

intimacy and promoting its distinction from paraphilias as they are described in the DSM or ICD classifications.

Disclosure: No significant relationships.

Keywords: BDSM; stigma; Sexual health; Biological mechanisms

EPV1468

Suicidal attempts and non-suicidal self-injury during gender affirming hormone therapy (GAHT) – a case report

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Introduction: Transsexual adolescents frequently present psychiatric comorbidities and psychopathology among which self-injurious behaviours are prominent (Modrego Pardo et al., 2021). GAHT seems to decrease the rate of mental health problems especially in terms of anxiety, depression and hostility (Heylens et al., 2014). However the impact of exogenous cross-sex hormones on non-suicidal and suicidal self-injurious behaviours is not thoroughly understood (Claes et al., 2015).

Objectives: We present the case of a transsexual boy who was first diagnosed with depression and benign self-injurious behaviours and subsequently - transsexualism.

Methods: He was prescribed a treatment with testosterone depot injections in fortnight intervals. The initiation of testosterone injections co-occurred with the switching of antidepressant drug. Self-injurious behaviours, substance abuse and suicidal attempts were observed regularly after GAHT onset – 10-14 days after a testosterone injection. The lethality and intensity of self-harm was greater than that observed before GAHT. After admission to the psychiatry unit pharmacotherapy was adjusted accordingly to presented symptoms. Remission of self-injurious behaviours followed.

Results: The incidence of self-injury 10-14 days after the injection of depot testosterone overlaps the peak of serum testosterone levels in treated patients (O'Connor et al., 2004). Moreover, a relative serotonin deficiency in a depressed patient may be insufficient to counteract testosterone believed to be driving aggressive tendencies (Batrinos, 2012).

Conclusions: Since psychiatric comorbidity and psychopharmacotherapy in transsexual young population is the rule rather than the exception, careful monitoring and therapy adjustment is crucial for maintaining safety and obtaining best results (Kaltiala et al., 2020).

Disclosure: No significant relationships.

Keywords: suicidal attempt; NSSI; Depression; transsexualism

EPV1469

Neurodevelopmental disorders and gender dysphoria: a fertile relationship?

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Introduction: Development of gender identity is a complicated process. During this process it is thought that many factors play a role. Gender dysphoria is a condition where there is a mismatch between the assigned gender at birth and gender identity. Although scarce, literature shows that compared to cisgender individuals, transgender and gender-diverse individuals have higher rates of autism, other neurodevelopmental and psychiatric diagnoses.

Objectives: To describe possible relations and overlap between gender dysphoria and neurodevelopmental disorders.

Methods: Literature search in Pubmed and other similar platforms. Articles considered relevant under this theme were included.

Results: Autism spectrum disorders (ASD) and attention-deficit hyperactivity disorder (ADHD) can compromise health and may be more prevalent amongst individuals with gender dysphoria (GD). Symptoms such as attention difficulties, deficits in communication and social skills, obsessional interests, and stereotyped behaviour can significantly impact assessment of GD and the appropriate clinical care. With some overlapping symptoms, the potential for misdiagnosis is possible. Data about prevalence of this conditions in transgender community is of low quality, but ASD is more prevalent, ranging from 6-26%.

Conclusions: Studies demonstrate that neurodevelopmental disorders and other psychiatric conditions are more common in transgender and gender-diverse individuals. It is important that future studies focus on exploring the mental health outcomes of neurodevelopmental-trans individuals.

Disclosure: No significant relationships.

Keywords: psychiatry; sexual medicine; Neurodevelopmental disorders; Gender Dysphoria

EPV1470

Sexuality among elderly patients with dementia: Are we aware of their needs?

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Introduction: Sexuality is one of the basic needs in human life and its positive effects for the wellbeing are undeniable. People with dementia, despite cognition and functioning impairments, still pursue intimacy as part of their expression of basic human instincts.

Objectives: We aim to address the subject of sexuality among patients with dementia, emphasizing the physiological, environmental and legal barriers.

Methods: We conduct a non-systematic review of recent evidence on dementia and sexuality, using PubMed/Medline database.

Results: People with dementia face several difficulties expressing their sexuality. First, they struggle with physiological barriers to enjoyment of sexuality, such as ageism, apathy and limited free mobility. Secondly, either at home or in long-term care facilities, privacy is usually abolished. For care facilities, the Sexuality Assessment Tool supports the normalization of sexuality and self-audit policies that promote resident rights for privacy and assistance.