, however, few studies have tested this empirically considering preexisting mental health difficulties using longitudinal data.

**Objectives:** The objective of this study is to examine the longitudinal association between preexisting symptoms of anxiety/depression and symptoms of anxiety/depression during lockdown due to the COVID-19 pandemic in a community sample.

**Methods:** Seven waves of data collection were implemented from March-May 2020. Generalized estimation equations models were used to estimate the association between preexisting symptoms of anxiety/depression and symptoms of anxiety/depression during lockdown among 662 mid-aged individuals from the French TEMPO cohort.

**Results:** We found an elevated odds ratio of symptoms of anxiety/depression (OR=6.73 95% [CI=4.45–10.17]) among individuals experiencing such symptoms prior lockdown. Furthermore, the odds of symptoms of anxiety/depression during lockdown was elevated among women (OR=2.07 [95% CI=1.32–3.25]), subjects with low household income (OR=2.28 [1.29–4.01]) and persons who reported loneliness (OR=3.94 [2.47–6.28]).

**Conclusions:** This study demonstrates a strong relationship between preexisting symptoms of anxiety/depression and anxiety/depression during the COVID-19 outbreak among mid-aged French adults. The findings underline the role of pre-existing symptoms of anxiety/depression as a vulnerability factor of anxiety/depression during lockdown. Furthermore, the study shows that loneliness is independently associated with symptoms of anxious/depression, when controlling for prior anxiety/depression symptoms.

**Disclosure:** No significant relationships.

**Keywords:** Symptoms of anxiety/depression; Longitudinal study; lockdown; Covid-19