

## EPP1288

**Predictors of male sexual dysfunction in post traumatic stress disorder**

R. Maalej<sup>1</sup>, G. Hamdi<sup>1,2</sup>, D. Felfel<sup>1\*</sup>, H. Ben Ammar<sup>1</sup>, A. Maamri<sup>1,2</sup>, Y. El Kissi<sup>2</sup> and H. Zalila<sup>1</sup>

<sup>1</sup>Psychiatry Department, Razi, manouba, Tunisia and <sup>2</sup>Psychiatry, Tunisian Society of Clinical Sexology, TUNIS, Tunisia

\*Corresponding author.

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**Introduction:** Post-traumatic stress disorder affects emotional, social and professional functioning. It can also affect physical and sexual health.

**Objectives:** The aim of this study is to write down the prevalence of sexual dysfunction in men with PTSD and to economize on potential predictors of sexual dysfunction.

**Methods:** A total of 30 male patients with PTSD were included in this study. We collected socio-demographic and clinical data and we used Post-Traumatic Stress Disorder (PCL) and International Erectile Function Index (IIEF15) scales.

**Results:** The mean PTSD severity score was  $65.43 \pm 2.95$ . The mean score for revitalization, avoidance, cognitive and mood alteration, and hypervigilance were  $15.80 \pm 1.44$ , respectively;  $8 \pm 0$ ;  $24.07 \pm 1.20$  and  $17.57 \pm 2.95$ . The mean IIEF-15 score was  $51.16 \pm 6.82$ . The mean sub-scores were  $3.93 \pm 0.52$  for sexual desire;  $18.80 \pm 5.68$  for erectile function;  $8.93 \pm 8.97$  for orgasmic function;  $5.13 \pm 1.10$  for satisfaction with intercourses and  $4.13 \pm 1.16$  for overall satisfaction. The IIEF15-EF score was negatively correlated with the presence of a personal medical history ( $p = 0.02$ ) and the impairment cognitions and mood score ( $p = 0.023$ ). The IIEF-OF score was significantly associated with reviviscence, hypervigilance, cognition and mood alterations ( $p = 0.015$ ;  $0.041$ ;  $0.045$ ). The IIEF-15 SD score was negatively correlated with altered cognition and mood ( $p = 0.007$ ).

**Conclusions:** Our study focused on the importance of assessing sexual function in men followed for PTSD and helps to understand the association of PTSD with different types of sexual dysfunction.

**Keywords:** ptsd; Sexual Dysfunction

## EPP1286

**Sexual counselling and sexual therapy in chemsex users in an NGO in Spain**

J. Curto Ramos<sup>1,2\*</sup>, I. Azqueta<sup>1</sup>, M.T. Heredia Soriano<sup>1</sup>, J.F. Cabrera Solano<sup>1</sup> and L. Ibarra<sup>1</sup>

<sup>1</sup>Chemsex Program “sexo, Drogas Y Tú”, Apoyo Positivo, madrid, Spain and <sup>2</sup>Mental Health Service, University Hospital La Paz, MADRID, Spain

\*Corresponding author.

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**Introduction:** The intentional use of drugs before or during sexual intercourse (chemsex) is a phenomenon of special importance in the MSM (men who have sex with men) population due to its impact on mental, physical and sexual health. Sexual health issues related to chemsex practice have been described such as difficulties in achieving sober sex, erectile dysfunction or problems with sexual desire.

**Objectives:** To describe the sexual health interventions (including sexual counselling and sexual therapy) for patients with chemsex practices in the NGO Apoyo Positivo in Madrid. We describe the main sexual problems.

**Methods:** Descriptive analysis.

**Results:** The main sexual problems were dissatisfaction in sexual intercourse without substance and difficulties with sexual desire activation (70%); compulsive sexual behaviour (70%), difficulties with sexual orientation and non normative gender expression, difficulties in erection (34%), premature ejaculation (7%) and delayed ejaculation (10%).

**Conclusions:** Chemsex is a phenomenon that needs a multidisciplinary approach and mental and sexual health must be taken into account. “Sexo, Drogas y Tu” is a model of collaborative approach which is a pioneering intervention developed by an NGO in Spain.

**Keywords:** chemsex; NPS; sexuality

## EPP1287

**Chronic inflammatory bowel diseases and sexuality: Inevitable disorders?**

N. Charfi<sup>1</sup>, A. Guerrazi<sup>1\*</sup>, F. Guerrazi<sup>1</sup>, S. Omri<sup>1</sup>, N. Smaoui<sup>1</sup>, R. Feki<sup>1</sup>, J. Ben Thabet<sup>1</sup>, L. Zouari<sup>1</sup>, M. Maalej Bouali<sup>1</sup>, N. Tahri<sup>2</sup>, M. Boudabous<sup>2</sup> and M. Maalej<sup>1</sup>

<sup>1</sup>Psychiatry C Department, Hedi chaker University hospital, sfax, Tunisia and <sup>2</sup>Gastroenterology Department, Hedi chaker University hospital, sfax, Tunisia

\*Corresponding author.

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**Introduction:** Improving the quality of sexual life of patients has become a major therapeutic objective in the management of Chronic Inflammatory Bowel Diseases (CIBD).

**Objectives:** To assess the prevalence of sexual dysfunction (SD) in patients with CIBD in remission and compare it to healthy controls (HC), and to determine the associated factors

**Methods:** This was a cross-sectional study, conducted over 8 months, involving 36 patients with CIBD, who attended the gastroenterology outpatient of Hedi Chaker University Hospital in Sfax (Tunisia). They were compared to 36 HC. Sexual function was assessed with the “Female sexual Function Index” and the “International Index of Erectile Function”.

**Results:** In the sample of CIBD, the prevalence of SD was 65.4% in women and 50% in men. Compared to controls, patients with male gender had significantly more impaired erection and orgasm ( $p=0.005$ ;  $p=0.002$  respectively), and those with female gender had significantly more impaired sexual arousal and desire ( $p=0.003$ ;  $p=0.028$  respectively). In the sample of patients, having a poor marital harmony and a fewer sexual attraction towards partner were correlated with decreased desire ( $p=0.017$ ) in men and with sexual arousal ( $p=0.024$ ) and decreased desire ( $p=0.048$ ) in women. The number of relapses negatively affects erection ( $p=0.038$ ) and orgasm ( $p=0.048$ ). Depression correlated with a decreased orgasm ( $p=0.001$ ) and desire ( $p=0.048$ ) in men, and with a decreased sexual arousal ( $p=0.006$ ) in women.

**Conclusions:** SD is common in CIBD, hence the need for a multidisciplinary approach to allow improvement of the quality of life of these patients, and of their partners.

**Keywords:** Chronic Inflammatory Bowel Diseases; Sexual Dysfunction; quality of sexual life