

Introduction: Burn-out syndrome is an underestimated entity in the medical environment, and lack of health policies for screening, prevention and early phase treatment strategies may be responsible for complications of this syndrome, e.g. major depression, substance use disorders, or anxiety disorders. Large variations in the estimation of burn-out prevalence in healthcare providers may be related to poorly designed epidemiological trials and lack of well-defined criteria for diagnosis.

Objectives: To analyse the current evidence in the literature about the diagnosis and treatment of burn-out syndrome in physicians and auxiliary personnel.

Methods: A literature review was performed through the main medical databases (Cochrane Database of Systematic reviews, PubMed, Thomson Reuters/Web of Science, SCOPUS, EMBASE, CINAHL) using the search paradigm “burn-out” AND “healthcare providers” OR “physicians” AND “nurses”. All papers published between January 2000 and August 2020 were included in the primary analysis.

Results: A large number of papers were detected in the primary analysis (n=245), but only 15 remained after the inclusion/exclusion criteria were applied. Maslach Inventory for Burnout is the most extensively used instrument for screening, but its validity is questioned, and new instruments have been created, but less frequently applied. Cognitive behavioral therapy led to improvement of the emotional exhaustion in multiple trials. Meditation techniques, music therapy, structured physical exercises, and management-related interventions have been associated with low to moderate degree of success.

Conclusions: Burn-out syndrome is a still insufficiently explored diagnosis and more good-quality epidemiological and clinical trials are needed in order to support adequate prevention and treatment strategies.

Keywords: burn-out; COVID-19; first line responders; healthcare practitioners

EPP0302

Online group psychotherapy for patients with binge eating disorder during COVID-19 emergency

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doi: 10.1192/j.eurpsy.2021.703

Introduction: On March 13th 2020, in execution of the Law Decree 14/2020 regarding the reorganization of National Health Care related to COVID-19 emergency, all non-urgent outpatient healthcare services were suspended in Italy. The present work describes remote support and online group psychotherapy set in motion during COVID-19 emergency for outpatients with Binge Eating Disorder.

Objectives: Aim of the present work is to describe and evaluate online support and group psychotherapy for outpatients with Binge Eating Disorder during lockdown due to COVID-19 emergency. Outcomes were evaluated by remote administration of questionnaires.

Methods: 20 outpatients with Binge Eating Disorder, treated by psychotherapists of Hospital Psychology Unit in Psychiatry Day

Hospital of an Italian General Hospital, received remote support by phone calls and online group psychotherapy from march to may 2020. During the first two weeks, patients were supported via phone calls. From the third week on, they took part to online group psychotherapy sessions, held every week at the same day and time. Pre-post remote administration of Clinical Outcomes in Routine Evaluation-Outcome Measure (CORE-OM) and the Questionnaire of Eating Behaviours (Scheda dei Comportamenti Alimentari, SCA) was used to evaluate outcomes. Data were analyzed by Student's t-test.

Results: No significant difference was found, thus indicating stability of symptomatology.

Conclusions: Lockdown was a highly stressful period, in which many people lost control on eating behaviours and those with Binge Eating Disorder were expected to have an exacerbation of symptoms. Remote support and online group psychotherapy proved effective in protecting patients from a possible aggravation of their condition.

Keywords: binge eating disorder; online group psychotherapy; COVID-19 emergency; online psychotherapy

EPP0303

Impacts of social distancing during the covid19 pandemic on the development of children with autism in Brazil

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doi: 10.1192/j.eurpsy.2021.704

Introduction: COVID-19 is a respiratory disease and its main symptoms are fever, dry cough and difficulty breathing. It spread to several countries, which led the World Health Organization to decree, on March 11, 2020, a pandemic state that deeply affected Brazil. Due to the impossibility of leaving the house, the routine of children with autism was changed. Children in Autism Spectrum Disorder (ASD) have a qualitative deficit in social interaction. Clinical and daily observations reinforce several scientific studies that defend the importance of maintaining a routine as stable as possible for people with ASD, without this stability they may become emotionally disorganized, feel discomfort or even irritability.

Objectives: Investigate the impact caused by social distancing on the development of children and adolescents with autism.

Methods: An online questionnaire based on the DIR/Floortime basic map of emotional functional capacity development was distributed in Brazil from April to May, 2020. The results were analyzed using SPSS software.

Results: Results obtained from 122 questionnaires showed that after 30 days of quarantine 20% of children no longer had the characteristic of being able to remain calm and organized for at least 2 minutes; 11% no longer initiates interactions with their parents; 27% demonstrated more protests and anger than before the social distancing; 18% demonstrated more emotions such as anger, fear and intimacy, 28% began to understand their limits and 12% of the children are using greater facial expression during the social distancing.

