

## EPP0338

**Rapid review of decision-making for place of care and death in older people: Lessons for COVID-19**

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**Introduction:** The coronavirus pandemic (COVID-19) has affected the functioning and capacity of healthcare systems worldwide. COVID-19 has also disproportionately affected older adults, including those living with dementia. In the context of COVID-19, decision-making surrounding place of care and place of death in this population involves significant new challenges.

**Objectives:** To explore key factors that influence place of care and place of death decisions in older adults. A secondary aim was to investigate key factors that influence the process and outcome of these decisions in older adults. To apply findings from current evidence to the context of COVID-19.

**Methods:** Rapid review of reviews, undertaken using WHO guidance for rapid reviews. Ten papers were included for full data extraction. These papers were published between 2005-2020. Data extracted was synthesised using narrative synthesis, with thematic analysis and tabulation.

**Results:** Papers included discussed actual place of death, as well as preferred. Results were divided into papers that explored the process of decision-making, and those that explored decision-making outcomes. Factors such as caregiver capacity, the availability of multidisciplinary teams, cultural appropriateness of care packages and advanced care planning were found to be key.

**Conclusions:** The process and outcomes of decision-making for older people are affected by many factors – all of which have the potential to influence both patients and caregivers experience of illness and dying. Within the context of COVID-19, such decisions may have to be made rapidly and be reflexive to changing needs of systems and of families and patients.

**Keywords:** Decision-making; COVID-19; Place of Care / Place of Death; Advance Care Planning

## EPP0339

**Impact of the COVID-19 pandemic on maternal mental health**

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**Introduction:** As countries adopt strict quarantines and lockdowns, increasing attention has been given to the impact on mental

wellbeing. The influence of this on perinatal mental health and service provision is important to consider, as these women may be particularly vulnerable to the negative effects already seen in general and psychiatric populations.

**Objectives:** The impact on global mental health of Covid-19, and the isolation measures used to combat its spread, is increasingly acknowledged. We were interested in the effect the pandemic has had specifically on the mental health of women in the peripartum period. By reflecting on our experiences, we hope to generate ideas to improve services.

**Methods:** We considered the effects of the pandemic in this high-risk population during each stage of contact with services. This included pre-conception, antenatal and postnatal periods, as well as the potential longitudinal and service effects. Recent case examples were identified and described from our busy and diverse South London perinatal psychiatry service.

**Results:** Recent referrals to our service suggest the current crisis has been a key trigger for the deterioration of many women's mental health. This includes women who have been impacted by various factors related to the pandemic, at all stages of the perinatal period.

**Conclusions:** It is vital to maintain equality of access to perinatal services and to continue to consider how to deliver best care. This will involve adapting to the new working environment, and optimising care delivery using remote technologies where appropriate, in a way that is safe, accessible and acceptable to service users.

**Keywords:** Perinatal Psychiatry; Covid-19; Maternal Mental Health; Coronavirus

## EPP0340

**Delirium in COVID-19: psychopharmacology considerations**

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**Introduction:** Delirium is characterized by fluctuating disturbance of consciousness, inattention, reduced awareness, hallucinations or delusions, occurring in 20% of hospital admissions. Central nervous system symptoms are the main form of neurologic injury in patients with COVID-19 and a significant portion of these patients presents with delirium. COVID-19 infection's course and symptoms, as well as patient comorbidities can facilitate its onset, which is exacerbated by the frequent need for higher doses of sedation to suppress severe cough.

**Objectives:** To summarize the most recent practices for management of delirium in COVID-19 infected patients, with emphasis on the psychopharmacology approach.

**Methods:** Selective literature review via PubMed search, using the terms "delirium, neurological disorders, psychopharmacology and COVID-19".

**Results:** COVID-19 associated delirium can be presented in its hyperactive type with exuberant agitation, but also with additional clinical features such as rigidity, akinetic mutism, abulia and alogia. Psychopharmacological approaches may be needed for patients with agitation when there's intractable stress or risk to self or others. In this group of patients, melatonin, alfa-2 agonists and low potency antipsychotics have been used as first line treatment. Trazodone, valproate, dopamine