[1]Psychiatry C and [2]Gynecology-Obstetrics Department, Hedi Chaker Hospital, Sfax, Tunisia
*Corresponding author.
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Introduction: Severe postpartum hemorrhage (PPH) is not only a major obstetric emergency but also a source of long-term psychological and relational difficulties. Both post-traumatic stress disorder (PTSD) and sexual dysfunction are frequent complications in this context, yet their interplay and underlying vulnerability factors remain underexplored. Trait anxiety, as a stable personality characteristic, may act as a key moderator influencing these outcomes.
Objectives: The objectives of this study were to evaluate sexual dysfunction and post-traumatic stress disorder (PTSD) in women who experienced severe postpartum hemorrhage (PPH), and to investigate the role of trait anxiety in this relationship.
Methods: A cross-sectional, descriptive, and analytical study was conducted between January and December 2024 among 49 participants who presented with severe PPH. These women had delivered between 2017 and 2023 at the Gynecology-Obstetrics Department of Hedi Chaker University Hospital in Sfax.
Sexual function was assessed using the Female Sexual Function Index (FSFI), with a threshold score ≤ 26.55 defining sexual dysfunction. PTSD was assessed using the Post-Traumatic Stress Disorder Checklist for DSM-5 (PCL-5), with a diagnostic threshold set at a total score ≥ 31. Trait anxiety was assessed using the Spielberger Trait Anxiety Inventory (STAI-Y).
Statistical analysis was performed using SPSS-26 software.
Results: The mean FSFI total score was 19.3 ± 8.15 (min = 0, max = 34.5), with a prevalence of sexual dysfunction in 79.6% (n=39) of participants.
The mean PCL-5 score was 31.81 ± 18.54 (min = 4, max = 71); 44.9% of participants (n = 22) met DSM-5 criteria for PTSD.
Trait anxiety was present in 51% of participants and showed a strong association with PTSD ($p < 0.001$); women with an anxious personality profile were significantly more likely to develop PTSD than non-anxious participants. Trait anxiety was also significantly associated with sexual dysfunction ($p = 0.031$) and remained independently associated after adjustment in multivariate analysis (adjusted OR = 5.75; 95% CI 1.08–30.72; $p = 0.041$), indicating that anxious personality traits contribute to impaired sexual function following severe PPH.
Conclusions: Trait anxiety was a significant moderator of PTSD and sexual dysfunction risk after severe PPH. These findings highlight the importance of systematic screening for anxiety traits to identify women at higher risk and guide targeted interventions to improve both psychological health and sexual well-being.

Disclosure of Interest: None Declared

EPP228

Association between Sexual Cognition and Sexual Dysfunction in Mexican Adult Women Survivors of Sexual Abuse

Y. S. Ramírez Ruz[1]*, L. Carrillo Ramírez[2] and I. Fernández Castillón[1]

[1]Psychiatry, Tecnológico de Monterrey, School of Medicine and Health Sciences and [2]Psychiatry, Mexican Social Security Institute (IMSS), Monterrey, Mexico
*Corresponding author.
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Introduction: Sexual abuse (SA) is a public health problem in Mexico, affecting 12.7% of women and associated with a high risk of female sexual dysfunction (FSD) present in 30-66% of cases. Beyond the biological, sexual cognition, defined as mental representations about sexuality, influences attitudes and sexual response. Its negative form may perpetuate dysfunction and psychological distress in cases of sexual abuse.
Objectives: To determine the association between sexual cognition and sexual dysfunction in adult female survivors of sexual abuse treated in a psychiatric hospital in Nuevo León, Mexico.
Methods: A cross-sectional, descriptive, and observational study was conducted between May and July 2024, with the participation of 50 women with a history of sexual abuse. Sociodemographic and clinical variables were collected, and six validated questionnaires were applied: Index of Female Sexual Function (IFSF), Arizona Sexual Experience Scale (ASEX), Female Sexual Self-Schema Scale (validated in Mexican population), PHQ-9, GAD-7, and PCL-5. Statistical analysis was done through descriptive, correlational and logistic regression models.
Results: The mean age of the participants was 29.4 years. Abuse onset occurred at a mean age of 15.5 years, with an estimated duration of 79.2 weeks; 70% of the women reported having suffered multiple episodes. The prevalence of FSD was 74% according to the IFSF and 50% according to the ASEX. A significant association was observed between negative sexual cognition and sexual dysfunction (ASEX, $p = 0.002$), which translated into a 6-fold increased risk of presenting FSD in women with negative sexual self-schemas (OR = 6.7; 95% CI: 1.9-23.3). A relationship was also observed between negative cognition and Post-Traumatic Stress Disorder ($p = 0.001$), while no associations were identified with depression, anxiety, sociodemographic factors, or the type or frequency of abuse.
Conclusions: A high prevalence of FSD was found in women with a history of sexual abuse, associated with negative sexual cognitions, independently of sociodemographic variables. This suggests that psychological factors, such as beliefs about sexuality, play a key role in dysfunction. This reflects the need for interventions focused on cognitive restructuring and comprehensive sexuality education to improve sexual health and quality of life in this vulnerable population.

Disclosure of Interest: None Declared

EPP229

Ghosting sexuality: A qualitative study on sexual interest among young adults

S. von Humboldt[1]*, G. Low[2] and I. Leal[1]

[1]William James Center for Research, ISPA – Instituto Universitário, Lisbon, Portugal and [2]Faculty of Nursing, International Health Research, MacEwan University, Edmonton, AB, Canada
*Corresponding author.
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Introduction: The decline in sexual interest among young adults is a growing phenomenon with profound implications for their relationships, mental health, and overall well-being.

