

Objectives: To analyze the impact of prenatal subclinical depressive symptomatology in cortisol circadian rhythm through pregnancy and its relevance for postpartum depression risk.

Methods: A cohort of 112 healthy pregnant women (Mean age \pm SD = 32.32 \pm 4.37) of the general population was followed throughout their first pregnancy and first two months of postpartum period. Diurnal salivary cortisol curve (four measures) was obtained for every trimester; the Area Under the Curve with respect to the ground (AUC_G) and with respect to the increase (AUC_I) were used as measures of basal HPA axis functioning. Depressive symptomatology was assessed every pregnancy trimester and postpartum period following EPDS criteria. All the analyses were adjusted for maternal age, weight, ethnicity and socioeconomic status and sample collection's time.

Results: Prenatal subclinical depressive symptomatology (EPDS>10) was associated with a blunted cortisol rhythm during first trimester (F= 3.913, p=.011) but not during second (F=2.629, p=056) or third trimesters (F=.411, p=.724). Furthermore, a logistic regression model showed a positive association between Prenatal subclinical depressive symptomatology and the risk of postpartum depression ($\chi^2=13.8$, p<.001, OR=9.6; 95%CI 2.5–35.5).

Conclusions: Women with subclinical depressive symptomatology in early pregnancy had alterations in cortisol circadian rhythmicity and a higher risk of postpartum depression.

Disclosure: No significant relationships.

O0105

The impact of maternal SARS-COV-2 infection in early stages of newborn neurodevelopment: preliminary results in a multicenter Spanish study

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Introduction: The consequences for the COVID-19 pandemic in the newborns of affected mothers remains unknown. Previous clinical experiences with other infections during pregnancy lead to considered pregnant women and their offspring especially vulnerable for SARS-COV-2. That is, the underlying physiopathological changes caused by the infection (e.g. storm of cytokines, micro-coagulation in placenta or vertical transmission) could clearly compromise fetal neurodevelopment.

Objectives: To analyze the impact of maternal SARS-COV-2 infection during pregnancy in early neurodevelopment of infants gestated during the COVID-19 pandemic period compared to those gestated immediately prior (2017-2021).

Methods: 212 pregnant women (14% infected) were followed throughout their pregnancy and postpartum, including newborn development. SARS-COV-2 infection was serologically confirmed during pregnancy. The Brazelton Neonatal Assessment Scale (NBAS) was administered at 6 weeks old by a trained neonatologist to evaluate neurological, social and behavioral aspects of newborn's functioning. Differences in NBAS scores between cases and controls were tested by ANOVAs. All the analysis were adjusted for maternal age, sociodemographic status, anxious-depressive symptomatology, infant's sex and gestational age at birth and NBAS, and for the period of gestation (previous or during COVID-19 pandemic).

Results: NBAS social interactive dimension was significantly decreased in those infants exposed to prenatal SARS-COV-2 (F= 4.248, p=.043), particularly when the infection occurred before the week 20 of gestation. Gestation during COVID-19 pandemic did not alter NBAS subscales.

Conclusions: SARS-COV-2 infection during pregnancy seems to be associated with lower NBAS scores on social dimension in 6 weeks old exposed newborns.

Disclosure: No significant relationships.

Keywords: Newborn Development; Pregnancy Infection; COVID19; NBAS

O0106

The impact of the Covid-19 pandemic on peripartum affective psychopathology

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Introduction: Despite COVID-19 pandemic significantly impacting mental health, few studies evaluated effects on perinatal mental health.

Objectives: Therefore, we aimed at assessing pregnant and puerperal women during first and second COVID-19 waves.

Methods: 70 women (41 pregnant and 29 puerperal) consecutively afferent to our outpatient service for Perinatal Mental Health (March 2020-March 2021) were administered Edinburgh Postnatal Depression Scale (EPDS), Fear of COVID-19 (FCV-19-S), Coronavirus Anxiety Scale (CAS) and Wijma Delivery Expectancy/Experience questionnaire (WDEQ).

Results: Women who reported last menstruation date (LMD) in 2019 second semester showed higher EPDS scores (p=0.026), those with estimated delivery date (EDD) in 2021 second semester showed higher CAS scores than those with EDD in 2020 first semester (p=0.020) or in 2021 first semester (p<0.001). Women with clinically significant EPDS Scores reported higher FCV-S-19 (p=0.005) and CAS (p=0.003). Subjects with a previous psychiatric hospitalization showed higher FCV-S-19 (p=0.003). A weak positive correlation (r=0.290; R²=0.084; p=0.015) has been observed between FCV-S-19 and EPDS. Furthermore, there was a strong positive correlation (r=0.377; R²=0.142; P=0.001) between CAS and EPDS and between CAS and FCV-S-19 (r=0.641; R²=0.410; p<0.001). All subjects showed high scores for tocophobia after experiencing delivery.

Conclusions: COVID-19 pandemic significantly impacted pregnant and/or postpartum women also without a previous psychiatric