S102 Oral Communication

Conclusions: SOUL Programme is a highly effective and cost-efficient intervention model for treatment of schizophrenia in a developing country setting. Our 10 year follow up study confirms the feasibility of this intervention model through close working with families of our patients.

Disclosure: No significant relationships.

Keywords: Charitable; Developing Country; Outreach service; schizophrénia

O0101

Descriptive study on the working conditions of residents of psychiatry in Madrid: working hours and 24-hour on call shifts.

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Introduction: Resident physician's working conditions are linked to poor health outcomes of professionals and patient's safety. Previous studies suggest that residents in Spain have difficulties enjoying mandatory rest after on-call shifts.

Objectives: This study aims at describing the working conditions: working hours and the absence of mandatory rest periods after a 24h on-call shift in residents of psychiatry in the region of Madrid.

Methods: A descriptive observational cross-sectional study was carried out through an anonymous survey adapted from the available literature. **Results:** Up to 24,1% of the surveyed residents could not enjoy mandatory resting periods after a 24 hour on-call shift and the mandatory weekly rest of at least 36 hours was not done in up to 17% of the cases with statistical significance (p < 0.05). The average number of 24 hours on call shifts residents had to work per month was 5, which exceeds the maximum weekly hours allowed by law. **Conclusions:** The findings reveal a violation of resident physician labor rights in relation to resting times after on-call shifts, weekly breaks and working hours. These phenomena pose a significant threat to resident physician's health and patient safety.

Disclosure: No significant relationships. **Keywords:** on call; resident physician; rest

O0102

The Success of Headucate: The Student-Led Mental Health Society

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Introduction: Headucate: University of East Anglia, a university student-led society, was founded almost 10 years ago by medical

students to promote mental health education and raise awareness and funds for mental health causes.

Objectives: Headucate aims to spread mental health awareness and reduce stigma by working with schools, universities, other societies and charities internationally.

Methods: Headucate delivers workshops for children aged 4-18 in primary and secondary schools, community and youth groups and university students. These sessions were delivered in-person pre-COVID and online as interactive webinars since 2020, to spark discussion around mental health, and provide information about the variety of supports available for young people.

Results: In the past decade, Headucate UEA has grown to become one of UEA's largest student-led groups boasting over 175 members in 2020-2021 from all courses. Within the online world, Headucate's events have reached worldwide. The initiative has received national recognition, won national student awards and has expanded to set up three further Headucate branches nationwide. Outreach has accelerated and the school workshops reached over 1,000 students in the past year.

Conclusions: Headucate has grown from strength to strength and has plans to continue to develop, with passionate student drivers behind the project. Expansion of the project could include a national mental health university directory, bringing together like-minded mental health advocate students around the country and creating new Headucate branches across the country. To further develop, Headucate could expand outreach to the elderly community as discussed by previous committee.

Disclosure: No significant relationships. **Keywords:** Schools; Headucate; mental health; Children

Perinatal Mental Health

O0104

The role of subclinical depressive symptomatology during the prenatal period in cortisol rhythm alterations and postpartum depression risk

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Introduction: Cortisol, the hormonal endpoint of Hypothalamic Pituitary Adrenal (HPA) axis, coordinates the body response in front of daily stressful situations. Disturbances in cortisol circadian rhythm have been implicated in the pathophysiology of depression and neurodevelopment lasting consequences. Although pregnancy entails a progressively increase in cortisol levels, the consequences of subclinical depression traits during pregnancy in cortisol circadian rhythm remains unclear.

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European Psychiatry S103

Objectives: To analyze the impact of prenatal subclinical depressive symptomatology in cortisol circadian rhythm through pregnancy and its relevance for postpartum depression risk.

Methods: A cohort of 112 healthy pregnant women (Mean age \pm SD = 32.32 \pm 4.37) of the general population was followed throughout their first pregnancy and first two months of postpartum period. Diurnal salivary cortisol curve (four measures) was obtained for every trimester; the Area Under the Curve with respect to the ground (AUCg) and with respect to the increase (AUCi) were used as measures of basal HPA axis functioning. Depressive symptomatology was assessed every pregnancy trimester and postpartum period following EPDS criteria. All the analyses were adjusted for maternal age, weight, ethnicity and socioeconomic status and sample collection's time.

