Objectives: To explore the prevalence of SH among medical trainees in Sfax, Tunisia.
To evaluate the consequences of SH on this group and factors related to SH.
Methods: We conducted a cross-sectional and descriptive study involving medical residents and interns working in hospitals in Sfax. Data were collected using an anonymous self-questionnaire. This questionnaire was published on social media during January and February 2024. It included sociodemographic characteristics, psychiatric and medical history, psychoactive substance use, professional data, information related to sexual life and experiences related SH.
Results: We collected 141 responses, of which 19.9% declined to participate in this study.
Finally, a total of 113 participants, with an average age of 27.92 years, were recruited. The sex ratio (M/F) was equal to 0.54. In our population, 20.4% were interns. Among the participants, 68.1% were single, 91.2% were from urban backgrounds and 12.4% had psychiatric follow-up. Among the participants, 41.6% reported experiencing sexual harassment during their practice at the hospitals in Sfax. The most common form self-reported as harassment was verbal harassment (43.3%).
In our study, most victims of sexual harassment (SH) tried to ignore (36.2%) and avoid (34%) the harasser. Some participants noted that they were afraid of career repercussions.
Regarding the consequences of SH, sleep disorders and the feeling of burnout were the most frequently reported medical effects, with a prevalence of 10.6% in both cases. Additionally, the onset or increase in tobacco consumption (8%) was the most commonly reported addictive consequence.
On a sexual level, 16 participants (14.2%) reported experiencing negative impacts on their sexuality. Sexual desire disorders (8.8%) were the most frequently reported sexual consequences, followed by a decrease in sexual satisfaction (2.7%).
In our survey, SH was statistically more prevalent among female participants ($p < 0.001$) and among participants with a low or middle socioeconomic status ($p = 0.036$).
Conclusions: These results highlight the urgent need for hospitals to implement preventive measures, support victims, and promote a safer working environment for medical trainees.

Disclosure of Interest: None Declared

EPV1868

Mental health status among physiotherapists. A cross-sectional study in Tunisia

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Introduction: In the high-stress world of healthcare, the intertwined relationship mental health and the life quality is pivotal. Prioritizing healthcare professionals' mental health and nurturing a positive safety climate are essential to enhancing overall job satisfaction.
Objectives: Evaluate the mental health status of the physiotherapists.
Methods: his is a cross-sectional study among Physiotherapists (PTs) working in the city of Sousse. A self-administrated questionnaire was distributed either manually or via e-mail to collect information about the personal and occupational history of participants. The mentel health was assesed by the the mental component score (MCS-12) of the the Short Form Survey SF-12.
Results: A total of 93 questionnaires were collected. The PTs were 35±8 years old on average. Women made up 65.6% of the PTs. Sixty-six (71.7%) and sixty-two (67.4%) did not provide any medical or surgical history respectively and the majority of the population (54.5%) had a normal BMI. Among all respondents, nineteen (20.4%) PTs were regular smokers and an alcoholic beverage was consumed by 14 (15.7%) PTs. The sport was the common hobby of PTs (53.8%). In this group of PTs, 37 (40.2%) worked in the public sector, and 55 (59.8%) worked in the private sector. The mean seniority was 11.9±7.8 years and the average workweek for the population was 42.42 hours. The mean MCS-12 score was 43.94 (9.05 SD). The findings showed that 35 PTs (37.6%) had MCS-12 scores below the standard value. Male PTs showed slightly higher MCS-12 means than female PTs with a modest difference between PTs working in the public and private sectors. PTs who had more than 15 years of work experience scored the lowest MCS-12 mean 41.40 (SD 9.94) which is a score underneath the reference value indicating in this case low mental health functioning among PTs.
Conclusions: This study showed that Tunisian PTs had low mental health statuts highlighting the need for approaches to improve interventions that effectively enhance well-being, retention, and sustainability of practitioners, and thus the care delivered, in the healthcare system

Disclosure of Interest: None Declared

EPV1869

Prevalence and factors associated with erectile dysfunction in hemodialysis patients: cross-sectional study

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Introduction: Hemodialysis, although crucial for maintaining the survival of patients suffering from end-stage renal disease, can have severe repercussions on patients' overall quality of life and sexuality.
Objectives: To determine the prevalence and factors associated with sexual dysfunction in hemodialysis patients.
Methods: This is a multicenter, descriptive, cross-sectional study with analytical aims, conducted at 3 hemodialysis units (the Mahmoud El Matri Hospital in Ariana, the El Manzah private hemodialysis center and the El Omrane polyclinic) over a 5-month period (August-December 2023). Patients' sexual dysfunction was assessed using the IIEF5 scale.

