

Introduction: Young people, regarded as less susceptible to the virus, may differently perceive the situation associated with the COVID-19 outbreak.

Objectives: To determine the differences in perception of COVID-19 and preventive actions taken against it by domestic and international university students under the spreading threat of COVID-19 illness.

Methods: During the outbreak of COVID-19, 224 domestic and 312 international students of Russian universities responded via on-line to the self-constructed Attitude towards COVID-19 Questionnaire.

Results: The showings of the international students were surely higher than those of domestic students in seriousness of their evaluation of the COVID-19-related situation in the world ($p=.0006$), in the country ($p=.0096$), and in the region ($p=.0390$); in the evaluation of the virus-related risks for aged and chronic patients ($p=.0075$), in adequacy of measures taken by the government against COVID-19 ($p=.0114$), in degree of disturbing their customary way of life ($p=.0363$), and ruining their plans for the future ($p=.0161$). The international students, who live mostly not at their homes and have a higher stress level ($p=.0227$), showed higher interest to COVID-19-related news ($p=.0001$), they were stricter in taking preventive measures: in wearing a mask, washing hands, keeping the distance in order to reduce the risk of the virus infection ($p=.0009$).

Conclusions: During the COVID-19 outbreak, both the international and domestic students are calm in perceiving the threat to their health and life. At the same time, with a higher stress level, the international students are more watchful concerning the situation of COVID-19 spread, and they more strictly obey the restrictive measures.

Keywords: perception; prevention; COVID-19; students

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Successful treatment of primary delusional parasitosis with paroxetine: A case report and narrative review

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Introduction: Antipsychotics have been classically considered the treatment of choice for delusional disorder (DD) and antidepressant medications have been restricted to patients with comorbid depression.

Objectives: Our aim is to describe the case of a patient with DD with delusions of parasitosis, who responded to paroxetine as monotherapy. We also aimed to review the recent literature on the potential use of antidepressants as the main treatment for somatic type DD.

Methods: After the case report, we present a narrative review on the use of antidepressants in DD, somatic type (DSM-criteria) by using PubMed database from inception until 2020.

Results: Case: 74 year-old woman without previous psychiatric diagnosis who suffered from long-term cutaneous and vulvar pruritus. She was referred to psychiatry from dermatology to assess thought content and sensorceptive disturbances. In the past, she had received unsuccessful treatment with antihistamines. The patient brought a collection of “the identified parasite” (matchbox sign) to our first appointment. On assessment, she was diagnosed with DD with delusions of parasitosis. Risperidone 1mg/day was poorly tolerated (excessive sedation). She refused further antipsychotic treatment, so we started paroxetine up to 20mg/day. The patient went into total remission of her pruritus and delusions of parasitosis. Review. In line with our case, 6 studies reported on the successful use of antidepressants as monotherapy for DD, somatic type. Most of studies report the successful use of an antipsychotic/antidepressant combination (case-series, case reports).

Conclusions: Although antipsychotics are the treatment of choice, antidepressant medications may be an effective alternative in somatic type DD when patients refuse antipsychotics.

Keywords: Delusional parasitosis; Antidepressants; psychosis; Antipsychotics

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Stendhal syndrome: Can art make you ill?

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Introduction: A psychosomatic disorder, Stendhal Syndrome, causes tachycardia, dizziness, sweating, disorientation, fainting, and confusion when someone is looking at artwork with which he or she connects deeply emotionally. In 1817, a French author named Marie-Henri Beyle, whose pseudonym was Stendhal, described his experience visiting the Basilica of Santa Croce in Florence and feeling overwhelmed by all the beauty and rich history surrounding him. Over a century later, visitors to Florence continued to suffer from similar symptoms. In 1979, Dr. Graziella Magherini, Chief of Psychiatry at the Hospital of Santa Maria Nuova in Florence, observed more than 100 tourists who were hospitalized after looking at art in Florence and coined the term Stendhal Syndrome.

Objectives: To review literature on Stendhal syndrome, a bizarre travel-related syndrome.

Methods: PubMed and Google Scholar search using the keywords Stendhal syndrome, travel syndromes, culture shock

Results: Victims are typically impressionable, single people between 26-40 years old, who are stressed by travel and may be struggling with jet lag. For art lovers, the thrill of arriving somewhere like Florence that gathers so much famous art is like meeting all your heroes at once. This strange aesthetic sickness is surely evidence of the special power of Renaissance art.

Conclusions: Stendhal Syndrome does not currently appear in the DSM-5 (Diagnostic and Statistical Manual of Mental Disorders). Psychiatrists have however, documented the syndrome in medical journals and advise that tourists pace themselves in art museums and get enough rest in between viewings of Italy's breathtaking, powerful masterpieces.

Keywords: Stendhal syndrome; travel syndromes; culture shock