Results: Prenatal subclinical depressive symptomatology (EPDS>10) was associated with a blunted cortisol rhythm during first trimester (F= 3.913,p=.011) but not during second (F=2.629, p=056) or third trimesters (F=.411,p=.724). Furthermore, a logistic regression model showed a positive association between Prenatal subclinical depressive symptomatology and the risk of postpartum depression (χ^2 =13.8, p<.001,OR=9.6; 95%CI 2.5-35.5).

Conclusions: Women with subclinical depressive symptomatology in early pregnancy had alterations in cortisol circadian rhythmicity and a higher risk of postpartum depression.

Disclosure: No significant relationships.

O0105

The impact of maternal SARS-COV-2 infection in early stages of newborn neurodevelopment: preliminary results in a multicenter Spanish study

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Introduction: The consequences for the COVID-19 pandemic in the newborns of affected mothers remains unknown. Previous clinical experiences with other infections during pregnancy lead to considered pregnant women and their offspring especially vulnerable for SARS-COV-2. That is, the underlying physiopathological changes caused by the infection (e.g. storm of cytokines, micro-coagulation in placenta or vertical transmission) could clearly compromise fetal neurodevelopment.

Objectives: To analyze the impact of maternal SARS-COV-2 infection during pregnancy in early neurodevelopment of infants gestated during the COVID-19 pandemic period compared to those gestated immediately prior (2017-2021).

Methods: 212 pregnant women (14% infected) were followed throughout their pregnancy and postpartum, including newborn development. SARS-COV-2 infection was serologically confirmed during pregnancy. The Brazelton Neonatal Assessment Scale (NBAS) was administered at 6 weeks old by a trained neonatologist to evaluate neurological, social and behavioral aspects of newborn's functioning. Differences in NBAS scores between cases and controls were tested by ANOVAs. All the analysis were adjusted for maternal age, sociodemographic status, anxious-depressive symptomatology, infant's sex and gestational age at birth and NBAS, and for the period of gestation (previous or during COVID-19 pandemic).

Results: NBAS social interactive dimension was significantly decreased in those infants exposed to prenatal SARS-COV-2 (F= 4.248, p=.043), particularly when the infection occurred before the week 20 of gestation. Gestation during COVID-19 pandemic did not alter NBAS subscales.

Conclusions: SARS-COV-2 infection during pregnancy seems to be associated with lower NBAS scores on social dimension in 6 weeks old exposed newborns.

Disclosure: No significant relationships.

Keywords: Newborn Development; Pregnancy Infection;

COVID19; NBAS

O0106

The impact of the Covid-19 pandemic on peripartum affective psychopathology

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Introduction: Despite COVID-19 pandemic significantly impacting mental health, few studies evaluated effects on perinatal mental health. **Objectives:** Therefore, we aimed at assessing pregnant and puerperal women during first and second COVID-19 waves.

Methods: 70 women (41 pregnant and 29 puerperal) consecutively afferent to our outpatient service for Perinatal Mental Health (March 2020-March 2021) were administered Edinburgh Postnatal Depression Scale (EPDS), Fear of COVID-19 (FCV-19-S), Coronavirus Anxiety Scale (CAS) and Wijma Delivery Expectancy/Experience questionnaire (WDEQ).

Results: Women who reported last menstruation date (LMD) in 2019 second semester showed higher EPDS scores (p=0.026), those with estimated delivery date (EDD) in 2021 second semester showed higher CAS scores than those with EDD in 2020 first semester (p=0.020) or in 2021 first semester (p<0.001). Women with clinically significant EPDS Scores reported higher FCV-S-19 (p=0.005) and CAS (p=0.003). Subjects with a previous psychiatric hospitalization showed higher FCV-S-19 (p=0.003). A weak positive correlation (r=0,290; R2=0,084; p=0.015) has been observed between FCV-S-19 and EPDS. Furthermore, there was a strong positive correlation (r=0,377; R2=0,142; P=0.001) between CAS and EPDS and between CAS and FCV-S-19 (r=0,641; R2=0.410; p<0.001). All subjects showed high scores for tocophobia after experiencing delivery.

Conclusions: COVID-19 pandemic significantly impacted pregnant and/or postpartum women also without a previous psychiatric