

functioning and sexual satisfaction in women with vaginismus. Understanding the metacognitive characteristics accompanying vaginismus and including metacognitive interventions in sexual therapy for both cognitive self-consciousness and negative beliefs about the uncontrollability of thoughts and danger, may result in increased treatment success, improved sexual functioning, and sexual satisfaction in women with vaginismus.

Disclosure of Interest: None Declared

EPV1900

Divergent Desires: Sexual Expression in ASD and ADHD Individuals

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Introduction: Autism Spectrum Disorder (ASD) and Attention-Deficit/Hyperactivity Disorder (ADHD) can both impact psychosexual functioning.

ASD individuals may struggle with appropriate sexual interactions due to challenges in social communication, understanding social norms, and sensory sensitivities. Restricted and repetitive behaviors may also lead to a focus on specific sexualized behaviors.

ADHD-related symptoms may impact psychosexual functioning. Impulsivity can lead to risky sexual behavior, while inattention may increase the risk of sexual dysfunction. Additionally, prescribed ADHD medication has been found to disrupt sexual functioning.

Objectives: Our aim is to better understand the psychosexual profile of neurodivergent individuals.

Methods: A narrative review was carried out using various databases, including PubMed.

Results: Literature suggests a higher prevalence of sexual ambivalence, as well as increased homosexual, bisexual, and asexual tendencies among ASD-individuals. They may also exhibit more inappropriate sexual behavior, which can put them at risk of legal consequences.

Research suggests that ADHD-individuals may have a higher frequency of homosexual experiences and females with ADHD report greater ambivalence about their gender identity. ADHD is associated with risky sexual behaviors, but ADHD-medications may have a protective effect against early pregnancy and STIs.

Conclusions: The literature suggests that individuals with ADHD and/or ASD can lead to different psychosexual functioning compared to neurotypical peers.

Further research is needed to understand the contributing factors.

Disclosure of Interest: None Declared

EPV1901

Make sex great again! - Prevalence and Treatment Options for Postcoital Dysphoria

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Introduction: Postcoital dysphoria (PCD) refers to feelings of sadness, anxiety, or irritability following sexual intercourse, even when it is consensual and satisfying. These emotions can last from minutes to hours and affect both genders.

Historically, sex was mainly viewed as a means of reproduction, with pleasure often regarded as secondary. However, during the sexual revolution of the 1960s and 70s, perceptions shifted, recognizing sex as a source of pleasure and emotional connection. Today, despite a focus on mutual satisfaction, some individuals still experience post-sexual distress, highlighting the complexity of human sexuality. As a source of important distress, PCD calls for exploration of therapeutical agents.

Objectives: To examine the prevalence of postcoital dysphoria (PCD) and explore potential therapeutic agents.

Methods: A non-systematic literature review using the keywords “postcoital”, “dysphoria” and “tristesse” limited to articles published in English from the PubMed®/MEDLINE® database.

Results: Seven relevant studies were identified regarding postcoital dysphoria (PCD). In a study of 1,208 males, 40% reported experiencing PCT at least once, with 20% experiencing symptoms in the past month, and 3–4% regularly. PCT was linked to psychological distress, childhood sexual abuse, and sexual dysfunctions.

Among women, a UK survey of female twins found that 3.7% reported recent PCT symptoms, while 7.7% had long-term symptoms. Another study indicated that nearly 50% of female university students experienced PCT at least once, with no correlation found between PCT and relationship intimacy.

In the LGBTQIA+ population, a survey of 172 adults revealed PCD prevalence of 42% among men attracted to men and 81% among bisexual/fluid individuals. Significant correlations were observed between sex life satisfaction and PCD in this group. Regarding treatment, one single case report described a patient without psychiatric comorbidities treated successfully with escitalopram (10 mg), with symptomatic relief.

Conclusions: The reviewed studies highlight the prevalence and factors contributing to postcoital dysphoria (PCD) across diverse populations. Among men, up to 40% experience PCD at least once, with contributing psychosocial factors. In women, PCT prevalence varies, with no clear link to relationship intimacy. In the LGBTQIA+ community, PCD is notably high, affecting 42% of MSM and 81% of bisexual/fluid individuals, with sexual dissatisfaction and perceived discrimination as key correlates. Treatment options remain unexplored, with only one case report showing positive results using escitalopram. These findings suggest PCD is a complex conditions influenced by psychological, sexual, and societal factors. More research is needed to understand the underlying mechanisms and explore effective treatments, particularly for minority populations and those without psychiatric comorbidities.

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EPV1903

Mental and Sexual Health Challenges Among Sexual Minority Individuals

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