**Results:** According to the WHO cutoff score, 37.7% of parents reported low well-being levels. The regression model (F=11.2, p<.001) suggested that the feeling of abandonment and the feeling of being equipped were the most important contributors to SWB. Other statistically significant (but with lower effect sizes) variables were the support received by the partner and the adequacy of living spaces.

**Conclusions:** The findings bear out the pivotal importance of subjective states (such as feelings of abandonment or perceptions of being poorly equipped) in relation to the levels of parental SWB during the COVID-19 lockdown. Implications for planning psychological interventions aimed at strengthening personal resources to face the emergency are discussed.

**Disclosure:** No significant relationships.
**Keywords:** subjective wellbeing; COVID-19; lockdown; quantitative research

## EPV0172

### Descriptive study on psychological first aid for COVID-19 patients' relatives

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**Introduction:** The presence of psychological impact on relatives of patients admitted for Covid-19 has been described. The effectiveness of psychological first aid in critical situations has also been described. The first psychological aid describes a human response supporting another person who is suffering. This intervention is indicated for those affected by a traumatic event.

**Objectives:** To present a theoretical review about psychological first aid and to describe data about it on relatives of patients admitted for Covid-19.

**Methods:** Literature review about psychological first aid and data description of telephone intervention carried out by mental health professionals on family members of patients admitted for Covid-19.

**Results:** From an initial pool of 77 Covid-19 patients, 50 were selected as telephone contact with relatives was possible. Mean age was 68.9 years, 13 were female and 37 male. 90% were admitted in internal medicine department and 10% in intensive care unit. First telephone intervention in all cases was to introduce the psychiatrist in charge of the follow-up and provide contact number of psychiatry department. In 13 relatives` support, emotional ventilation and active listening was provided and 2 of them also received therapeutic guidelines. Further phone contact was required in 12 relatives. In follow-up phone calls, all relatives received therapeutic guidelines and 3 was referred to our outpatient clinic.

**Conclusions:** Family members of patients admitted for covid-19 may present emotional symptoms, many of them normal reactions in context of a crisis situation. A large percentage do not require a structured psychotherapeutic intervention but can benefit from a first psychological help.

**Disclosure:** No significant relationships.
**Keywords:** COVID-19; psychological first aid

## EPV0173

### On immediate verbal learning. Descriptive study in post-intensive care syndrome patients after COVID-19 infection in a functional rehabilitation unit in Spain. A pilot study

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**Introduction:** Post-Intensive Care Syndrome (PICS) is a physical, cognitive, emotional and functional condition resulting from prolonged stays in ICU (Intensive Care Unit). In pathologies with clinical characteristics similar to SARS-CoV-2 pneumonia, most patients showed cognitive deficits after discharge from ICU. In particular, previous studies describe impairment on verbal learning among PICS patients.

**Objectives:** To analyse the immediate verbal-learning performance in patients with PICS after COVID-19 infection in a Functional Rehabilitation Unit in Madrid (Spain) using the Spanish version of the Screen for Cognitive Impairment in Psychiatry (SCIP-S).

**Methods:** This study was conducted in the Hospital Central de la Cruz Roja, in Madrid (Spain). A sample of 17 PICS adult patients was included, with age ranging from 56 to 74 years old (mean = 68.35 years; 13 males). Patients were assessed around three weeks after referral from their reference hospital. The Verbal Learning Test-Immediate (VLT-I) of the SCIP-S was used as outcome. Descriptive analyses were conducted (mean and standard deviation) on standardized scores (z) based on age-adjusted general population norms. Significant impairment was set at z < -1.5.

**Results:** Mean z-score on VLT-I was -1.08 (S.D. = .80) from the total sample, with 33.3% of cases with significant impairment (mean = -1.81; S.D. = .20).

**Conclusions:** These preliminary results show the probable presence of mild-moderate impairment on immediate verbal learning in a subgroup of patients, which was already observed in PICS patients with other medical conditions. Longitudinal studies, with larger samples, are needed where the premorbid cognitive level is considered.

**Disclosure:** No significant relationships.
**Keywords:** COVID-19; Clinical Neuropsychology; Immediate verbal learning; Post-Intensive Care Syndrome

## EPV0174

### On phonological verbal fluency. Descriptive study in post-intensive care syndrome patients after COVID-19 infection in a functional rehabilitation unit in Spain. A pilot study

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**Introduction:** Post-Intensive Care Syndrome (PICS) is a physical, cognitive, emotional and functional condition resulting from prolonged stays in ICU (Intensive Care Unit). In pathologies with clinical characteristics similar to SARS-CoV-2 pneumonia, most patients showed cognitive deficits after discharge from ICU. Further studies are needed on verbal fluency impairment among PICS patients.

