Conclusions: Infertility can interfere negatively in women sexuality. The investigation of sexual difficulties in infertility consultations must be systematic.

Keywords: sexuality; infertility; woman; Dysfonction

EPP1282

Improving contraceptive and family planning awareness on a perinatal inpatient unit

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Introduction: Unplanned pregnancies are a significant risk factor in perinatal mental health. They also have the potential to result in adverse health impacts for mother, baby and children into later in life. Women from disadvantaged backgrounds are less likely to access contraception. Women are more likely to on board health advice during pregnancy and post partum period due to high level of surveillance by health professionals.
Objectives: Our aim was for 90% of patients on Coombe Wood Mother and Baby Unit (MBU) to feel supported to make an informed decision about their contraception by October 2020.
Methods: A questionnaire was completed by fifteen inpatients at the Mother and Baby Unit over a 4 month period (April- August 2020) to assess areas around their pregnancy and contraceptives of choice. Contraceptive training was provided by a Sexual Health Specialist to staff across multiple disciplinaries on Coombe Wood MBU. Sexual Health discussion groups were delivered by doctors to inpatients on a monthly basis. A post-intervention questionnaire was given to patients.
Results: •53% of patients reported unplanned pregnancies. •40% of women felt lacking confidence in choosing the right contraceptive •The most frequent question asked during the sexual health groups was regarding hormonal contraceptives impacting on mental health. •By September 100% of patients felt they were able to make an informed decision about their contraception on discharge.
Conclusions: Facilitating women to make informed decisions regarding their contraception empowers them to gain autonomy, reduces the risks of physical and mental illness, improves the quality of life for mothers and babies.

Keywords: sexual health; Contraception; Perinatal Psychiatry; Perinatal Mental Health

EPP1283

The importance of mental and sexual health in addressing people with hiv - the double stigma

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Introduction: Having a mental disorder is associated with increased vulnerability to the transmission of the Human Immunodeficiency Virus (HIV) and the prevalence of HIV is higher in people with a severe mental disorder. People with psychiatric comorbidities such as bipolar affective disorder and depressive disorder, post-traumatic stress disorder (physical or sexual abuse) and/or psychoactive substance use have a higher risk of HIV infection.
Objectives: This work is intended to expose the importance of integrating mental health care with the care of HIV patients.
Methods: The authors conducted a non-systematic review of the literature, conducting research through Pubmed and Medscape using the keywords 'Preexposure prophylaxis', 'HIV', 'Mental health problems'.
Results: Several factors may contribute to the high comorbidity between HIV and Mental Disorders, including socio-demographic factors, weak social and environmental structures, as well as internalized stigma, social and experienced discrimination. Mental health problems may interfere with the care needed for prevention, including regular HIV testing and/or adherence to Preexposure Prophylaxis (PrEP); and influence access to and adherence to antiretroviral treatment.
Conclusions: This compelling evidence makes the necessary contribution of integrating mental health into an assessment and continuous treatment of the HIV patient, on the other hand, the assessment and treatment of mental disorders should address sexual health.

Keywords: Preexposure prophylaxis; HIV; Mental health problems; sexual health

EPP1284

Sexual function assessment in men with PTSD

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Introduction: Exposure to extreme traumatic events can lead to post-traumatic stress disorder (PTSD). This disorder affects emotional, social and professional functioning. Recent studies suggest that it can lead to sexual dysfunction.
Objectives: The aim of this study is to compare the level of sexual dysfunction between men with PTSD and control subjects.
Methods: A total of 30 male PTSD patients and 30 controls were included in this study. We used the Post-Traumatic Stress Disorder Check Scale (PCLS) to assess the intensity of PTSD symptoms and the International Erectile Function Index (IIEF15) to assess sexual dysfunction of both patients and controls.
Results: The mean IIEF-15 score was 51.16 ± 6.82 in patients followed for PTSD versus 77.33 ± 2.02 in healthy controls with a non-significant difference ($p = 0.26$). Three patients (10%) had an alteration of desire while the control reported only dysfunction but there was no significant difference between the mean scores of IIEF-SD ($p = 0.22$). No patient or control had erectile dysfunction and there was no significant difference between the IIEF-EF sub-scores in the 2 groups ($p = 0.20$). The mean sexual intercourse satisfaction (SD) score in the patients was 5.13 ± 1.10 versus 8.86 ± 0.40 with a non-significant difference ($p = 0.09$). Altered satisfaction with intercourse was noted in 15% ($n = 5$) of subjects with PTSD versus a single control.
Conclusions: It is important that practitioners address the subject of sexuality in patients followed for PTSD and refer their patients, if necessary, to a sexology consultation.

Keywords: SEXUAL FUNCTION; ptsd

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