

procedures but with a still high proportion looking forward to them in the future. Many of our patients lived in places far from our hospital.

Conclusions: We found a higher prevalence of FtM than MtF, which is in contrast with most studies in the field but similar to another Portuguese study. The high percentage of medical, specifically psychiatric comorbidities, enhances the importance of a mental health assessment and follow up in this population. A significant percentage of our patients came from cities far away reflecting the scarcity of specialized trans health care in our country. GD and GI diagnosis is increasing worldwide and the transition process is long and highly complex requiring a multidisciplinary team that can collaborate on a unique individual's care in a coordinated and safe way.

Disclosure of Interest: None Declared

EPP538

Autism and Sexuality: Breaking Taboos and Embracing Desires

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Introduction: Autism spectrum disorders (ASD) are a group of neurodevelopmental conditions characterized by impairments in social interaction, communication (both verbal and non-verbal), and repetitive behaviors. The global prevalence of ASD has increased significantly, with an estimated 28.3 million cases worldwide. Although many individuals with ASD have normal cognitive and language skills, difficulties with social interactions and understanding nonverbal cues can interfere with their ability to form romantic and sexual relationships, potentially leading to inappropriate behaviors and a distorted experience of sexuality.

Objectives: This paper aims to review the literature on sexuality in individuals with ASD, focusing on typical sexual behaviors, sexual preferences, as well as hypersexuality and paraphilic fantasies and behaviors within this population.

Methods: A non-systematic literature review was conducted, with article selection from PubMed using the keywords: "autism spectrum disorders", "sexuality", "hypersexuality" and "paraphilia".

Results: Studies have shown that adolescents with ASD experience higher rates of inappropriate sexual behaviors and gender dysphoria compared to neurotypical peers. Variants in sexual orientation, including homosexuality, asexuality, and bisexuality, are more prevalent in this population. Recent research indicates that sexual experiences, both alone and with others, are common among individuals with high-functioning ASD, with one study revealing that 47% expressed interest in having a romantic partner. Despite this, adults with ASD, especially men, are generally less likely to be in romantic relationships. They also exhibit more hypersexual and paraphilic fantasies and behaviors than neurotypical individuals. Hypersexual behaviors are predominantly observed among male ASD individuals, while paraphilias, such as voyeurism and fetishism, are frequently reported among both ASD men and women. Sadistic and masochistic fantasies and behaviors are also common in this group.

Conclusions: The results indicate that individuals with ASD have a higher prevalence of sexual orientation variants and inappropriate behaviors compared to their peers. Although they have sexual interests and desires for relationships, their ability to express sexuality in a healthy way is hindered by communication deficits, social interaction challenges, and an unsupportive environment, exacerbated by inadequate sexual education. These challenges prevent many from fully embracing their sexuality. Specialized, evidence-based sexual education addressing the unique needs of individuals with ASD is essential for promoting healthier sexual behaviors and improving psychosocial well-being.

Disclosure of Interest: None Declared

Women, Gender and Mental Health

EPP540

How elevated testosterone levels are responsible for frequent hospitalizations in female patients

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Introduction: Studies that have investigated the relationship between testosterone and psychiatric disorders in women report inconsistent results. Some studies suggesting that female depression patients have lower serum testosterone levels than healthy controls while others report higher serum testosterone levels in female depression patients. Testosterone has also been found to modulate depression and anxiety symptoms. Social research suggests high androgen levels cause aggressive behavior in men and women and as a consequence may cause depression and possible results with more often hospitalization.

Objectives: The purpose of this study was to determine whether there is a link between the intensity of psychological symptoms that required hospital psychiatric treatment and the level of testosterone in the blood.

Methods: The research is prospective and includes female patients with established diagnoses of depressive disorder, anxiety-depressive disorder, bipolar disorder (depressive episode) aged 18-65. The patients had their laboratory parameters determined, including sex hormones (testosterone, estrogen, progesterone, FSH, LH and prolactin), filled out a demographic questionnaire and questionnaires: The Suicide Behaviors Questionnaire-Revised (SBQ-R), Generalised Anxiety Disorder Assessment (GAD-7), Patient Health Questionnaire (PHQ-9), Beck Depression Inventory (BDI-II), Beck Anxiety Inventory (BAI), Matthey Generic Mood Question, Montgomery-Asberg Depression Rating Scale (MADRS), Hamilton Anxiety Rating Scale (HAMA) i Hamilton Depression Rating Scale (HAMD).

