Results: Our study population comprised 73 patients. Patient ages ranged from 25 to 86 years, with a median age of 56.87 years. Twenty-eight subjects (38.4%) were between 56 and 70 years of age. Sixty patients (82.2%) were married, with 68 living with relatives. Regarding anamnestic data, organic comorbidity was found in all patients with diabetes in 67.1% and arterial hypertension in 50.7% of cases. The median duration of hemodialysis was 48 months. The frequency of hemodialysis sessions was 3 per week in 69 patients (94.5%).

Erectile dysfunction was diagnosed in 64 patients, corresponding to a prevalence of 87.7%. The dysfunction was mild in 24.7% of cases, moderate in 45.2% and severe in 17.8%.

Erectile dysfunction was significantly correlated with age over 55 with an adjusted OR = 2.43 and the presence of diabetes with an adjusted OR = 1.5.

Conclusions: The prevalence of erectile dysfunction is high in hemodialysis patients. A systematic sexological approach is needed to ensure early and appropriate management.

Disclosure of Interest: None Declared

EPV1870

Study on the Sexuality of Tunisian Women with Systemic Lupus Erythematosus

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Introduction: Systemic Lupus Erythematosus (SLE) is a systemic disease that can significantly impact women's lives. Female sexual function is one of the underestimated areas, and few studies have focused on sexual dysfunctions in women with SLE.

Objectives: To study the sexuality of patients with SLE, the factors associated with it, and the relationship with the disease activity stage.

Methods: A descriptive and analytical cross-sectional study was conducted with 38 patients with SLE followed in the internal medicine department at Hedi Chaker University Hospital, Sfax, over a period of 3 months from September to November 2023. We used:
A socio-demographic and clinical data sheet, and the SLEDAI scale for assessing disease activity criteria.
The Female Sexual Function Index (FSFI) scale to study sexuality over the past 4 weeks.

Results: The average age of the patients was 46.63 ± 10.21 years. Among them, 36 were married, and 44.7% had medical-surgical history.

The average age at SLE diagnosis was 37.11, with an average disease duration of 8.95 years. The mean SLEDAI score was 3.63. Absent to moderate activity was present in 92.1% of cases, and high activity in 7.9%.

Photosensitivity was noted in 36.8%, joint involvement in 63.2%, and anemia in 52.6%. Among the patients, 86.8% were on corticosteroids and 26.3% on immunosuppressants.

The average age of onset for sexual difficulties (SD) was 37.28 years, with an average delay of 3.05 years from disease onset.

According to FSFI: the mean score was 58.38 ± 23.412 [2 - 93]. A decrease in overall sexuality was noted in 44.7%, desire in 63.2%, satisfaction in 57.9%, arousal in 52.6%, and lubrication in 39.5%.

The factors correlated with different FSFI domains were:Desire: associated with medical-surgical history (P=0.001), photosensitivity (P=0.028), and anemia (P=0.003). Sexual satisfaction: associated with medical-surgical history (P=0.011), joint involvement (P=0.034). Arousal: associated with medical-surgical history (P=0.01) and anemia (P=0.004).

There were no statistically significant correlations between the disease activity stage and the different FSFI domains. However, the onset of SD was shortened if use of corticosteroid (P=0.005) or immunosuppressive treatment (P=0.038).

Conclusions: Our results indicate that SLE can impair sexuality in various domains, especially if associated pathologies are present. Therefore, special attention should be given to the sexual function of patients with lupus.

Disclosure of Interest: None Declared

EPV1871

Erectile Dysfunction in Tunisian Veterans: Clinical and Psychological Insights

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Introduction: Erectile dysfunction (ED) is a multifactorial condition affecting a significant propotion of men worldwide, impacting their mental well-being, life quality and interpersonal relationships. Often associated with various underlying factors, ED manifests differently in each individual, yet there is a limited understanding of the unique profiles of specific populations, such as military veterans, who may face distinct physical, psychological and social challenges contributing to the condition.

Objectives: This study aimed to explore the clinical profile, demographic factors, and associated comorbidities of Tunisian military veterans affected by ED.

Methods: A cross-sectional descriptive survey was conducted between September and November 2024 on Tunisian veterans seeking consult, using a data file and 2 self-report scales:
The Hospital Anxiety and Depression (HAD) scale, consisting of two subscales: Anxiety (A) and Depression (D), dividing patients into: normal[0-7], borderline case[8-10], an abnormal level of anxiety or depression[11-21].
The IIEF-5 (International Index of Erectile Function 5) to evaluate ED with six categories: [1-4]: uninterpretable, [5-7]: severe, [8-11]: moderate, [12-16]: mild to moderate, [17-21]: mild and [22-25]: no ED.

Results: The study enrolled 28 veterans diagnosed with ED, with an average age of 40 [25-61] years. Most (78.6%) were married while 17.9% were single and 3.6% were divorced.

Smoking was prevalent in 82.1% and 21.4% reported alcohol consumption, with 83.3% drinking occasionally and 16.6% drinking regularly. None reported using cannabis or other illicit drugs.

Regarding medical history, 39.3% had medical health conditions including varicocele, diabetes, combined arterial hypertension and diabetes, myocardial infarction and other health issues.

Psychiatric follow-up was reported by 85.7% of the individuals.

Anxiety symptoms were present in 89.3% of participants with 3.6% classified as borderline cases. Depressive symptoms were reported by 67.9% with 21.4% categorized as borderline symptoms.