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ABSTRACT
SUPPLEMENT**



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The Abstracts of the 29th European Congress of Psychiatry - 2021 will be published as a Supplement to *European Psychiatry* and have been peer-reviewed by the Local Organising Committee of the European Congress of Psychiatry.

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is essential to carry out a differential diagnosis if psychotic symptoms appear in the subject.

Disclosure: No significant relationships.

Keywords: Indomethacin; COVID-19

EPV0154

Adaptation disorders in relatives of patients with COVID-19

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doi: forthcoming

Introduction: Against the background of the COVID-19 pandemic, the number of adaptive disorders and changes in behavior patterns among the population has increased. Lack of control over the situation leads to loss of self-control, violation of control over emotions.

Objectives: Are to study the types of reactions of relatives of patients with an established diagnosis of COVID-19.

Methods: 92 relatives of patients with COVID-19 were examined. The group was of the same type in terms of socio-demographic and clinical parameters. The assessment was carried out using the ICD-10 criteria, the clinical and psychopathological method and the Holmes and Rahe Stress Scale.

Results: 69.6% of the surveyed showed medium and high levels of stress according to the Holmes and Rahe Stress Scale. Among them, the medium level (198 points \pm 2.38) was found in 73.44% of relatives and the high level (412 points \pm 1.76) was established in 26.56%. Two variants of responses to stressful news were identified: the hyperkinetic response was observed in 64.01% of relatives of patients with COVID-19 and hypokinetic response in 35.93%.

Conclusions: The medium and high stress levels dominated in relatives of COVID-19 patients. The hyperkinetic and hypokinetic variants of response to a stressful event were established. The response variants depended on the type of disorganization of mental activity and required the provision of both medication and non-medication assistance.

Disclosure: No significant relationships.

Keywords: relatives; stress level; Adaptation disorders; COVID-19

EPV0155

COVID-19 and PTSD

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doi: forthcoming

Introduction: A crisis is a condition caused by a change in one, more or all aspects of a person's material or socio-cultural ambient

reality. COVID-19 has already led to a variety of mental health problems, including PTSD.

Objectives: How COVID-19 affects patients with PTSD.

Methods: Patient at 49 years old, mother of one, with severe depression and suicidal ideation. After the birth of the first child, she was exposed to a series of subsequent stressful events, the loss of two children at the age of 8 months, the loss of a child at the age of 4 years, forced abortion. Throughout this period, she believed that she would solve the crisis on her own with multiple attempts of pregnancy. With the onset of the COVID-19 pandemic, she developed an intense fear of losing the child, a sense of the disappearance of reality, which required professional help. She was admitted to daily hospital treatment. She was treated with a combination of pharmacological and psychosocial treatment, individually and in groups.

Results: After three months, she was followed by an improvement in the mental condition.

Conclusions: Every crisis is a threat to losing an object. Man is aware of reality indirectly through the objects - the basic representatives of reality: children. Parents who lost a child had a shorter life expectancy than parents who did not grieve. Research suggests several possibilities for this - unresolved grief, long-term symptoms of PTSD.

Disclosure: No significant relationships.

Keyword: COVID-19 'add' PTSD 'add' crisis 'add' recognition

EPV0156

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