Objectives: The aim was to evaluate the quality of sleep (QoS) and health-related quality of life (HRQoL), among health care professionals treating patients with COVID-19, as well as quantifying the magnitude of symptoms of depression and levels of anxiety.

Methods: We included 201 health care professionals in a cross-sectional, web-based study by applying 7-item Generalized Anxiety Disorder (GAD-7) Scale, Zung Self-rating Depression Scale, 36-item Health Survey of the Medical Outcomes Study Short Form (SF36), Pittsburgh Sleep Quality Index (PSQI) and additional survey constructed for the purpose of the study.

Results: Poor QoS and HRQoL correlated with high health anxiety and severe depressive symptoms and several demographic characteristics. Multiple linear regression analysis showed that higher scores on GAD-7 (beta = .71, p < .01) and lower scores on mental health (MH) subscale on SF36 questionnaire (beta = –.69; p < .01) were independent predictors of the higher PSQI score (adjusted R2 = .61, p < .01 for overall model). Higher scores on GAD-7 (beta = .68, p < .01) and worse self-perceived mental status (beta = .25; p < .05) were independent predictors of the lower SF36 scores (adjusted R2 = .73, p < .01 for overall model).

Conclusions: The major MH burden of health care professionals treating infected patients during the COVID-19 pandemic indicates that they need psychological support.

Disclosure: No significant relationships.
Keywords: Covid-19; Quality of sleep; health-related quality of life

EPP0809

Mental health service requirements after hospitalization due to COVID-19: a 1- year follow-up study

J. Andreo Jover[1,2]*, M.P. Vidal-Villegas[1,2], R. Mediavilla[1,3], I. Louzao Rojas[4], S. Cebolla Lorenzo[4], E. Fernández Jiménez[2], A. Muñoz-Sanjosé[2,4], M.F. Bravo-Ortiz[1,2,3,4], G. Martinez-Ales[3,4,5] and C. Bayón-Pérez[1,2,4]

[1]Autonomous University of Madrid, Department Of Psychiatry, Madrid, Spain; [2]Hospital La Paz Institute for Health Research (IdiPAZ), Psychiatry And Mental Health, Madrid, Spain; [3]Centro de Investigación Biomédica en Red de Salud Mental, Cibersam, Madrid, Spain; [4]La Paz University Hospital, Psychiatry, Clinical Psychology And Mental Health, Madrid, Spain and [5]Columbia University Mailman School of Public Health, Departament Of Epidemiology, Columbia, United States of America
*Corresponding author.
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Introduction: Long-term COVID-19 effects has been recently described as persistent and prolonged symptoms after an acute and severe SARS-COV-2 (1). An important concern is that the sequelae of severe COVID-19 may suppose a substantial outpatient ́s burden for the specialized services in reopening pandemic phase (2).

Objectives: To describe the frequency of mental health service use in COVID-19 hospitalized patients after discharge and to estimate the costs associated to the post- discharge consultations.

Methods: We used a 1-year follow-up cohort of 1455 COVID-19 inpatients hospitalized in La Paz University Hospital of Madrid, Spain between March 16th and April 15th, 2020. Data were retrieved from Psychiatry Service (PS) electronic health records and we described the frequency of mental health reason for consultation. We used information published by the Madrid health Office to estimate the cost of initial and following appointments.

Results: Our sample consisted of 1,455 patients admitted with a COVID-19 diagnosis between March 16th and April 15th, 2020, and then discharged. Roughly half of them were men (776, 53%), 238 (16%) had a prior history of mental health problems, and 44 (3%) died. 193 participants (13%) visited the mental health department after being discharged. The total cost was estimated in 103,581 USD, of which two-thirds corresponded to patients with prior history of mental health problems.

Conclusions: Our results indicate that the mental health burden of severe COVID-19 inpatient s after discharge was substantial during the first year of follow-up. This generate important economic impact to mental health providers and society at large.

Disclosure: No significant relationships.
Keywords: Hospitalized; 1-year Follow-up; Covid-19; psychiatry

EPP0810

Emotional state of healthcare workers in hospital red-zone during COVID-19 Pandemic

S. Kryzhanovskiy[1], M. Samushia[2]*, T. Berishvili[2], V. Shmirev[2] and N. Amosova[2]

[1]Central State Medical Academy of Department of Presidential Affairs Moscow, Russia, Scientific Department, Moscow, Russian Federation and [2]Central State Medical Academy of Department of Presidential Affairs Moscow, Russia, Scientific Department, moscow, Russian Federation
*Corresponding author.
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Introduction: The COVID-19 pandemic has a significant impact on the mental state of not only quarantined citizens and patients, but also health workers.

Objectives: The aim of the study was to assess of the mental health of doctors involved in work in the "red zone" during the COVID-19 pandemic.

Methods: 77 respondents were interviewed using the HADS questionnaires and the Maslach burnout test. For statistical data processing Microsoft Office Excel 2016, IBM SPSS were used.

Results: An increase on the depression scales was noted in 7%, anxiety in 23%, and anxiety and depression together 27%. According to the Maslach questionnaire, 32 (41.5%) doctors noted a reaction of the type of "emotional devastation". 10 (12.9%) doctors noted a reaction "reduction of professional achievements". Three doctors (3.8%) had a dehumanization reaction in the form of dull emotions to colleagues and patients.

Conclusions: Work in the "red zone" has a significant negative impact on the mental health of doctors and medical personnel

Disclosure: No significant relationships.
Keywords: healthcare; Covid-19; workers; red-zone