

was 3592.5 ± 596 Tunisian Dinars. The results of the ASEX showed that 23,8 % (n=19) of participants, 23,6 % (n=13) of male participants and 24 % of female (n=6) participants had sexual dysfunction. Ten per cent of individuals (n=8) have previously consulted a sexologist. Longer working hours, lower monthly income, less physical exercise were significantly associated with increased risk for sexual dysfunction.

Conclusions: Sexual dysfunctions seem to be common among Tunisian doctors. Knowledge about their sexual functioning is important to promote their physical and mental health and to improve the care delivered.

Disclosure of Interest: None Declared

EPV1892

Sleep Health Disparities in Depression: The Role of Sexual Orientation, Education, and Ethnicity

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Introduction: This study explores sleep health disparities among adults with depressive episodes, focusing specifically on sexual and gender minorities (SGM). Given the high prevalence of sleep disturbances in this population, we aim to understand the influence of sexual orientation, alongside sociodemographic factors, on sleep health.

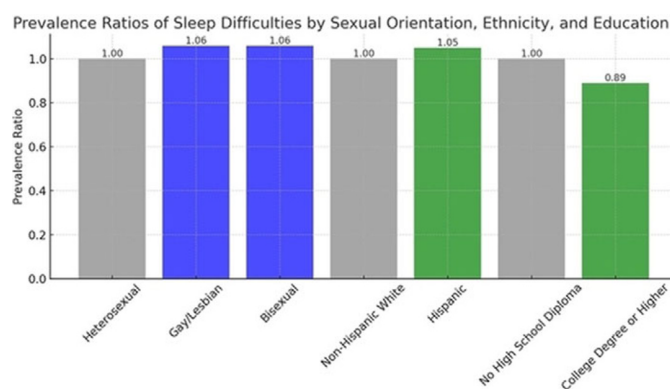
Objectives:

- To determine the prevalence of sleep difficulties among sexual minorities with depressive episodes.
- To assess how sociodemographic factors, including education and ethnicity, relate to sleep health in this population.

Methods: Using data from the 2020-2021 National Survey on Drug Use and Health (NSDUH), we analyzed a sample of 15,244 individuals who experienced depressive episodes. The study employed weighted estimates to accommodate the survey's multistage sampling design. Descriptive statistics were used to assess the prevalence of various factors, including tobacco and nicotine use, age, gender, ethnicity, income, marital status, and education. To evaluate the relationships between these factors and sleep difficulties, we utilized generalized linear models with Poisson distribution and log-link function to estimate adjusted prevalence ratios for each covariate.

Results: The study identified notable disparities in sleep health among individuals with depressive episodes based on sexual orientation and sociodemographic factors. Gay/lesbian individuals and bisexual individuals were both found to have a higher likelihood of reporting sleep difficulties compared to heterosexuals, with an increased prevalence of 1.06 times ($p = 0.038$ for gay/lesbian and $p = 0.009$ for bisexual). Educational attainment appeared to play a significant protective role; those with a college degree or higher were 0.89 times less likely to report sleep difficulties than individuals without a high school diploma ($p < 0.001$). Additionally, ethnicity influenced sleep health, with Hispanic individuals being 1.05 times more likely to report sleep issues than non-Hispanic Whites ($p = 0.015$).

Image 1:



Conclusions: The findings emphasize the presence of sleep health disparities among sexual and gender minorities experiencing depressive episodes. Gay/lesbian and bisexual individuals face a higher risk of sleep difficulties, highlighting the need for mental health interventions that are sensitive to sexual orientation. The protective effect of higher educational attainment suggests that enhancing access to education and related resources may improve sleep health outcomes. The increased prevalence of sleep difficulties among Hispanic individuals points to the need for culturally tailored approaches in mental health care. Addressing these disparities through individualized and culturally sensitive therapeutic strategies can contribute to better sleep health and overall well-being for these populations, underlining the importance of integrated, comprehensive care in managing depressive disorders.

Disclosure of Interest: None Declared

EPV1893

Antiepileptic drugs and sexual dysfunction in patients with epilepsy

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Introduction: Epilepsy is a common disease that is mostly treated with antiepileptic drugs (AEDs). The sexual dysfunction (SD) side effects related to the use of AEDs have not received sufficient attention.

Objectives: The aims of this study were to assess the prevalence of SD and to study the role played by the AEDs among patients with epilepsy.

Methods: A cross-sectional and analytic study was conducted from September to December 2023, among patients with epilepsy follow up in the neurology outpatients of the University Hospital in Gabes (Tunisia), received AEDs, married for at least six months and sexually active. We collected the therapeutics data including type and number of prescribed AEDs and medication adherence, using pre-established form. SD was measured using the Arizona Sexual Experience Scale (ASEX) questionnaire.