**Objectives:** To analyse the phonological verbal fluency in patients with PICS after COVID-19 infection in a Functional Rehabilitation Unit in Madrid (Spain) using the Spanish version of the Screen for Cognitive Impairment in Psychiatry (SCIP-S).

**Methods:** This study was conducted in the Hospital Central de la Cruz Roja, in Madrid (Spain). A sample of 17 PICS adult patients was included, with age ranging from 56 to 74 years old (mean = 68.35 years; 13 males). Patients were assessed around three weeks after referral from their reference hospital. The Verbal Fluency Test (VFT) of the SCIP-S was used as outcome. Descriptive analyses were conducted (mean and standard deviation) on standardized scores (z) based on age-adjusted general population norms. Significant impairment was set at z < -1.5.

**Results:** Mean z-score on VFT was -.53 (S.D. = .74) from the total sample, with 11.8% of cases with significant impairment (mean = -1.60; S.D. = .00).

**Conclusions:** These preliminary results show low probable presence of impairment on phonological verbal fluency among PICS patients after COVID-19 infection, which is in accordance with previous empirical studies. Longitudinal studies, with larger samples, are needed where the premorbid cognitive level is considered.

**Disclosure:** No significant relationships.
**Keywords:** COVID-19; Phonological verbal fluency; Post-Intensive Care Syndrome; Clinical Neuropsychology

## EPV0175

### On delayed verbal learning. Descriptive study in post-intensive care syndrome patients after COVID-19 infection in a functional rehabilitation unit in Spain. A pilot study

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**Introduction:** Post-Intensive Care Syndrome (PICS) is a physical, cognitive, emotional and functional condition resulting from prolonged stays in ICU (Intensive Care Unit). In pathologies with clinical characteristics similar to SARS-CoV-2 pneumonia, most patients showed cognitive deficits after discharge from ICU. In particular, earlier studies describe impairment on verbal learning among PICS patients.

**Objectives:** To analyse the delayed verbal-learning performance in patients with PICS after COVID-19 infection in a Functional Rehabilitation Unit in Madrid (Spain) using the Spanish version of the Screen for Cognitive Impairment in Psychiatry (SCIP-S).

**Methods:** This study was conducted in the Hospital Central de la Cruz Roja, in Madrid (Spain). A sample of 17 PICS adult patients was included, with age ranging from 56 to 74 years old (mean = 68.35 years; 13 males). Patients were assessed around three weeks after referral from their reference hospital. The Verbal Learning Test-Delayed (VLT-D) of the SCIP-S was used as outcome. Descriptive analyses were conducted (mean and standard deviation) on standardized scores (z) based on age-adjusted general population norms. Significant impairment was set at z < -1.5.

**Results:** Mean z-score on VLT-D was -1.02 (S.D. = .96) from the total sample, with 41.2% of cases with significant impairment (mean = -1.97; S.D. = .23).

**Conclusions:** These preliminary results show the probable presence of mild-moderate impairment on delayed verbal learning in a relevant proportion of patients, which was already observed in PICS patients with other medical conditions. Longitudinal studies, with larger samples, are needed where the premorbid cognitive level is considered.

**Disclosure:** No significant relationships.
**Keywords:** Delayed verbal learning; Post-Intensive Care Syndrome; Clinical Neuropsychology; COVID-19

## EPV0176

### On verbal working memory. Descriptive study in post-intensive care syndrome patients after COVID-19 infection in a functional rehabilitation unit in Spain. A pilot study

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**Introduction:** Post-Intensive Care Syndrome (PICS) is a physical, cognitive, emotional and functional condition resulting from prolonged stays in ICU (Intensive Care Unit). In pathologies with clinical characteristics similar to SARS-CoV-2 pneumonia, most patients showed cognitive deficits after discharge from ICU. Further studies are needed on verbal working memory among PICS patients.

**Objectives:** To analyse the verbal working-memory performance among patients with PICS after COVID-19 infection in a Functional Rehabilitation Unit in Madrid (Spain) using the Spanish version of the Screen for Cognitive Impairment in Psychiatry (SCIP-S).

**Methods:** This study was conducted in the Hospital Central de la Cruz Roja, in Madrid (Spain). A sample of 17 PICS adult patients was included, with age ranging from 56 to 74 years old (mean = 68.35 years; 13 males). Patients were assessed around three weeks after referral from their reference hospital. The Working Memory Test (WMT) of the SCIP-S was used as outcome. Descriptive analyses were conducted (mean and standard deviation) on standardized scores (z) based on age-adjusted general population norms. Significant impairment was set at z < -1.5.