demonstrated its importance in preventing and reducing these negative outcomes.
**Objectives:** This study aims to assess the vaccination rate of people with mental illness in comparison with the general population.
**Methods:** We will conduct a retrospective evaluation of vaccine uptake in a sample of patients admitted to a psychiatric hospital between the 1st of July of 2021 and the 30th of June of 2022 in the Porto region. According to their vaccination plan, all patients were offered the possibility vaccination. Statistical analysis will be performed to analyse the data.
**Results:** We expect to assess over 1500 patients. Regarding other studies on the same subject, although in different countries, we may predict that the vaccination rate in our sample will not, statistically, differ from the general population.
**Conclusions:** Some studies have shown higher resistance and hesitancy towards the COVID-19 vaccination in mental health patients, however others did not find differences between these patients and the general population. Therefore, this study will allow us to better understand the impact of mental illness in the vaccination rate in our population.

**Disclosure of Interest:** None Declared

## EPV0306

## Psychological distress in Portuguese university students during COVID-19 pandemic: relationship with stress, sleeping and emotion regulation strategies

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**Introduction:** During the COVID-19 pandemic outbreak, psychological distress, anxiety and depression reached new highs associated with a number of variables such as pandemic related-stress and sleep difficulties. These later two are known to be the precipitant and risk factors for psychological distress/mental disorders, respectively, and negative cognitive emotion regulation strategies can also have a key role on psychological/mental health problems generation and maintenance.
**Objectives:** To study stress, sleep difficulties and the use of cognitive emotion regulation strategies by groups of students with different levels of psychological distress during the COVID-19 pandemic.
**Methods:** 496 university students (mean age ± SD=20.99 years ± 2.27; 78.6% women) completed an online questionnaire between January and April, 2021, which included the Mental Health Inventory, the Perceived Stress Scale (PSS) and the Cognitive Emotion Regulation Questionnaire, as well as three questions from the Insomnia Scale to evaluate Difficulties in Initiating Sleep (DIS), Maintaining Sleep (DMS) and Early Morning Awakening (EMA). A Sleep Difficulties Index (SDI) was calculated by summing the scores of these three items.
**Results:** 18.3% of the students showed high levels of psychological distress (group 1; scores 1 SD =/< Mean), 62.7% average levels (group 2), and 19% low levels (group 3; Scores 1SD =/>Mean). The group 1, compared with group 3, showed higher levels of sleeping difficulties (DIS, DMS, EMA and SDI), greater stress levels and an increased use of negative emotion regulation strategies, as well as a lesser use of positive emotion regulation strategies. Furthermore, the group 2, with average levels of psychological distress is significantly distinct from the group with better mental health when comparing these same variables.
**Conclusions:** Almost one fifth of the Portuguese university students report elevated levels of psychological distress during the COVID-19 pandemic. Clinical interventions to promote psychological/mental health in this population should focus on reducing stress, promoting adequate sleep habits, reducing the use of negative cognitive emotion regulation strategies and increasing the use of positive ones.

**Disclosure of Interest:** None Declared

## EPV0307

## Perinatal depressive symptoms in Portuguese new fathers and mothers during COVID-19 pandemic

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**Introduction:** Postpartum depression, refers to depressive symptoms within a 12-month period after the birth of an infant in a new father or mother. It's have been a growing mental health concern, as it is one of the leading causes of poor familial and infant health outcomes. Despite the growing attention being given to fathers' depression, including in Portugal, prevalence data and its possible correlates are still scarce compared to depression in mothers, especially during the COVID-19 pandemic.
**Objectives:** To explore and compare levels of depressive symptomatology and to analyze potential correlates for postpartum depression in Portuguese new mothers and fathers during the COVID-19 pandemic.
**Methods:** 153 men and 187 women (mean age: 36.61± 4.99 vs. 32.98 ±5.00 years, respectively) were recruited in the perinatal period (7.29±3.22 vs 8.58± 0.97 months post-partum) and answered to an online survey that included questions related to sociodemographic and psychosocial variables and validated questionnaires: Perinatal Depression Screening Scale (PDSS), Perseverative Thinking Questionnaire (for Repetitive Negative Thinking/RNT) and Dysfunctional Beliefs Towards Motherhood/Fatherhood Scale (DBTM/F). Statistical analysis was performed using IBM Statistical Package for the Social Sciences (SPSS Version 26 for Mac).
**Results:** New-mothers had significantly higher levels of depressive symptoms than new-fathers (41.89±16.94 VS. 33.95±14.99, p<.001). Based on the PDSS' cutoff point the prevalence of clinically relevant depressive symptoms in male and female progenitors was 21.6% and 39.6%, respectively (p<.001).
DBTF were significantly higher compared to DBTM (p<.05). Male and female progenitors did not differ regarding levels of RNT.
DBT-M/F (r».40) and RNT (r>.55) significantly and positively correlated with PDSS scores.

