

Screening for somatoform symptoms (Rief, Hiller, 2003) and Illness Perception Questionnaire - Revised (Moss-Morris et al., 2002).

**Results:** 2 (Groups)  $\times$  2 (Time: Before / After) ANOVA with repeated measures revealed major effect of time with both groups demonstrated equal decrease in somatoform symptoms during treatment ( $F=101.42$ ,  $p<.01$ ,  $\eta^2=.52$ ). Patients from both groups after treatment appraised their illnesses as having shorter duration without cycles, less severe consequences on their lives, reported increase in treatment control, understanding of their illness and decrease in emotional reactions ( $F=7.13-30.62$ ,  $p<.01$ ,  $\eta^2=.07-.24$ ). In group analysis condition only patients demonstrated increased beliefs that psychological and risk factors could impact their illness (interaction:  $F=4.58-7.24$ ,  $p<.05$ ,  $\eta^2=.05-.07$ ).

**Conclusions:** Patients with somatoform disorders almost equally benefitted from both psychoeducation and group analysis but group analysis psychotherapy led to better awareness of psychological and risk factors of their illness.

**Keywords:** group analysis; somatoform disorders; illness representation

### EPP0018

#### Iatrogenesis as a possible cause of chronification of mental disorders.

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**Introduction:** Most mental disorders tend to relapse (severe or mild pathologies such as anxiety or dystimia disorders), which are potentially recoverable and yet, tend to evolve poorly, persisting residual symptoms without achieving a complete recovery.

**Objectives:** The objective of this paper is to analyze the factors that influence process of recurrence and chronification, among which are our own therapeutic interventions.

**Methods:** A bibliographic search was performed from different database (Pubmed, TripDatabase) about the iatrogenic potential of our intervention (psychopharmacological or psychotherapeutic), analyzing influence and mechanisms involved, and the way to prevent them.

**Results:** Anxiety is a necessary element for the development of people, both from a biological perspective (natural and adaptive psychological response that allows us to respond adequately to possible threats); as an evolutionary psychological (element involved in conflict resolution, in turn necessary for personal development). It would be a mistake to consider it as pathological and try to eliminate it through medication or psychotherapy, since we could interfere with the natural recovery processes, contributing to its chronification and preventing possibility of change. At times, anxiety can be pathological when it occurs disproportionately and exceeds ability to adapt, but we must not eliminate it but to study origin and factors involved, to achieve complete resolution.

**Conclusions:** In conclusion, we must consider possible iatrogenesis of our therapeutic interventions in process of chronification of mental disorders and try to avoid them by adequately studying individual factors and characteristics, before intervening.

**Keywords:** iatrogenesis; chronification; Anxiety; therapeutic interventions

### EPP0019

#### Preoperative anxiety in patients admitted for brain surgery: A systematic review

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**Introduction:** Up to 80% of patients scheduled for surgery experience preoperative anxiety, which may implicate perioperative psychological and physical discomforts. Several studies focused on this phenomenon in neurosurgical setting, still controversial evidence exists.

**Objectives:** Our aim is to synthesize this evidence, investigating prevalence, implications and therapy of preoperative anxiety in brain surgery patients.

**Methods:** We performed a systematic review of literature by searching PubMed, Embase, and Cochrane Library databases. Data were extracted using the PICO framework. PRISMA guidelines were applied, and the risk of bias was assessed using the RoB 2 and ROBINS tools, as was the methodological quality of the included studies, following GRADE criteria; we excluded articles with serious risk of bias and/or low quality.

**Results:** We included 27 articles, accounting for 2558 patients of twelve different countries. Prevalence of anxiety before brain surgery was up to 89%, reaching higher levels in women. Anxiety concerned mostly anesthesia and surgical outcome. No correlation emerged between level of anxiety and laterality, histological type of tumor or survival rate. Before surgery, anxious patients performed worse in cognitive tasks and had worse subjective evaluation of their cognitive abilities. After surgery, preoperative anxiety was associated with depression, longer hospitalization, increase of physical disability and lower quality of life. Effective approaches to reduce anxiety were acupuncture, music therapy, virtual reality and pharmacological support.

**Conclusions:** Preoperative anxiety in brain surgery patients is a common experience that should not be underestimated to achieve a better perioperative care through early detection and adequate pharmacological or non-pharmacological management.

**Keywords:** preoperative anxiety; brain surgery; quality of life; Systematic review

### EPP0022

#### Prevalence of health anxiety in indian ophthalmologists during COVID-19: a survey

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**Introduction:** Mental health concerns are common in health care workers during pandemic. There are no studies of the prevalence of health anxiety in ophthalmologists in India.