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Results: Our study population comprised 73 patients. Patient ages ranged from 25 to 86 years, with a median age of 56.87 years. Twenty-eight subjects (38.4%) were between 56 and 70 years of age. Sixty patients (82.2%) were married, with 68 living with relatives. Regarding anamnestic data, organic comorbidity was found in all patients with diabetes in 67.1% and arterial hypertension in 50.7% of cases. The median duration of hemodialysis was 48 months. The frequency of hemodialysis sessions was 3 per week in 69 patients (94.5%).
Erectile dysfunction was diagnosed in 64 patients, corresponding to a prevalence of 87.7%. The dysfunction was mild in 24.7% of cases, moderate in 45.2% and severe in 17.8%.
Erectile dysfunction was significantly correlated with age over 55 with an adjusted OR = 2.43 and the presence of diabetes with an adjusted OR = 1.5.
Conclusions: The prevalence of erectile dysfunction is high in hemodialysis patients. A systematic sexological approach is needed to ensure early and appropriate management.

Disclosure of Interest: None Declared

EPV1870

Study on the Sexuality of Tunisian Women with Systemic Lupus Erythematosus

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Introduction: Systemic Lupus Erythematosus (SLE) is a systemic disease that can significantly impact women's lives. Female sexual function is one of the underestimated areas, and few studies have focused on sexual dysfunctions in women with SLE.
Objectives: To study the sexuality of patients with SLE, the factors associated with it, and the relationship with the disease activity stage.
Methods: A descriptive and analytical cross-sectional study was conducted with 38 patients with SLE followed in the internal medicine department at Hedi Chaker University Hospital, Sfax, over a period of 3 months from September to November 2023. We used:
A socio-demographic and clinical data sheet, and the SLEDAI scale for assessing disease activity criteria.
The Female Sexual Function Index (FSFI) scale to study sexuality over the past 4 weeks.
Results: The average age of the patients was 46.63 ± 10.21 years. Among them, 36 were married, and 44.7% had medical-surgical history.
The average age at SLE diagnosis was 37.11, with an average disease duration of 8.95 years. The mean SLEDAI score was 3.63. Absent to moderate activity was present in 92.1% of cases, and high activity in 7.9%.
Photosensitivity was noted in 36.8%, joint involvement in 63.2%, and anemia in 52.6%. Among the patients, 86.8% were on corticosteroids and 26.3% on immunosuppressants.
The average age of onset for sexual difficulties (SD) was 37.28 years, with an average delay of 3.05 years from disease onset.
According to FSFI: the mean score was 58.38 ± 23.412 [2 - 93]. A decrease in overall sexuality was noted in 44.7%, desire in 63.2%, satisfaction in 57.9%, arousal in 52.6%, and lubrication in 39.5%.
The factors correlated with different FSFI domains were:Desire: associated with medical-surgical history (P=0.001), photosensitivity (P=0.028), and anemia (P=0.003). Sexual satisfaction: associated with medical-surgical history (P=0.011), joint involvement (P=0.034). Arousal: associated with medical-surgical history (P=0.01) and anemia (P=0.004).
There were no statistically significant correlations between the disease activity stage and the different FSFI domains. However, the onset of SD was shortened if use of corticosteroid (P=0.005) or immunosuppressive treatment (P=0.038).
Conclusions: Our results indicate that SLE can impair sexuality in various domains, especially if associated pathologies are present. Therefore, special attention should be given to the sexual function of patients with lupus.

Disclosure of Interest: None Declared

EPV1871

Erectile Dysfunction in Tunisian Veterans: Clinical and Psychological Insights

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Introduction: Erectile dysfunction (ED) is a multifactorial condition affecting a significant propotion of men worldwide, impacting their mental well-being, life quality and interpersonal relationships. Often associated with various underlying factors, ED manifests differently in each individual, yet there is a limited understanding of the unique profiles of specific populations, such as military veterans, who may face distinct physical, psychological and social challenges contributing to the condition.
Objectives: This study aimed to explore the clinical profile, demographic factors, and associated comorbidities of Tunisian military veterans affected by ED.
Methods: A cross-sectional descriptive survey was conducted between September and November 2024 on Tunisian veterans seeking consult, using a data file and 2 self-report scales:
The Hospital Anxiety and Depression (HAD) scale, consisting of two subscales: Anxiety (A) and Depression (D), dividing patients into: normal[0-7], borderline case[8-10], an abnormal level of anxiety or depression[11-21].
The IIEF-5 (International Index of Erectile Function 5) to evaluate ED with six categories: [1-4]: uninterpretable, [5-7]: severe, [8-11]: moderate, [12-16]: mild to moderate, [17-21]: mild and [22-25]: no ED.
Results: The study enrolled 28 veterans diagnosed with ED, with an average age of 40 [25-61] years. Most (78.6%) were married while 17.9% were single and 3.6% were divorced.
Smoking was prevalent in 82.1% and 21.4% reported alcohol consumption, with 83.3% drinking occasionally and 16.6% drinking regularly. None reported using cannabis or other illicit drugs.
Regarding medical history, 39.3% had medical health conditions including varicocele, diabetes, combined arterial hypertension and diabetes, myocardial infarction and other health issues.
Psychiatric follow-up was reported by 85.7% of the individuals.
Anxiety symptoms were present in 89.3% of participants with 3.6% classified as borderline cases. Depressive symptoms were reported by 67.9% with 21.4% categorized as borderline symptoms.