Results: The preliminary data of the prospective study showed that there was a statistically significant proportion of patients in whom

higher testosterone levels are linked with higher number of hospitalizations ($\rho=0.511$, $p=0.036$).

Conclusions: Preliminary results show an association between testosterone levels and frequent psychiatric hospitalizations.

Disclosure of Interest: None Declared

Addictive Disorders

EPP541

Social Media and E-Cigarette Use Among Adolescents and Young Adults: A Systematic Review of the Role of Influencers and Platforms in Promoting Vaping Culture

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Introduction: The widespread use of electronic cigarettes (e-cigarettes) among adolescents and young adults has become a significant public health concern. With the rise of social media, exposure to content promoting e-cigarette use, including endorsements by influencers, has become increasingly pervasive. This overlap between social media and vaping culture may contribute to the normalization and growing use of e-cigarettes among this vulnerable population.

Objectives: This article aims to systematically examine the influence of social media use and endorsements by influencers on e-cigarette use among adolescents and young adults, identifying patterns of exposure and consumption across various platforms and providing insights for future prevention and intervention strategies.

Methods: This systematic review aims to explore the impact of social media use and influencers on e-cigarette use among adolescents and young adults. A PRISMA model review was conducted across four databases: PubMed, Science Direct, Google Scholar, and Scopus. Medical Subject Heading (MeSH) terms and keywords (vape, e-cigarette, smoking, social media, influencer, adolescent) were used to search for full-text studies published in English from the last five years. The studies included focused on human subjects aged 10-21 and met predefined eligibility criteria.

Of the 1,064 articles initially identified, 37 were included after screening and removing duplicates.

Results: Thirty-seven articles met the eligibility criteria. The analysis focused on five key social media platforms: TikTok, Instagram, YouTube, Twitter, and Facebook. However, significant methodological limitations were noted in the studies.

Conclusions: The research highlights a strong link between social media use and youth e-cigarette consumption. Exposure to vaping content, ads, and peer influence on social media increases the risk, particularly among younger and vulnerable groups. Social media enables both direct marketing and peer-to-peer promotion. Stricter regulations on online ads and enhanced parental controls are necessary to mitigate these risks and reduce youth vaping rates.

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EPP542

PREDICTING RETURN TO USE FOR PEOPLE WITH SUBSTANCE ABUSE DISORDERS

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Introduction: Substance Use can be a lifelong issue. Recovery is not necessarily easy and not necessarily predictable. Treatment can be expensive and is potentially offset by other influences.

Objectives: We wanted to predict the likelihood of returning to use for Indigenous clients being treated for Substance Use Disorders in the United States.

Methods: We interviewed 35 people who had been diagnosed with a Substance Use Disorder and had been treated in a conventional detox program followed by 30 to 120 days of residential treatment. The participants were obtained by word of mouth referrals, posters and flyers announcing the study. We gathered their life stories using a modification of the Northwestern University Life Story Interview which we called the Maine Life Story Interview. We correlated elements from the life story with the likelihood of return to use. By virtue of where the authors worked (Clinics providing services to Indigenous people), all the clients were Indigenous, though we did not aim for that at the outset. Logistic regression methods were used to predict return to use.

Results: The combination of an ACE Score of 5 or greater, a history of substance use for 4 or more years, coupled with returning to the environment of the original substance abuse (physical and/or human) was associated with a 100% probability of return to use regardless of substance used and despite treatment received. With an ACE score of less than 5, the probability of return to use dropped to 80%. The length of treatment before returning to community did not matter. Adverse Childhood Events were measured using the ACE score and resilience was assessed using a qualitative rating that has been shown to be reliable. Logistic regression confirmed the above – that the most powerful predictors were returning to the community in which the abuse began and returning to the same social network of people who abused. These variables predicted 84% of the variance. Treatment type or duration did not emerge as significant.

Conclusions: For Indigenous clients, returning to the environment of substance abuse and to the people with whom substance have been used is a powerful factor that overrides the effects of treatment. The higher the ACE score, the more likely the return to use. The length of treatment (ranging from 10 to 130 days) did not seem to matter. Based upon this data, one could argue that treatment should take place in the community from which the person came and be oriented toward changing social networks and eliminating environmental cues. If this is not possible, returning to community appears fraught with peril, though inevitable for Indigenous people who need to come home again. Resilience was not a predictive factor once one had returned to the social and environmental locale of the original substance use.

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