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NPA Symposium: COVID-19 Pandemic and psychiatry in Europe: Challenges, experiences and future perspectives from different European countries

NPA0002

The role of professionals' associations under extraordinary situations: Contingency, capacity, and collaboration

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COVID-19 pandemic, with its profound effects on almost every sphere of individual and social life, is a significant challenge and threat to mental well-being. Although mass disasters with similar traumatic effects are not exceptional incidents globally, the rate of the spread of infection, the scale of the effects of the disease and precautions, and uncertainty concerning the nature, prevention from, and treatment of the disease render the psychosocial effects unique. As it is the case for the individual's response to the stressful events, the psychiatric communities initially addressed this challenge by adapting their usual responses to mass trauma, through their capacity acquired from earlier experiences and training. Although the response to the pandemic is expected to be orchestrated by the public authorities, in many countries, either the administration was not sufficiently cognizant of the psychosocial consequences of the pandemic, or the health-care system was unable to function properly due to the excessive burden. Therefore, the associations of mental health professionals, with varying degrees of preparedness to cope with such a challenge, had to recruit their full resources. As many associations worldwide did, the Psychiatric Association of Turkey prepared written and audiovisual resources for psychiatrists, health professionals, and the general population related to the mental health effects of the pandemic and precautions, often including strategies to cope with stress-related difficulties. Many associations, also provided distant-access psychological support to health-care workers on the frontlines and the general population. These were achieved through a fast-organized collaboration among its members and between associations worldwide.

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NPA0003

Ethical issues under the pressure of COVID-19 pandemic

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The pandemic has highlighted with particular evidence the vulnerability of people with mental disorders and a series of specific ethical concerns regarding their condition. First of all, the risk of receiving poor medical care due to the double stigma of being affected by a mental disorder and Covid infection, in addition to the many other additional barriers, including poverty, marginal housing, and food insecurity. Moreover, in some countries, in a situation where demands for intensive care exceeded the treatment facilities available, the tragical ethical dilemma regarding the choice of people to be saved was resolved with the option in favor of healthier and/or younger people who have more chances of recovery, thus excluding, among others, aged people with severe mental disorders such as dementias. In other countries, ethical concerns emerged related to the enhanced risk of involuntary hospital admission of individuals with severe mental illness mainly due the high likelihood of these patients violating physical-distancing and other safety rules. Social distancing measures have determined, among others, relevant obstacles for direct access to psychiatric care services, with the consequent adoption of the so called "telepsychiatry" of "tele mental health" by mental health services, a measure which unfortunately has cut off a large amount of patients who have not been able to benefit from these innovative methods of care both because of barriers posed by their own serious mental conditions, and by the impossibility of having the necessary technology.

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NPA0004

Experiences and projections for the future of research, training and other academic activities: Will it be the same?

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The global SARS-CoV-2 pandemic with subsequently imposed restrictions and lockdowns also radically disrupted academic life. Many research projects involving recruitment of human subjects were abruptly put on hold, educational activities have moved into online trainings, scientific meetings have been transformed into virtual events. Social distancing does not restrict only everyday human contact but also limits direct exchange of clinical, educational, and research experiences, professional and academic networking, sharing ideas. Besides all the drawbacks, does the current situation also bring any advantages? Every challenge results in new opportunities. Although the online congresses will most likely never fully replace real-life experience, it was found that many work meetings can be held more efficiently via online communication. Saving time, cutting costs of travel and accommodation, plus other expenses, may help to allocate limited resources where needed. Similarly, while practical medical education and training cannot be substituted for remote broadcasting, many theoretical presentations can. More importantly, epidemic of COVID-19 is a unique opportunity for mental health research, to study individual and population consequences of the virus, its impact on psychiatric patients. It is still early to predict whether and when research, training, meetings, and other academic activities return back to "normal", but appears that some changes are here to stay.

Disclosure: No significant relationships.

Health and environmental resilience: Effects of urbanisation, climate change and environmental determinants on mental health

S0001

Is resilience a protective factor against the effects of the COVID-19 pandemic on mental health? Results from a national multicentric study

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The COVID-19 pandemic is impacting on the mental health of the general population and its consequences will be long lasting. As already noted in previous epidemics, different factors can moderate the detrimental impact of a traumatogenic event on mental health. In particular, it has been found that people using problem-solving coping strategies, with an adequate social network and supported by family members, have good long-term outcomes and are able to adjust to the detrimental impact of the traumatic event. The COvid Mental hEalth Trial (COMET) network, including ten university Italian sites and the National Institute of Health, has promoted a national online survey in order to evaluate the impact of COVID-19 pandemic on the mental health of the Italian general population. In particular, the use of Internet and social media, the duration of the exposure to COVID-19 related containment measures, the different levels of post-traumatic growth and the variety of coping strategies adopted have been considered as possible mediators of the resilience styles adopted. In our sample, participants from the general population reported a good level of resilience compared with people with pre-existing mental or physical disorders. This data should be taken seriously in consideration in order to develop appropriate psychosocial interventions for supporting resilience in people at high-risk in order to mitigate the detrimental impact of the pandemic.

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Keywords: resilience; trauma; mental health

S0002

The ecological momentary assessment approach and the use of big data to analyse possible effects of urbanisation on mental health

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Introduction: Smart healthcare monitoring allows detecting health conditions using Big Data, namely aggregated data concerning physiological and behavioral parameters. The continuous collection of data from smart-devices performed by the Ecological Momentary Assessment approach represents a promising application of Big Data.
Objectives: This preliminary study was aimed at developing a research protocol focused on the use of Big Data in evaluating the impact of urban environment, affected by a variety of potentially damaging anthropogenic actions, on illness relapses in Bipolar Disorders (BD).
Methods: This pilot study was designed by researchers from Departments of Psychiatry and Engineering (CIRIAF), University of Perugia. Environmental, physiological, and behavioral parameters and smart-devices aimed at collecting Big Data were identified. Subjects aged 18-65, affected by BD in current euthymic state referring to the University/General Hospital of Perugia will be recruited.
Results: Subjects will undergo a baseline visit and three monitoring visits during one year. Wearable devices will be provided for collecting data about environmental and physiological parameters. Behavioral data will be collected through smartphone accelerometers, GPS, and overall smartphone use. Big data will be stored into an online platform that will provide real-time feedback concerning the recorded variables. Clinical information concerning BD relapses will be collected. Machine learning techniques, integrated to deterministic analysis of urban environmental conditions, will be used to create possible predictive models for BD relapses.