In both genders, DBT-M/F and RNT significantly (p<.01) predicted PDSS scores explaining 33.8% (Beta: DBT=.136, p=.050; RNT=.538, p<.01) of its variance in fathers and 50.4% in mothers (Beta: DBT=.218, p=.001; RNT=.565, p<.01).
**Conclusions:** During the COVID-19 pandemic, Portuguese recent mothers had higher levels of depressive symptoms when compared to recent fathers. However, in both new mothers and fathers, depressive symptoms' prevalence and severity were higher than the figures found in samples of new parents outside of the pandemic period and of samples from the general population. Addressing DBT-M/F, as well as RNT, in recent parents, could be relevant in preventing/improving their depressive symptoms.

**Disclosure of Interest:** None Declared

## EPV0308

## Development of depression in patients hospitalized for COVID-19 infection

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**Introduction:** Coronavirus pandemic (COVID-19) has caused a great psychological impact all over the world. With this research, we want to discover the incidence and associated risk factors for depressive symptoms among hospitalized patients. The objective is to investigate patients with criteria of a severe clinical picture and expressed systemic inflammatory response to SARS-CoV-2 coronavirus infection and if they develop mental disorders- depression, measured by Depression, anxiety and stress scale- DASS-21 scale. With this research, we also calculate the index of the immune-inflammatory response SII and test the hypothesis that people with higher SII will develop mental disorders more often. Demographic variables, comorbidities, COVID-19 severity criteria, and the intensity of the organism's inflammatory response have also been examined. Psychiatric questionnaires were for the first time applied directly to patients with coronavirus infection during hospitalization.
**Objectives:** To identify possible risk factors for depression and to investigate the association between disease severity and the occurrence of psychopathology among COVID-19 hospitalized patients.
**Methods:** The subjects are patients suffering from COVID-19, older than 18 years who were hospitalized in the respiratory center KB Dubrava. After an interview and informed consent, demographic data was taken and two psychological questionnaires had been applied. Variables: patient characteristics -demographic data, experience of vulnerability, information on whether they have been previously treated psychiatrically, symptoms of anxiety, depression, stress, somatic comorbidities Intensity of systemic inflammation Severity of COVID-19.
**Results:** A total of 169 patients hospitalized were analyzed. The median age of the patients was 65. There were (62.1%) men and (37.9%) women. On admission, most patients had a severe (134, 79.3%) or critical (17, 10.1%) form of COVID-19. The median Charlson comorbidity index was 3 points. Arterial hypertension was present in 101 (59.8%), diabetes mellitus 42 (24.9%), hyperlipoproteinemia 30 (17.8%), obesity 61 (36.1%), malignant disease 17 (10.1%) patients. 11 (6.5%) smoked and 7 (4.1%) patients consumed alcohol. The median CRPa was 72.75 mg /L. Median SII was 1741. During hospitalization, the median DASS21 score for depression was 14, for anxiety 8, and for stress 6. Regarding depression, it was absent in 49 (29%), mild in 27 (16%), moderate in 47 (27.8%), severe in 18 (10.7%) and extremely severe in 28 (16.6%) patients during hospitalization.
**Conclusions:** Patients with symptoms of depression during hospitalization felt statistically significantly more likely to be in danger of life due to COVID-19, had a more pronounced intensity of symptoms of COVID-19 upon admission. Additionally, patients with higher DASS 21 scores for depression were significantly more likely to be female, had COPD and required oxygen supplementation at higher flows.

**Disclosure of Interest:** None Declared

## EPV0309

## Assessing the surge capacity of hospitals in Ugandan health care systems in managing the COVID-19 pandemic

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**Introduction:** The increasing cases of COVID-19 poses a threat on the over strained health care systems, especially in developing countries. Health care systems might need a surge to accommodate the ever increasing number of COVID1-19 cases. Hence, we assessed the Ugandan healthcare systems' capacity to accommodate the surge in the increased caseloads, which might need admission and critical care due to COVID-19.
**Objectives:** Understanding the health systems capacity to accomadate the surge in increase caseload of COVID-19
**Methods:** We assumed that 2% of the Uganda population get symptomatic infections by COVID-19 based on modelled estimates of Uganda and ascertained the healthcare systems surge capacity for COVID-19 under three transmission curves scenarios; 6, 12 and 18 months. We estimated four measures for hospital surge capacity; ICU bed surge capacity, ICU bed tipping point, hospital bed capacity and hospital bed tipping point. Estimates were made for national level and 132 district local government.
**Results:** The capacity of Ugandan health care system to accommodate the increasing numbers of cases due to COVID-19 is hindered by the lack of oxygen. Only 9 in 20 (46%) of hospital beds had oxygen supply. The hospital bed surge capacity varied across districts. Under the 12 months transmission scenario, the proportion of hospital with available beds, that would accommodate COVID-19 cases varied from 4% in Karomoja district, to 84% in Kampala district. The Ugandan healthcare systems faces a critical gap in ICU