

Objectives: To present successful off-label treatment of early ejaculation.

Methods: Case report. Two cases.

Results: Two male patients with early ejaculation problems that influenced their romantic and sexual life. Older one of them has divorced because of that. Younger has never had romantic or sexual relationship for the same reason. Prescribing SSRI make their love life more productiv. Older one married for the second time and has functional and stabile relationship. Younger one established several romantic and sexualn relationship and currently is in a stabile romantic relationship.

Conclusions: Longterm use of low doses SSRI can be very beneficial in treatment of early ejaculation.

Disclosure of Interest: None Declared

EPV1038

Antipsychotics and spermatogenesis, which is the impact?: A review of literature

H. Belhadga*, Z. Elmaataoui and H. Kisra

20Hôpital psychiatrique universitaire arrazi de sale, hôpital psychiatrique universitaire arrazi de Sale, Sale, Morocco

*Corresponding author.

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Introduction: Antipsychotics are among the most widely prescribed molecules in psychiatry. Their sexual side effects are frequent, generally underestimated by clinicians and subjectively poorly tolerated by patients. They contribute to the significant non-compliance reported in treated patients. Most antipsychotics are non-selective and have actions on a multitude of receptors, both central and peripheral. Among these, the anti-dopaminergic action could have a deleterious effect on sexual function including spermatogenesis.

Objectives: The aim of our study is to report, according to the analysis of the collected data, the impact of the treatment with antipsychotic drugs on spermatogenesis and the counteraction of its consequences to a possible infertility in patients.

Methods: The studies related to the treatment of DMDD were collected and analyzed. This study retrieved related articles from PubMed, SpringerLink, ScienceDirect, NCBI, CAIRN, and GOOGLE SCHOLAR. Use keywords "antipsychotics" AND "spermatogenesis" AND "infertility" AND "male" OR "hyperprolactinemia" AND "spermatogenesis" OR "risperidone" OR "olanzapine" OR "haloperidol" OR "fluphenazine" AND "spermatogenesis" AND "infertility" OR "psychotropics" AND "infertility" OR "spermatogenesis".

Results: Antipsychotics are responsible, by blocking the secretion of dopamine in the central nervous system, for hyperprolactinemia, indirectly leading to hypogonadism. They are the pharmacological class most implicated in the occurrence of hyperprolactinemia. several studies have shown changes in the levels of sex hormones with alteration in the quality of the product of spermatogenesis, and others have demonstrated abnormalities in testicular architecture in rats after regular administration of doses of antipsychotics. thus,

all antipsychotic molecules, whether classic or atopic, are likely to cause abnormalities in spermatogenesis.

Conclusions: Antipsychotics are molecules with multiple indications in mental health, yet their adverse effects can become disabling or even irreversible. Sexual dysfunction and infertility are widespread among patients under antipsychotic treatment. The mechanisms of the effects of treatment with these molecules on spermatogenesis are poorly elucidated, since the vast majority of prospective studies are carried out on rats. However, this undesirable effect seems to be obvious and real.

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Marital rape and its impact on women's mental health

H. Abrebak*, F. Z. Chamsi and A. El Ammouri

Faculty of medicine of tangier, Tangier, Morocco

*Corresponding author.

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Introduction: In Morocco, the only legal setting for sexuality is marriage, which presumes automatic consent between the couple, as much so that Islam has authorized any sexual practice between spouses except for anal sex .

In our socio-cultural context, it is difficult to determine the extent of the phenomenon, the subject being taboo with a jurisprudence that refuses to recognize the reality of rape between spouses.

Objectives: The objective of this work is to emphasize this phenomenon of marital rape, its psychological repercussions, its legal and religious framework in order to debanalize this phenomenon and act in favor of women's mental health.

Methods: Our study is conducted on 3 patients seen in liaison psychiatry admitted to the surgical departments for organic complications of medium to severe severity, secondary to rape in the marital context where our expertise was requested in front of the great psychic distress of the latter.

We collected information by taking notes after our psychiatric examination.

Results: Our three patients were victims of rape and violence by their husbands on several occasions, prior to this hospitalization but never reported such an incident. Our patients presented a wide spectrum of psychiatric pathologies: post-traumatic stress disorder, depression, generalized anxiety, suicidal ideas. One of them has acted out on the latter . In addition to these psychological repercussions, two patients had presented complications of a gynecobstetrical nature (a miscarriage and a premature delivery). It should be mentioned that these acts of rape in our three patients were always accompanied by physical violence.

Conclusions: In our Moroccan context, rape within a married couple is not yet recognized by our society, which admits that a woman does not have the right to refuse sexual relations to her husband.

Much remains to be done to familiarize and sensitize society to the reality of marital rape and to ensure that women victims obtain adequate support and care.

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