**Objectives:** To estimate the prevalence of health anxiety in ophthalmologists practicing in India during the ongoing pandemic.

**Methods:** A questionnaire-based online survey on the “changes and challenges during COVID-19” using Google forms was sent to all members of the All India Ophthalmological Society. Besides demographics, the survey had questions to assess the general mental and medical health status of the ophthalmologists. Short Health Anxiety Inventory (SHAI) was used to assess health anxiety.

**Results:** 1027 ophthalmologists responded to the study. Higher stress was experienced by 83.1% compared to pre-COVID while examining patients closely (35.9%) or during surgery due to the risk of aerosol generation (29.3%). SHAI score >20 was observed in 5.6%. Only emergency services were provided by 50% and 17% in the SHAI > 20 group were not working as compared to overall 14%.

**Conclusions:** Our findings indicate that a majority of the ophthalmologists were under stress during the COVID-19 pandemic but only a small proportion experienced health anxiety. It is likely that mental health issues may arise among ophthalmologists in the foreseeable future.

**Keywords:** prevalence; Covid; health anxiety; Ophthalmologists

## EPP0023

### Anxiety in heart failure patients and its association with NYHA class

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**Introduction:** Heart failure (HF) is a worldwide public health problem and the main cause of morbidity and mortality in older people. Previous studies have demonstrated that psychological symptoms are associated with worse cardiovascular outcomes. Nevertheless, the research regarding the association between anxiety and HF is still scarce.

**Objectives:** To analyse the levels of anxiety in HF patients and its association with New York Heart Association (NYHA) class in HF patients.

**Methods:** This study takes part of a wider project named Deus Ex-Machina project (NORTE-01-0145-FEDER-00026). HF patients were recruited from an outpatient clinic at a University Hospital. Patient with inability to communicate, with severe visual impairment or with NYHA class IV were excluded. Sociodemographic data and NYHA class were recorded. Anxiety was assessed using the Generalized Anxiety Disorder-7 (GAD-7).

**Results:** Overall, 136 patients were included, with a mean age of 57(±13) years old. Most of them were men (66%) and married (76%), with mean education of 8 years (±4). Regarding NYHA class, 36%, 49% and 15% were at class I, II and III, respectively. The mean GAD-7 total score was 6.4 (±5.2) and 32% of patients showed

moderate to severe anxiety symptoms. No association between the NYHA functional class and anxiety was found (p=0.106).

**Conclusions:** The results reveal that anxiety is frequent among HF patients. However, as found in previous studies, it was not associated with more severe HF symptoms. The coexistence of HF and anxiety deserves further studies, in order to build a better understanding of this association.

**Keywords:** Anxiety; heart failure; NYHA class

## EPP0024

### Event-related potentials in a human serial conditioning paradigm

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**Introduction:** In a serial compound conditioning paradigm, a sequence of several conditioned stimuli (CS) is predictive to an unconditioned stimulus (US) (e.g., CSA->CSB->US). Animal research showed that, when the US is aversive, CSA elicits the strongest conditioned response, while CSB appears redundant. These effects of primacy and proximity have never been investigated in humans.

**Objectives:** To study the effects of temporal proximity of imminent threat and safety in serial compound conditioning.

**Methods:** Twenty-two participants were presented with sequences [CSA->CSB->CSC->CSD]. In 55 trials all four CS were identical vowels (e.g. [oh]), and no US was presented. In the other 55 trials, the CSA was different (CSA+, e.g., [uh]), and the CSD was followed by an electrical shock (US) 2.5 times higher than the individual pain threshold.

**Results:** No ERP component distinguished between CS- and CS+ for the first three stimuli in the sequence (i.e., CSA, CSB, CSC). The last CS (CSD) elicited a strong fronto-central CNV only when it was followed by US. Moreover, already after the CSA- (which signaled that no shock would be presented on that trial) the power of alpha oscillations over the somatosensory cortex significantly increased, particularly on the side contralateral to the hand that was electrically stimulated on US trials. The alpha increment lasted up to the onset of the US.

**Conclusions:** The data indicate two possible mechanisms of adjustment to predictable threat, one of which relies on safety signals (manifested in alpha increment), and the other is related to flight response (manifested in the CNV immediately preceding the shock).

**Keywords:** ERP; Fear conditioning; EEG

## EPP0025

### Anxiety, depression and HIV in older gay and bisexual men

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