

Objectives: To examine the psychometric properties of Russian translations of the COVID-Anxiety Scale and the Fear of Coronavirus-19 Scale.

Methods: In order to examine the psychometric properties of Russian translations of the COVID-Anxiety Scale and the Fear of Coronavirus-19 Scale, a total of 341 Russian adults completed both measures.

Results: First, a high level of COVID-19 anxiety was found in the sample. Second, confirmatory factor analysis demonstrated that the Russian translations of both the COVID-Anxiety Scale and the Fear of Coronavirus-19 Scale had satisfactory psychometric properties, with both scales having a hypothesised one-factor structure. Third, a significant positive association was found between both the COVID anxiety scales. Fourth, higher COVID anxiety scores were associated with being female, and being older.

Conclusions: These findings provide initial evidence for the satisfactory properties of the Russian translations of the COVID-Anxiety Scale and the Fear of Coronavirus-19 Scale. Further research is suggested that examines the prevalence and psychological correlates of COVID-19 anxiety.

Keywords: COVID-19; Anxiety; Russian; translation

EPP1150

Validation of the “short health anxiety inventory” on a sample of school-age children (russian-language version)

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Introduction: Modern Russian health psychology does not have the necessary tools for studying health anxiety in children, and therefore it is necessary to identify methods aimed at assessing the presence/absence and severity of children’s health anxiety.

Objectives: To validate the “Short Health Anxiety Inventory” to a sample of school-age children who do not have serious physical disabilities.

Methods: The sample: 193 respondents (average age-12.5; 117-girls). We used: “Short Health Anxiety Inventory” (SHAI; Salkovskis et al., 2002), Children CPQ (Factor C), “Attitude toward Health” questionnaire (Berezovskaya, 2005) (emotional scale), STAI (Spielberger, 2002), EPI (Eysenck, 1963) (neuroticism scale).

Results: Correlation analysis suggests that “health anxiety” is a separate construct. The discriminativeness criterion shows that each individual statement, as well as the whole inventory, is aimed at measuring the same construct. The retest reliability assessment (4 weeks later) shows the results: the “Health Anxiety” scale - 0.892 ($p \leq 0.01$), the “Alertness to bodily sensations” scale - 0.889 ($p \leq 0.01$), the “Fear of negative consequences” scale - 0.815 ($p \leq 0.01$). Correlations between the scales shows the values: 0.943 ($p \leq 0.01$) - for the general scale, 0.392 ($p \leq 0.01$) - for the “Alertness to bodily sensations” scale, 0.675 ($p \leq 0.01$) - for the “Fear of negative consequences” scale. The original three-component structure of the questionnaire is

confirmed. The Russian version of the inventory showed internal consistency (alfa-Cronbach’s coefficient - 0.835), retest reliability, discriminativeness, external and constructive validity.

Conclusions: The results indicate that the SHAI can be used to study health anxiety in children due to its psychometric characteristics, simplicity and ease of use.

Keywords: Short Health Anxiety Inventory; Health anxiety in children; Inventory validation

EPP1152

Drug utilization of paliperidone in adolescent schizophrenia patients: A retrospective cohort study in China

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Introduction: In China, the indications of paliperidone extended in schizophrenia adolescents (12-17 years) was approved by National Medical Products Administration (NMPA) in 2017. But, the utilization of paliperidone in this group needs to be further investigated.

Objectives: To assess paliperidone utilization in schizophrenia adolescents.

Methods: The study employed the electronic medical records (EMRs) database from a psychiatry specialized hospital (PH) and a general hospital (GH), respectively. General information, including birth date, gender, visit date, diagnosis (inpatient and outpatient) with ICD-10 coding, drug characterize, prescription date and dosage, was de-identified and standardized for analysis. Schizophrenia adolescents (ICD-10: F20.x) received at least one prescription of paliperidone between 2018 and 2019 were included in this study. Index date was defined as the date of first identified paliperidone prescription. The patients were followed up until the end of 2019 with the last record, or upon reaching 18 years. The database was analyzed based on days of supply, administration frequency, and daily dose.

Results: Overall, 112 and 117 eligible patients were included in the present study from PH and GH, respectively. The median drug supply was 179.0 days and 44.0 days, respectively, during which median number of prescriptions patients received was 6.0 and 3.0. Paliperidone was mostly initiated alone (57.1% and 88.9%) with frequency of once daily (97.3% and 88.9%), and the median of average daily dose during follow-up was 5.7 mg/day and 6.0 mg/day, respectively.

Conclusions: The duration of paliperidone usage was very different in two hospitals, but the dosages in both hospitals were generally agreed with prescribing information.

