S1146 E-Poster Viewing

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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doi: 10.1192/j.eurpsy.2025.2319

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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doi: 10.1192/j.eurpsy.2025.2320

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.

Disclosure of Interest: None Declared

EPV1903

Mental and Sexual Health Challenges Among Sexual Minority Individuals

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doi: 10.1192/j.eurpsy.2025.2321

European Psychiatry S1147

Introduction: Sexual minority individuals face unique challenges in mental and sexual health, emotion regulation, and well-being. Although understanding the complex dynamics among these variables in the context of diverse sexual orientations and gender identities is crucial to supporting and tailoring comprehensive interventions, limited research has investigated their overlapping relationships and intersections.

Objectives: The current study aims to examine the connections between mental health, sexual health, emotion regulation, and wellbeing among sexual minority and heterosexual individuals in Israel. The main purpose was to provide a comprehensive understanding of the unique challenges sexual minority individuals face.

Methods: The study included 465 participants, 324 (70%) were identified as heterosexual individuals and 119 (26%) as sexual minority individuals. Various variables were assessed using an online anonymous questionnaire, including mental health (anxiety, depression, suicide ideation, substance use disorder), sexual health (sex-related distress, problematic pornography use, compulsive sexual behavior disorder), emotion-regulation, and well-being. Between-group differences were analyzed using Mann-Whitney U tests. Network analysis was conducted to examine the centrality and edges of relationships between variables within each group.

Results: Significant differences were found between the heterosexual and sexual minority groups across the measured variables. Sexual minority individuals reported higher levels of psychopathology, lower sexual health, as well as lower levels of emotion regulation and well-being compared to heterosexual individuals. Network analysis revealed that the number of diagnosed psychopathologies and depression were central nodes in the sexual minority group, while sexual functioning played a central role in the heterosexual group. The sexual minority group's network showed less stability, suggesting distinct subpopulations within this group. Conclusions: This study contributes to understanding the unique mental and sexual challenges sexual minority individuals face and the intersections between mental health, sexual health, emotion regulation, and well-being. These findings highlight the importance for mental health professionals to acknowledge and address these connections, emphasizing the need for tailored psychosocial interventions that integrate sexual health.

Disclosure of Interest: None Declared

EPV1907

The Impact of Personality Traits on Mental Stress and Stigmatization in HIV+ Cases

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doi: 10.1192/j.eurpsy.2025.2322

Introduction: HIV (Human Immunodeficiency Virus) is a virus that damages the immune system, weakening the body's ability to defend against infections and certain types of cancer. If left untreated, HIV can progress to an advanced stage known as AIDS (Acquired Immunodeficiency Syndrome). HIV can be transmitted through blood, sexual contact, from mother to child during child-birth, or through breastfeeding. Today, with antiretroviral treatments, it is possible for individuals living with HIV to lead healthy

and long lives. In addition to health issues, HIV-positive individuals face mental stress and societal stigmatization. Their personality traits play a significant role in determining the level of mental stress they experience and their ability to cope with stigma. We have developed a survey for HIV-positive individuals addressing these aspects.

Objectives: This study, aimed to observe how HIV-positive individuals cope with societal stigmatization and the mental stress they experience based on their personality types, as well as the connection between these factors.

Methods: The study's survey was prepared using the open-source platform 'Google Forms' and will be administered in person. The tests used in this study are widely accessible and have been validated for reliability and validity in Turkey. Specifically, we utilized the Enneagram, the HIV Stigma Scale developed by Berger and colleagues, and the Hospital Anxiety and Depression Scale developed by Zigmond and Snaith. The study has no commercial purpose. The analysis was conducted on a total of 63 respondents, consisting of 45 men and 18 women.

Results: In the study, data were collected from 63 individuals, 71.4% of whom were male (n=45) and 28.6% female (n=18). The average age of participants was 39.69 years (range 20-77). It was observed that individuals with primary education were the most stigmatized, while those with middle school education experienced the least stigmatization. The most common personality type among both men and women was Type 2 (the helper). According to the data, participants had an average stigma score of 94.9.

Conclusions: The study did not find a significant relationship between age and stigmatization, nor between gender and stigmatization. Personality types that perceived the highest levels of stigmatization were Type 2 and Type 8, with average scores of 108. Conversely, the personality type that perceived the lowest levels of stigmatization was Type 5, with an average score of 74. These findings highlight that certain personality types may be more susceptible to experiencing or perceiving stigmatization, while others may experience it less. Further research could explore the underlying factors influencing these perceptions and their implications for support and intervention strategies.

Disclosure of Interest: None Declared

Sleep Disorders and Stress

EPV1909

Association between Anxiety and Depression with Sleep Quality among Iraqi Polypharmacy Older Adults: A Cross-Sectional Study

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doi: 10.1192/j.eurpsy.2025.2323

Introduction: Many definitions have been proposed for polypharmacy, but the most common is the concurrent use of five or more medications. It is a growing concern among older adults and is associated with numerous adverse effects and drug-drug interactions. Beyond its impact on physical health, research suggests that polypharmacy may also affect mental health, which could potentially be linked to poor sleep quality.