Conclusions: This study brings results that can help to understand the processes in a child with autism.

Keywords: autism; Development; social distancing; COVID19

EPP0304

An intensive neurofeedback alpha-training to improve sleep quality and stress modulation in health-care workers during the COVID-19 pandemic: A pilot study.

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doi: 10.1192/j.eurpsy.2021.705

Introduction: During the COVID-19 pandemic, health workers represented a group particularly vulnerable to work-related stress, but prevention and management of psychiatric symptoms are still under evaluation. Neurofeedback is a safe and non-invasive neuromodulation technique with the target of training participants in the self-regulation of neural substrates underlying specific psychiatric disorders. Protocols based on the increase of alpha frequencies, associated with the process of relaxation, are used for the treatment of stress, anxiety and sleep disturbances.

Objectives: The aim of the present study was to assess the effectiveness of an alpha-increase NF protocol for the treatment of stress in healthcare workers exposed to the COVID-19 pandemic.

Methods: Eighteen medical doctors belonging to the Sacco Hospital were recruited during the COVID-19 health emergency and underwent a 10 sessions NF alpha-increase protocol during two consecutive weeks. The level of stress was assessed at the beginning (T0) and at the end (T1) of the protocol through the following questionnaires: Severity of Acute Symptoms Stress (SASS), Copenhagen Burnout Inventory (CBI), Pittsburgh Sleep Quality Index (PSQI), Brief-COPE. Statistical analyses were performed with Paired Samples t-Test for continuous variables, setting significance at $p < 0.05$.

Results: A significant increase in alpha waves mean values between T0 and T1 was observed. In addition, a significant reduction in the PSQI test score between T0 and T1 was observed.

Conclusions: Alpha-increase protocol showed promising results in terms of stress modulation, sleep quality improvement and safety profile in a pilot sample of health-care workers. Larger controlled studies are warranted to confirm present results.

Keywords: sleepquality; Neurofeedback; stress; COVID-19

EPP0305

COVID-19 unit in psychiatric hospital

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doi: 10.1192/j.eurpsy.2021.706

Introduction: As coronavirus pandemic burst in Spain in March 2020, Zamudio Hospital -a monographic psychiatric institution-

was urged to create an specific Covid unit. It was destined to patients with psychiatric admission criteria, who in addition oscillated between positive asymptomatics or with mild symptoms to suspect cases or close contacts.

Objectives: To describe and analyse the characteristics of the unit and the patients who were admitted during the confinement period by Covid-19, between March 14th and June 21st 2020.

Methods: The patients' data were collected retrospectively. These data included: age; sex; admission criteria; diagnosis at discharge; confirmed/ suspected/contact case; presence/absence of symptoms; length of hospital stay; number of doctor on call assessment.

Results: An area within the hospital wards was reserved to COVID cases / suspected / contact patients requiring psychiatric care. The storing of material and PPE was held in the forementioned area, according to protocolary measures. 26 Patients (11 women and 15 men) were admitted to the unit. Mean age was 44 years old. Diagnosis at discharge were mainly Schizophrenia (31%), Schizoaffective disorder (23%), other psychosis (11,5%) and Bipolar disorder (8%). The mean hospital stay was 5 days. There were a total of 7 confirmed positive cases, all with asymptomatic-mild course.

Conclusions: The establishment of this unit has ensured a proper psychiatric care and a strict control of Covid-19 transmission within patients and staff members.

Keywords: Covid; Psychiatric hospital; integral care; psychosis

EPP0306

Difficulties in maintaining electroconvulsive treatment (ECT) in a psychiatric hospital during covid19 pandemic

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doi: 10.1192/j.eurpsy.2021.707

Introduction: ECT is an effective care with high level of recommendation. During the COVID19, new recommendations to protect patients and caregivers combined with the increasing use of medicines and medical devices (MD) for anesthesia, caused greater difficulties of supply. Even if vital for patients, it is challenging to maintain ECT in this environment.

Objectives: The aim of this study is to resume the measures implemented in order to maintain ECT during COVID19.

Methods: Retrospective analysis of measures implemented to maintain the ECT during COVID19.

Results: As FFP2 masks were restricted to intensive care units, our hospital were not supplied. After negotiations, the regional health agency (ARS) has granted us an allocation of 100 masks to maintain ECT. Our efficient stock management of personal protective equipment as well as our transparency on these stocks with ARS and sharing with other hospitals out of stock played a role in this agreement. We had to adapt our MDs references according to breaks of many ones and new recommendations. The university hospital helping us in supplying certain missing references. Considering the difficulties in supplying drugs and MDs, and limited availability of anesthetists, we have reduced the number of ECT. Prioritization of patients with vital indications had to be achieved.