Keywords: Drug Utilization; paliperidone; schizophrénia; adolescent

EPP1153

Thirteen year follow up of long term treated psychotic disorder: Personality aspects

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Introduction: Psychotic disorders often cause a drastic change in the life situation of the affected individual. Personality is an aspect that can affect the symptoms and social function in psychotic disorders.

Objectives: No study has examined stability of personality traits exceeding five years in patients with schizophrenia. The aim of this study was to investigate the stability of personality traits over a 13-year period among patients with psychotic disorder and healthy individuals and to evaluate case-control differences.

Methods: At three occasions during a 13-year period patients with psychotic disorders (n=28) and non-psychotic individuals (n=57) completed Swedish universities Scales of Personality (SSP). For all the individuals within- and between-subject analyses were performed at three occasions for all 13 subscales and the three overall factors of SSP. Correlations, means and SDs were calculated.

Results: Tests of within-subject correlations showed differences in two subscales: Lack of Assertiveness, which were influenced by age and Physical Trait Aggression, where patients ratings were stable, whereas controls rated themselves less aggressive at higher age. Between-subjects correlations showed differences regarding any of the parameters diagnosis, time, age, gender or age x gender in nine of the 13 subscales as well as in factor Neuroticism.

Conclusions: Long term follow-up showed a generally high stability of personality traits measured with SSP, especially among patients. Between-subject analyses over the 13 years showed that patients differed compared to controls for the SSP factor Neuroticism as well as the subscale Detachment, which is in accordance with previous studies.

Keywords: Swedish universities Scale of Personality (SSP); schizophrénia; Stability of personality traits; Personality

EPP1154

Implication of substance use in suicidal or violent behaviours in a first episode psychosis spectrum disorder population : A 45 patients retrospective study.

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Introduction: In First Episode Psychosis (FEP), Suicidal Behaviours (SB), Violent Behaviours (VB) and substance use are frequent respectively 10% to 30%, 34.5% and 50% (Pompili et al., 2011), (Tournier et al., 2013). The role of substance use in facilitating SB and VB is described (Large et al., 2011).

Objectives: We aim to evaluate the impact of substance use in FEP patients. Our hypothesis is that substance use is associated with more SB or VB before first admission.

Methods: First admission files of 45 patients diagnosed ICD10 F20 to F29 during the 2013-2018 period were retrospectively studied. SB, VB and substance use (Cannabis, alcohol and opiate/cocaine) before admission were collected. Correlation between SB and VB were tested with cannabis, alcohol, opiate/cocaine use with chi2 Pearson independence test.

Results: The frequencies of suicidal behaviours and violent behaviours were 25 % and 22.7 %. The frequencies of cannabis use, alcohol use, opiate/cocaine use were 56.1 %, 10 % and 16.3 %. A strong significant correlation was found between opiate/cocaine use and violent behaviour, $p = 0.011$ Chi2 was 6.471 DF 1. No other significant correlations were found.

Conclusions: Suicidal behaviours and violent behaviours are known to be more frequent in psychotic patients with addictive comorbidity. Our french rural hospital retrospective study confirms that violent behaviours in first admission psychotic patients are strongly associated with opiate/cocaine substance use comorbidity.

Keywords: schizophrénia; Substance use; violence; Suicide

EPP1157

Follow-up of patients with delusional disorder in a specialized outpatient clinic over a 2-year period.

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Introduction: In order to prevent relapse and increase medication adherence, primary care physicians and psychiatric inpatient units should consider referring patients with delusional disorder (DD) to specialized outpatient clinics for treatment and follow-up.

Objectives: This poster describes a sample of DD patients referred to a specialized unit for DD and documents rates of follow-up care.

Methods: Over a 2-year period, 29 individuals were consecutively referred to the Parc Taulí -Delusional Syndrome Working Group, which provides treatment and clinical care for patients with delusional disorders for a catchment area of nearly 450.000 inhabitants in Sabadell (Barcelona, Spain). Criteria for inclusion in the program are relatively flexible. Referred patients are evaluated at baseline and at 6 months following their first appointment. Treatment and case management are offered by a multidisciplinary team consisting of psychiatric, nursing, and social work personnel. Psychological interventions are also offered.

Results: Of the 29 persons initially referred, 27 attended at least one scheduled appointment. Twenty-one out of the 27 patients received a confirmed diagnosis of DD (14 women, 7 men), 2 suffered from schizophrenia and 4 were diagnosed with other psychiatric disorders and referred to other programs: primary care (n=2), affective program (n=1) and addictions unit (n=1). A breakdown of DD subtypes follows: persecutory (n=10, 47.6%), jealous (n=4, 19%), somatic (n=5, 23.81%), mixed (n=2, 9.5%). Three patients with DD (14.3%) were lost to follow-up. Attendance rates of the 21 DD patients: 80.4% (Women: 77.67%, Men: 100%).