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Objectives: This qualitative study aims to: (a) investigate how young adults emotionally experience changes in sexual interest and (b) examine the link between sexual interest and mental health.
Methods: A total of 651 individuals aged between 18 and 30 years (M = 25.2; SD = 2.47), representing Portuguese, Brazilian, and English nationalities, participated in this study. Data were collected through in-depth semi-structured interviews and examined using content analysis.
Results: For the first objective, eight themes emerged: Reduced face-to-face interaction (87.7%); Challenges in navigating online dating (82.3%); Negative past sexual encounters (77.1%); Sexual initiation at an early age (73.0%); Negative body image perceptions (68.2%); Frequent engagement with social media (66.8%); Consumption of pornographic content (57.3%); and Digital exhaustion from remote work (55.8%). For the second objective, four themes highlighted: Increased stress levels (92.5%); Presence of depressive symptoms (88.6%); Experience of social anxiety (79.7%); and Emergence of dependency patterns (71.7%). Portuguese participants emphasized difficulties related to reduced face-to-face interactions and stress, while Brazilian participants emphasized online-related challenges and social anxiety. In contrast, English participants highlighted the impact of past experiences and social anxiety, reflecting distinct cultural influences on both sexual desire and mental health.
Conclusions: This study uncovers how intertwined social, digital, and emotional elements contribute to reduced sexual interest in young adults. Addressing emerging mental health concerns and evolving social expectations is crucial for promoting healthier relationships and overall well-being in this demographic.
Keywords: Mental health; qualitative study; sexual interest; sexual well-being; young adults.

Disclosure of Interest: None Declared

Women, Gender and Mental Health

EPP231

Intimate Partner Violence: A form of Trauma-Coerced Attachment?

D. Agius* and D. Vella Fondacaro

Department of Psychiatry, University of Malta, Msida, Malta
*Corresponding author.
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Introduction: Intimate partner violence (IPV) remains a significant public health and legal concern, particularly in Malta, where rates of gender-based violence and femicide are alarming. Victims may withdraw police reports, minimise the threat they face, or defend their abusers—even after seeking help. These behaviours are often misunderstood as ambivalence or consent. Emerging literature suggests they may reflect a complex psychological phenomenon known as trauma-coerced attachment: a pathological bond formed under conditions of fear, coercion, and control. Over time, psychological boundaries may erode, contributing to identity disturbance consistent with the dissociative category of "prolonged and intense coercive persuasion" described in DSM-5 under OSDD.
Objectives: This study explores how pathological emotional bonds may develop between victims and perpetrators of IPV, and how such connections influence self-perception, cognitive dissonance, and emotionally conflicted decision-making. It aims to understand survivors' psychological experiences in depth—regardless of alignment with existing trauma models—toward developing more trauma-informed approaches in clinical and legal contexts.
Methods: This qualitative study involves semi-structured interviews with adult female participants (18+) who experienced IPV and exited the relationship at least six months prior. Interviews are conducted in Maltese or English, lasting 60–90 minutes. Participants are recruited via Victim Support Agency (VSA), a local NGO. All interviews are audio-recorded with consent, anonymised, and analysed thematically. While interviews may be transcribed in either language, the full analysis and write-up are conducted in English. Data is processed in accordance with GDPR, and psychological support is offered throughout.
Results: The study is currently in the data collection phase. Thematic analysis will explore how participants describe identity shifts, emotional dependency, ambivalence, and interpretations of their experience post-abuse. Particular focus is given to decisions to stay or leave, internalised coercion, and evolving self-concept. Although frameworks like trauma-coerced attachment and OSDD inform the study, analysis remains exploratory. Regardless of alignment, findings are expected to enhance our understanding of survivors' psychological responses to IPV.
Conclusions: Findings are expected to deepen insight into how survivors interpret and reconstruct their experience following coercive relationships. This knowledge may support more accurate and compassionate approaches in psychiatry, victim advocacy, and legal interpretation—particularly in cases where behaviour is misjudged as inconsistent or contradictory.

Disclosure of Interest: None Declared

EPP232

A Women-Centred Approach: Development of a Randomized Controlled Trial Evaluating the efficacy of a Human-Supported Online Intervention for Depression and the Metabolic Signature of Personalized Treatment Response

N. Angarita Osorio[1]*, N. Núñez Pazmiño[1], A. García Estela[1], L. Terraneo[2], O. Pozo[1] and F. Colom[1]

[1]Hospital del Mar Research Institute, Barcelona, Spain and [2]Università degli studi dell'insubria, Varese, Italy
*Corresponding author.
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Introduction: Depressive disorders disproportionately affect women, who experience distinct biological and sociocultural risk factors that contribute to differential symptom profiles and disparities in treatment access and outcomes. Current interventions often lack gender sensitivity and personalization.
Objectives: This study aims to evaluate the efficacy of the 3D Program, a human-supported, internet-based cognitive behavioral therapy (iCBT) intervention tailored for women with mild to moderate depressive symptoms, and to explore metabolic biomarkers associated with treatment response.
Methods: In a single-blind, randomized controlled trial, 120 women aged 18 to 45 years will be allocated to either the 10-week 3D Program or psychoeducational video condition. Both groups