EPV1878

Pedophilic Disorder and Suicide Risk: Understanding the Intersection

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doi: 10.1192/j.eurpsy.2025.2299

Introduction: Pedophilic disorder is characterised by a sustained, focused, and intense pattern of sexual arousal involving prepubertal children. In addition, the individual must have acted on these thoughts, fantasies or urges or be markedly distressed by them (ICD - 11).
Beyond its obvious ethical and legal implications, this disorder is often associated with substantial mental health comorbidities, including depression, anxiety, and substance abuse. One particularly alarming yet understudied aspect is the elevated risk of suicidal ideation and behavior among individuals diagnosed with pedophilic disorder. The intersection between pedophilic disorder and suicide risk is critical to understand, as it can inform the development of more effective intervention strategies and support systems.
Objectives: The present review aims to explore the intersection between pedophilic disorder and suicide risk, shedding light on the psychological factors that contribute to suicidal ideation and behavior among individuals with this disorder, including those who have never sexually engaged with children.
Methods: PubMed, Web of Science and Google Scholar were searched using the following keywords "pedophilic disorder", "suicide risk", "suicidal ideation", and "stigma". Articles published within the last decade were included.
Results: The review showed several risk factors, perhaps the most significant being the psychosocial effects of the intense stigma, social isolation, and internalized shame. Other risk factors are prior mental health treatment, weaker attraction to adult women, history of sexual abuse, young age, less education, and additionally, the lack of access to appropriate mental health services.
The relationship between these individuals' emotional distress and their likelihood of sexually engaging with a child is not known, but there is evidence that impulse control is compromised by negative affect. Moreover, literature posits that stigma raises the risk of sexual activity with children via disturbances in emotional, social, cognitive, and health service utilization domains.
Conclusions: It is evident that this population faces unique challenges that require specialized attention and addressing this intersection necessitates a comprehensive approach.
Strategies aimed at reducing stigma, promoting social support, enhancing access to mental health services and fostering supportive environments have the potential to mitigate suicidal risk factors and enhance overall well-being. Furthermore, efforts to destigmatize help-seeking behaviors and improve access to confidential and non-judgmental support services are crucial in reducing the incidence of suicide and promote mental health among this population.

Disclosure of Interest: None Declared

EPV1879

Experiencing sexuality in the perinatal period: what are the challenges?

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doi: 10.1192/j.eurpsy.2025.2300

Introduction: The perinatal period, encompassing pregnancy and the first postpartum year, is a transformative phase in a woman's life. It involves profound physical, psychological, social, and emotional changes that can significantly impact sexual experiences.
Objectives: The purpose of this work is to address the challenges of experiencing sexuality during the perinatal period.
Methods: Evidence-based review, through research conducted on PubMed and selection of the most relevant studies, published in the last decade, using the keywords: "Sexuality" and "Perinatal period".
Results: Hormonal fluctuations, physical discomfort, and body image changes during pregnancy can significantly affect sexual desire and satisfaction. By the third trimester, between 83 to 100% of first-time mothers report a decrease in sexual activity. Recent studies indicate that this trend continues into the first postpartum year, with over 60% reporting decreased sexual activity. Postpartum challenges, such as physical recovery, breastfeeding, and fatigue further complicate sexual intimacy. The anticipation of parenthood and shifts in relationship dynamics also play a significant role. Societal pressures and cultural norms regarding sexuality in the perinatal period can influence personal experiences and expectations, and contribute to communication barriers between partners regarding sexual needs and concerns.
Conclusions: The perinatal period presents unique challenges to sexual health and intimacy. A holistic perinatal care, incorporating comprehensive sexual health education and promoting open communication between partners are crucial for addressing these challenges effectively.

Disclosure of Interest: None Declared

EPV1880

The unspoken aspect of dementia care: sexuality

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doi: 10.1192/j.eurpsy.2025.2301

Introduction: Sexuality, although an essential component of human health, remains a controversial topic, shrouded in stigma, particularly in the context of dementia, where the expression of sexuality presents unique challenges.
Objectives: The main objective of this work is to address the complexity of the biopsychosocial components of sexuality in patients with dementia, promoting a change in medical perspective and social attitudes.

https://doi.org/10.1192/j.eurpsy.2025.2299 Published online by Cambridge University Press