

Disclosure: No significant relationships.

Keywords: Concordance; liaison psychiatry; Diagnostic

EPV0138

Psychiatric disorders during acute hospital treatment of COVID-19 - a case series

L.A. Fernandes^{1*}, C. Ribeiro², M. Martins³, J. Carreno⁴, I. Guerra⁵, C. Oliveira¹, C. Vieira¹, A. Luís¹ and T. Maia¹

¹Mental Health Department, Hospital Prof. Doutor Fernando Fonseca EPE, Amadora, Portugal; ²Child And Adolescent Psychiatry Mental Health Department, Hospital de Dona Estefânia, Centro Hospitalar Universitário de Lisboa Central, Lisboa, Portugal; ³Psychiatry Department, Hospital Distrital de Santarém, EPE, Santarém, Portugal; ⁴Agrupamento De Centros De Saúde Sintra, Unidade de Saúde Familiar Monte da Luz, Queluz, Portugal and ⁵Agrupamento De Centros De Saúde Sintra, Unidade de Saúde Familiar Mactamã, Queluz, Portugal

*Corresponding author.

doi: 10.1192/j.eurpsy.2021.1736

Introduction: Coronavirus disease (COVID-19) has been associated with the development mental and behavioural symptoms and psychiatric disorders. This association is stronger in severe cases of the disease and in those needing inpatient treatment, particularly in intensive care units (ICU).

Objectives: To determine the incidence of psychiatric disorders in a Portuguese hospital-based sample of patients with COVID-19. To describe relevant demographic and clinical data.

Methods: We reviewed all COVID-19 inpatients assessed by liaison psychiatry at our hospital between April and September 2020. Patients admitted due to a psychiatric disorder were excluded from the analysis. We reviewed medical records and retrieved relevant clinical data. ICD-10 was used to classify diagnoses.

Results: We identified 36 cases with a mean age of 62.64 years-old (SD 19.23). The most common disorder was delirium, which occurred in 41.7% of our sample (15 patients), followed by adjustment disorder (22.2%, n=8), and depressive episode (16.7%, n=8). Most patients had no personal (61.1%, n=22) nor family (75%, n=27) history of a psychiatric disorder. Mean length of admission was 36.89 days (SD 28.91). Seventeen cases (47.22%) had at least one risk factor for severe COVID-19 disease and 14 (38.89%) were admitted at some point to the ICU.

Conclusions: In our sample, delirium was the main cause for mental or behavioural symptoms in COVID-19 patients. However, we observed a wide array of presentations in our center. A larger sample would allow to better characterize this often-overlooked symptoms and identify risk factors to psychiatric syndromes.

Disclosure: No significant relationships.

Keywords: delirium; liaison psychiatry; COVID-19

EPV0139

Barking dogs seldom bite? a case of diagnostic overshadowing in emergency department

J. Gonçalves Cerejeira^{1*}, C. Burón², I. Santos Carrasco¹, C. Capella Meseguer¹, E. Rodríguez Vázquez¹, M. Queipo De Llano De La Viuda¹, A. Gonzaga Ramírez¹ and G. Guerra Valera¹

¹Psiquiatria, Hospital Clínico Universitario de Valladolid, Valladolid, Spain and ²Psychiatry, Hospital Clínico Valladolid, Valladolid, Spain

*Corresponding author.

doi: 10.1192/j.eurpsy.2021.1737

Introduction: Diagnostic overshadowing is one of the main consequences of stigma involving patients diagnosed with a psychiatric disorder. Some studies show that in emergency departments, being diagnosed with a psychiatric illness can lead to a poor evaluation of organic symptoms, delaying the diagnosis and putting the patient's life at risk.

Objectives: - To present the case of a patient diagnosed with factitious disorder who was misdiagnosed after attending the emergency department due to the stigma related to his psychiatric diagnosis. - To provide a reflection on stigma in mental health.

Methods: We will present a case report and a literature review.

Results: We report a case of a 57-year-old man diagnosed with a factitious disorder. He attended the emergency department of our tertiary care center with confused speech, desorientation and disruptive behavior at home. Although the clinical picture was compatible with a confusional state, he was ordered to be admitted to the psychiatric service. No blood test was previously requested. Three hours after being admitted, he suffered an episode of seizures. A blood test was requested and severe hypomagnesemia (0.2 mg / dl) was found. Because of this episode the patient was admitted to the Intensive Care Unit for three days.

Conclusions: Factitious disorder is a serious mental disorder with a significant stigmatizing burden. Giving a patient this diagnostic label should be the subject of careful thought in order to protect him from future diagnostic neglect.

Disclosure: No significant relationships.

Keywords: Stigma; Diagnostic overshadowing; factitious disorder

COVID-19 and related topics

EPV0140

Lockdown: A chance to strengthen the relationship or to widen the gap for tunisian couples?

L.S. Meddouri*, E. Cherif, A. Hajri, A. Maamri and H. Zalila

Psychiatry, Outpatient Service, Razi Hospital, Manouba, Tunisia

*Corresponding author.

doi: 10.1192/j.eurpsy.2021.1738

Introduction: General lockdown due to the outbreak of Corona virus is a major change in people's lives. Some mental health professionals consider it as a traumatic event with potentially serious psychiatric repercussions, especially on married couples.

Objectives: Determine the consequences of the lockdown on married couples.

Methods: An online survey conducted on social media during Mai 2020.

Results: A total of 223 married persons filled our survey with 86,1% females. Marriage was traditional in 17%, through mutual friends and acquaintances in 0,4% and after a love story in 84,3%. Families were not consenting to the marriage in 5,4% and 28,7% of