EPV1616

Sexuality and Treatment Adherence in Depressed Patients Treated with Antidepressants: A Cross-Sectional Study

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doi: 10.1192/j.eurpsy.2026.12106

Introduction: Sexual dysfunction is a frequent adverse effect of antidepressants, particularly selective serotonin reuptake inhibitors (SSRIs) and serotonin-norepinephrine reuptake inhibitors (SNRIs). It is often underestimated and may compromise treatment adherence. Few studies have examined both its prevalence and its impact on adherence in depressed patients.
Objectives: To assess the prevalence of sexual dysfunction in patients treated with antidepressants and to analyze its relationship with treatment adherence, with a focus on differences between drug classes.
Methods: We conducted a descriptive and analytical cross-sectional study over one month including 100 psychiatric outpatients aged 18–65 years, diagnosed with a major depressive episode, and treated with antidepressants for at least four weeks. Patients with a history of sexual dysfunction, severe somatic comorbidities, or psychoactive substance use affecting sexuality were excluded. Sexual function was assessed using the Arizona Sexual Experience Scale (ASEX), adherence with the Morisky Medication Adherence Scale (MMAS-8), and depression severity with the Montgomery–Åsberg Depression Rating Scale (MADRS).
Results: The sample included 60 women and 40 men, with a mean age of 38.5 ± 12.2 years. Treatments were mainly SSRIs (65%), followed by SNRIs (25%) and other antidepressants (10%).
The overall prevalence of sexual dysfunction was 42%, mainly affecting orgasm (50%), sexual satisfaction (48%), and desire (45%). The mean ASEX score was 19.0 ± 5.2.
Treatment adherence, assessed by the MMAS-8, was insufficient in 35% of patients. Sexual dysfunction was significantly associated with poorer adherence (55% vs 22%, $p < 0.01$). A negative correlation was found between ASEX and MMAS-8 scores ($r = -0.42$, $p < 0.01$), indicating that greater severity of sexual dysfunction was linked to lower adherence.
Sexual dysfunction prevalence varied according to drug class: 50% with SSRIs, 44% with SNRIs, and only 10% with bupropion/mirtazapine ($p < 0.01$). Adherence followed the same trend, with poorer adherence under SSRIs (40%) and SNRIs (36%) compared with atypical antidepressants (10%).
Conclusions: Sexual dysfunction is common among patients receiving antidepressants and is strongly associated with non-adherence, particularly under SSRIs and SNRIs. Routine screening and appropriate management are essential to improve adherence and optimize depression outcomes.

Disclosure of Interest: None Declared

Sleep Disorders and Stress

EPV1617

Perceived Stress, Risk Factors, and Learning Challenges among Nursing Students

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doi: 10.1192/j.eurpsy.2026.12105

Introduction: The demanding academic environment is a potential source of stress for nursing students, and the inability to cope effectively often exacerbates this burden.
Objectives: To assess the level of perceived stress among nursing students, identify its risk factors and manifestations, and evaluate its impact on their learning.
Methods: A descriptive cross-sectional study was conducted among students at a private nursing institute in Sousse, using a questionnaire administered between February and March 2023. Perceived stress was measured using the Perceived Stress Scale (PSS).
Results: The study population was predominantly female (75.7%) with a sex ratio of 0.32. The mean age was 21.5 years, and second-year students represented 66.7% of the sample. The average perceived stress score was 27.21 ± 5.71 (range: 18–35). Nearly two-thirds of participants (60.7%) experienced persistent stress (score > 26). The main stressors related to theoretical learning were examinations (36.7%) and the need to adapt to new academic demands and heavy workloads (36.3%). Regarding clinical learning, the most frequently reported stressors were fear of failure (65.7%) and deteriorating clinical training conditions (52%). Somatic manifestations included sleep disturbances (72.3%) and headaches (72%). Psychological manifestations included decreased motivation (72%) and mood instability (65%). Stress negatively impacted learning, as 88% of students reported increased delays and absenteeism from classes and internships, while 66% indicated difficulty in understanding courses, case studies, and clinical activities when stressed. Suggested coping strategies included systematic screening (66.7%) and stress management training (64%).
Conclusions: The moderate stress levels reported by nursing students highlight the need for structured stress management programs and appropriate support systems. As future healthcare providers, early interventions during academic training and clinical practice are essential to reduce stress and strengthen coping abilities.

Disclosure of Interest: None Declared

EPV1618

Perceived stress and high-sensitivity C-reactive protein among healthcare workers: A cross-sectional analysis

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