

in the UK, were compared to the same period in 2019. The demographics of patients, along with the nature, severity and outcomes of the self-injury were recorded and compared.

Result. The number of patients referred for self-injury reduced by 22.9% during lockdown (2020: N = 42/109, 2019: 67/109)

The most common attendance route was via ambulance during lockdown (2020:40.5% 2019: 31.3%) whilst the most common attendance route being via the front door in 2019 (2019: 35.8%, 2020: 26.2%)

The number of new presentations with no prior history of self-injury was higher in lockdown 38.1%) compared to 2019 26.9%.

The lockdown cohort had a smaller proportion of patients presenting with complications (2020: 9.5% vs 2019: 17.9%), less readmitted (2020: 11.9% vs 2019: 23.9%). Similar re-attendance rate (2020: 40.3% vs 2019: 38.1%) and re-intervention (2020: 13.4% vs 2019: 14.3%).

A greater proportion in 2020 met the threshold for inpatient psychiatry input (2020: 52.4% vs 2019: 41.8%).

During the lockdown, a higher percentage of flexor tendon injuries involved multiple tendons (60.0% vs 52.2%). A higher percentage of extensor tendon injuries (14.3% vs 7.4%), and a greater proportion of these also involved multiple tendons (66.7% vs 40.0%). More self-injuries were complicated by fractures (7.1% vs 4.5%) and more required soft tissue reconstruction (11.9% vs 3.0%).

Conclusion. Despite fewer patients presenting with self-injury during the 2020 lockdown, the injuries were more severe. Many of which had multiple structural injuries, and some with life-changing injuries, this is in line with our clinical observations.

During lockdown there was a higher proportion of first-time presentations without a history of self-injury and an increased need for inpatient psychiatry input. This may reflect the impact on mental health as a result of restricted social interactions.

These findings demonstrate the impact of lockdown on mental-health and may help inform medical services of potential changes in the presentations in future national social restrictions.

Growing pains: a scoping literature review of how perinatal psychiatry was impacted by COVID-19

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Aims. This scoping review aims to assess the impact of COVID-19 on the field of Perinatal Psychiatry and identify any innovations made as a result of this.

Background. The World Health Organisation declared the COVID-19 outbreak a global pandemic on March 11th 2020. This pandemic has transformed the way in which Perinatal Psychiatric services are delivered in the United Kingdom and countries across the globe acting as a catalyst for innovation.

Method. The databases searched for peer reviewed literature written since December 2019 were: PsychINFO, MEDLINE, EMBASE, CINAHL and PUBMED. Search strategy key words were: COVID-19, SARS-CoV-2, perinatal psychiatry and maternal mental health. Arksey and O'Malley's framework was utilised. Data were collated and summarized thematically.

Result. 42 studies met the inclusion criteria. The aforementioned studies included data from over 60,000 women from the following countries: China, Italy, Netherlands, United States, United Kingdom, Brazil, India, Spain, Ireland, Norway, Switzerland, Iran, Japan and Nepal. Literature clearly indicates that during the pandemic there was an increase in depression and anxiety. Risk factors included: financial insecurity, disrupted antenatal

care, isolation, poor physical health and domestic violence. Evidence also suggested COVID-19 stressors impacted feeding practices and infant development as cytokines pass from mother to baby.

Perinatal Psychiatry services have adopted social media apps to provide antenatal information, teleconsultations, smartphone-based cognitive-behavioral therapy (iCBT) programs and increased utilisation of screening tools such as the Pandemic-Related Pregnancy Stress Scale (PREPS), the Edinburgh Postnatal Depression Scale (EPDS) and the Postpartum Specific Anxiety Scale.

Conclusion. Whilst this review features literature centred on women from across the globe African women are underrepresented. This should be addressed in future studies. This review shows that the COVID-19 pandemic has impacted maternal mental health and acted as a catalyst for innovation. It is essential that efforts are made to support women during pregnancy and the perinatal period now more than ever.

Skin Deep? : A scoping literature review of the psychological impact of Acne Vulgaris on patients and the role of the Psychiatrist

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Aims. This literature review aims to assess existing scientific literature on the psychological impact of Acne Vulgaris on adolescents and adults and the role that Psychiatrists can play in supporting these patients. The hypothesis of this literature review is that all patients with Acne Vulgaris should have their quality of life assessed in order to identify those who require additional support.

Background. The link between Psychiatry and Dermatology is becoming increasingly recognised. Resources on the British Association of Dermatologists' website are often distributed to patients by Dermatologists in order to assess the impact that a skin condition has had on a patient's life. Acne Vulgaris is a psychophysiological skin condition that impacts up to 95% of people to some extent from the ages of 11 to 30 years old. Due to its prevalence it is essential that the psychological burden of Acne Vulgaris on patients is understood.

Method. Literature written since 2011 was searched identified from: PsychINFO, MEDLINE, EMBASE, CINAHL and PUBMED. The search strategy key words were: acne vulgaris, mental health, psychiatry, anxiety and depression. Arksey and O'Malley's framework was utilised to conduct a scoping literature review. Data were collated and summarized thematically.

Result. A total of 72 studies were included representing over 14,000 adults and adolescents with Acne Vulgaris from the following countries: Egypt, Nigeria, Turkey, India, Lithuania, UK, USA, Iran, Pakistan and Spain.

Screening tools such as the Global Acne Grading System (GAGS), The Acne Quality of Life Scale (AQLS), the Cardiff Acne Disability Index (CADI), and the State Trait Anxiety Index STAI (Y-1) form were utilised in order to identify the impact of Acne Vulgaris on patients' quality of life and mental health. The data clearly showed the significant psychological burden that patients with Acne Vulgaris can experience. There was a clear trend of low self-esteem, lack of self-confidence, social withdrawal, depression (ranging from 23.1% to 62% of study participants), anxiety (ranging from 38.4% to 51%) and even suicidal ideation (ranging from 12.9% to 20.1%). Literature also