Results: Forty-five patients were enrolled (68.9% male and 31.1% female). The average age was 46.76 years (SD=12.39). The majority of patients had a low socio-economic status (64.4%). Carbamazepine and phenobarbital were the most commonly AEDs prescribed (57.8% and 53.3% respectively), especially as monotherapy (62.3%). Poor medication adherence was observed in 13 patients (28.9%). The frequency of SD among patients, based on ASEX questionnaire, was 44.4%. The factors associated with SD included carbamazepine and phenobarbital prescription ($p=0.036$ and $p=0.045$ respectively), double or multiple drug therapies ($p=0.006$) and poor medication adherence ($p=0.033$).

Conclusions: SD is very common in patients with epilepsy. This seems to be related to AEDs such as using of carbamazepine and phenobarbital, polytherapy and poor medication adherence.

Disclosure of Interest: None Declared

EPV1894

The sexual behavior of Tunisian adults during Ramadan: an opinion survey

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Introduction: The month of Ramadan, a sacred period in the Islamic calendar, is a time of fasting, prayer, and reflection for millions of Muslims worldwide. While the effects of fasting on physical and mental health have been extensively studied, there has been little focus on its specific impact on sexual life, particularly in the Tunisian context.

Objectives: The aim of our research was to study the opinions of Tunisians regarding their sexual behavior during the month of Ramadan.

Methods: This was a retrospective, descriptive, and comparative study conducted through an online survey among Tunisian adults. Data collection was carried out via a self-administered online questionnaire during Ramadan 2024, from March 21 to April 4, 2024. Two reminders were sent and the anonymity of the responses was guaranteed.

Results: Our study included 130 Tunisian adults with a mean age of 28.69 years. The majority of our population resided in urban areas (98.5%), 43.8% were single where 29.2% were in a relationship and both genders were equally represented (53.1% female, 46.9% male). The majority of participants identified as heterosexual (89.2%). During Ramadan, 78.5% of participants fasted, and 77.7% believed sexual activity was permissible during this period. Overall, 44.6% of participants felt that fasting had a negative impact on sexual behavior, 30.7% on sexual desire, and 26% on sexual performance. More than 70% reported that fasting influenced their sexual behavior, primarily in a negative way (44.6%). Among those who perceived an impact ($n=93$), changes were mostly noted in the timing (77.7%) and frequency of sexual activities (75.5%). Furthermore, 72.3% of participants reported that fasting influenced their sexual desire, with 40.9% perceiving this influence positively. Behavioral factors were identified as the most common cause of these changes (52.1%), followed by religious reasons (27.7%) and societal factors (11.7%). Significant gender differences were observed, with women

being more affected by religious factors ($p=0.02$), while men were more influenced by behavioral factors ($p=0.03$). Women also reported a significantly greater impact on the frequency of sexual activity compared to men ($p=0.012$) and perceived a more significant negative impact of fasting on sexual performance compared to men ($p=0.06$).

Conclusions: Our study indicates that Ramadan fasting significantly affects the sexual lives of Tunisians, driven by sociocultural, religious, and physiological factors. This highlights the need for culturally sensitive sexual education and targeted health policies to ensure accessible and inclusive care during Ramadan.

Disclosure of Interest: None Declared

EPV1895

Prevalence and knowledge of gender dysphoria among young medical trainees

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Introduction: Gender dysphoria (GD) is a rare entity which involves significant distress experienced by an individual due to a perceived discrepancy between his gender identity and his sex assigned at birth. In the current literature, there is little research on medical students' knowledge and attitudes towards this entity.

Objectives: The objectives of our study were to estimate the prevalence of gender dysphoria within young medical trainees and to explore their knowledge and beliefs about this entity.

Methods: It was a cross-sectional and descriptive study, carried out on GOOGLE FORMS in the period of time from October 1, 2023, to January 31, 2024, and relating to a population of Tunisian young medical trainees. We used a questionnaire including an information sheet and the gender identity/gender dysphoria questionnaire for adolescents and adults (GIDYQ-AA).

Results: Our study involved 111 participants with a sex ratio (M/F) of 0.56. Their median age was 28 years.

The overall prevalence of gender dysphoria was 0.9%. It was 2.5% among participants assigned male at birth (95% CI=[0.06%–13.2%]) and 0% among those assigned female at birth.

Among the participants, 21.6% had received training on GD or sexual identity disorders during their medical education while 3.6% of reported being aware of specialized services for the management and support of GD.

Four-fifths of the participants (80.2%) believed that the development of GD would be due to organic factors, while 70.3% described the contribution of socio-cultural factors and 58.6% attributed it to early family interactions.

More than a third of the participants (40.6%) considered GD as an entity related to sexual development disorders, 28.8% equated it with a symptom of a more general mental pathology, while 30.6% regarded it as a distinct entity.

Regarding the suffering associated with GD, it was attributed to the internal experience of gender incongruence by 42.3% of the participants, social stigma in 29.8% of cases, and to psychiatric