

Introduction: In the midst of a global pandemic with a rising death toll, the children's mental health can be easily overlooked in the country's response. But this overlook would have devastating consequences for years to come.

Objectives: The objective of this research is to compare children's physical and mental development before, during and after the situation of social isolation caused by the pandemic of COVID-19.

Methods: The parents/guardians of 100 children aged between 0 and 5 years and 11 months old were asked to answer questions based on the ASQ-3 (Ages and Stages Questionnaire III), containing questions related to Communication, Gross Motor, Fine Motor, Problem Solving, and Personal-Social and ASQ-SE (Ages and Stages Questionnaires Social-Emotional) addressing issues of self-regulation, compliance, social-communication, adaptive functioning, autonomy, and affect. In addition, behavioral issues related to children's mental health will be included, such as: aggressiveness, insomnia, lack of appetite, apathy, sadness, tiredness, lack of interest, hyperactivity, manias, tantrum, morning among others. Child development data will be collected before and during quarantine / isolation and later, in a second stage, after the end of social isolation.

Results: The data will be analyzed in order to characterize child behavior before, during and after the period of social isolation, correlating the different areas of child development, especially mental health.

Conclusions: As argued, socially isolated children are at increased risk of health problems in adulthood. Furthermore, studies on social isolation have demonstrated that a lack of social relationships negatively impacts the development of the brain's structure.

Disclosure: No significant relationships.

Keywords: COVID-19; mental health; language; Child development

EPV0153

Psychosis secondary to indomethacin. A case report

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Introduction: Indomethacin, a non-steroidal anti-inflammatory treatment used in various inflammatory diseases, is one of the drugs that has been related to the appearance of psychotic symptoms as a side effect.

Objectives: Point out the importance of knowing the possible psychiatric symptoms that some drugs can cause as a side effect.

Methods: Description of a clinical case and bibliography review.

Results: We present the case of a 71-year-old woman, with no previous mental health history, who is referred by her primary care physician due to the presence of auditory hallucinations and self-referential ideas. As a somatic history, the patient presented Rheumatoid Arthritis under control by rheumatology and acoustic neuroma, under control by neurosurgery. Treatment with Risperidone was started, up to 2 mg, which helped control her symptoms. After an exhaustive study of her situation, the possibility that her symptoms were a side effect of her usual treatment was raised. It was evidenced that the patient had taken a higher dose of

Indomethacin than prescribed by the rheumatologist, reason why its daily intake was suspended, and subsequently an improvement and even suppression of symptoms was seen. Later, due to a misunderstanding, the drug was reintroduced, and symptoms appeared again.

Conclusions: The appearance of psychotic symptoms has been related to the intake of various drugs, including Indomethacin. It is essential to carry out a differential diagnosis if psychotic symptoms appear in the subject.

Disclosure: No significant relationships.

Keywords: Indomethacin; COVID-19

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Neutropenia in patients treated with clozapine during COVID-19 infection

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Introduction: Clozapine is the most effective antipsychotic for treatment resistant schizophrenia but adverse reactions to clozapine include neutropenia. Patients with COVID-19 infection frequently experience lymphopenia, but not neutropenia. The impact of clozapine treatment in the presence of COVID-19 is unknown.

Objectives: Show 2 cases of neutropenia in patients treated with long-term clozapine during COVID-19 infection.

Methods: Subjects: 48 admitted patients to a long-stay psychiatric unit. COVID-19 infection confirmed by positive nasopharyngeal swab for viral ribonucleic acid of SARS-CoV-2. Hematological controls between March and April 2020.

Results: 16 patients (33%) treated with clozapine. 18 patients (37.5%) had COVID-19 infection, of which 5 (10.4%) were treated with clozapine; 2 presented neutropenia. 1- 56-year-old woman diagnosed with schizophrenia on clozapine since 2009. Begins to have a dry cough and fever with positive COVID-19 swab (day 0). Slight leukopenia without neutropenia was observed on day 1. On day 7, neutropenia was observed with an absolute neutrophil count (ANC) of 1100. We decided to suspend clozapine and to initiate daily hematological controls. The ANC on day 8 was 970. Over the next few days the ANC will progressively improve until neutropenia resolved (day 22). 2- 55-year-old woman who required a transfer to a general hospital because of respiratory complications from COVID-19. She presented significant leukopenia ($1.01 \times 10^3/\mu\text{L}$) and neutropenia (ANC 100). Clozapine was not withdrawn. She was treated with granulocyte colony-stimulating factor.

Conclusions: An urgent full blood count will be required to exclude neutropenia with appropriate action. Further research will be needed to clarify the possible relationship between COVID-19, clozapine and neutropenia.

Disclosure: No significant relationships.

Keywords: clozapine; neutropenia; COVID-19