*Disclosure of interest* The authors have not supplied their declaration of competing interest.

http://dx.doi.org/10.1016/j.eurpsy.2017.02.126

### e-Poster Walk: Sexual medicine and mental health/sleep disorders and stress/eating disorders

#### EW0513

## Dyspareunia after childbirth: Does psychosocial context play a role?

A. Hajri <sup>1</sup>, Y. Zgueb <sup>1</sup>, M.W. Abdallah <sup>2</sup>, U. Ouali <sup>1,\*</sup>, S. Ben Alaya <sup>1</sup>, D. Chelli <sup>2</sup>, F. Nacef <sup>1</sup>

- <sup>1</sup> Razi hospital, psychiatry A, Manouba, Tunisia
- <sup>2</sup> Center of maternity and neonatology, gynecology and obstetrics A, Tunis, Tunisia
- \* Corresponding author.

Introduction Dyspareunia is defined as persistent or recurrent genital pain that occurs just before, during or after intercourse. Dyspareunia after childbirth is quite common and have a range of repercussions to women's lives, including their sexual functioning. It could be affected by different risk factors. While role of obstetric factors including mode of delivery has been largely investigated, the influence of psychosocial factors remains unclear.

Aims Our purpose was to determine frequency of postpartum dyspareunia and identify related psychosocial factors.

Methods Thirty women between 2 and 6 months postpartum were recruited in consultation of maternity and neonatology center of Tunis. Data were taken from medical file and questionnaire designed to record psychosocial data and postpartum sexual function.

Results The mean age of women was  $28.74 \pm 8.4$  years. Dyspareunia was reported by 43.33% of women. Dyspare-unia was not associated to professional status. On the other hand, dyspare-unia was significantly associated to fatigue (P=0.024), lack of familial support (P=0.03), conjugal conflicts (P=0.01).

Conclusion We have found an association between dyspareunia after childbirth and several psychosocial factors, pointing out the influence of social and psychological aspects in the sexual function in women. Thus, management of sexual disorders should take in consideration psychological dimension and involve an appropriate psychological care.

*Disclosure of interest* The authors have not supplied their declaration of competing interest.

http://dx.doi.org/10.1016/j.eurpsy.2017.02.127

#### EW0514

# Self-image and risk of suicide in eating disorders

A. Birgegård\*, M. Andersen

Karolinska Institute, Department of Clinical Neuroscience, Stockholm, Sweden

\* Corresponding author.

Introduction Suicide risk is increased in eating disorders (ED), and detection is key to prevention. Self-image as operationalized in the structural analysis of social behavior (SASB) model has been shown to be associated with symptoms, treatment dropout, and outcome. SASB is a circumplex organizing self-directed behaviors along affiliation (love vs. hate) and autonomy (set free vs. control) dimensions. In a recent study, SASB related to health care-detected suicide attempts in ED. Methodology in that study ensured high specificity but risked lower sensitivity in suicide variables, and with

such a high-threat outcome, research is needed on additional variables related to risk.

*Objectives and aims* We aimed to study associations between SASB self-image and clinician- and self-rated suicidality at presentation and predicted over 12 months in ED patients.

Methods Adult patients (n=551) from a Swedish clinical database included 19% anorexia, 32% bulimia, 7% binge ED, and 42% other ED. We ran separate regression models for these diagnostic groups using SASB questionnaire data, also controlling for general psychiatric and ED symptoms, and in longitudinal models including baseline of each outcome.

Results SASB alone was associated with suicidality at presentation (9–67% variance explained) and predictively over 12 months (7–29%), and in the majority of models explained additional variance beyond baseline and clinical variables. Both affiliation and autonomy related to dependent variables in diagnosis-specific patterns.

Conclusions The findings have implications for both theory and detection tools for suicide risk, as well as suggesting intervention targets to mitigate risk in treatment based on the well-validated SASB theory.

*Disclosure of interest* The authors have not supplied their declaration of competing interest.

http://dx.doi.org/10.1016/j.eurpsy.2017.02.128

#### EW0515

### Rosa Damascena improved sexual dysfunction in males under methadone treatment – results from a double-blind, randomized, placebo-controlled clinical trial

V. Farnia<sup>1</sup>, F. Tatari<sup>1</sup>, M. Alikhani<sup>1</sup>, J. Shakeri<sup>1</sup>, M. Taghizadeh<sup>2</sup>, V.T. Ngo<sup>3</sup>, D. Sadeghi Bahmani<sup>3</sup>, E. Holsboer-Trachsler<sup>3</sup>, S. Brand<sup>4</sup>,\*

- <sup>1</sup> Kermanshah University of Medical Sciences, Substance Abuse Prevention Research Center, Psychiatry Department, Kermanshah, Iran
- <sup>2</sup> Kashan University of Medical Sciences, Research Center for Biochemistry and Nutrition in Metabolic Diseases, Kashan, Iran
- <sup>3</sup> Psychiatric Clinics of the University of Basel, Center for Affective, Stress and Sleep Disorders, Basel, Switzerland
- <sup>4</sup> Psychiatric University Hospital, Center for Affective, Stress and Sleep Disorders, Basel, Switzerland
- \* Corresponding author.

Introduction Patients with severe opioid dependency might be treated with methadone, a pure  $\mu$ -opioid-receptor, with promising results. Though, as for opioids, side effects are high, and among those, sexual dysfunction is among the most disturbing side effects. Aims Investigating the influence of Rosa Damascena oil to improve sexual dysfunction among male methadone users.

Methods A total of 60 male patients (mean age: 30 years) with diagnosed opioid dependence and currently under treatment of methadone were randomly assigned either to the verum (Rosa Damascenca oil drops) or placebo condition. At baseline, and four and eight weeks later, patients completed self-rating questionnaires covering sexual dysfunction and happiness.

*Results* Over time sexual dysfunction decreased and happiness increased in the verum, but not in the placebo condition.

Conclusions Results from this double blind, randomized, and placebo-controlled clinical trial showed that Rosa Damascena oil improved sexual dysfunction and happiness among male opioid addicts while under substitution treatment with methadone.

*Disclosure of interest* The authors have not supplied their declaration of competing interest.

http://dx.doi.org/10.1016/j.eurpsy.2017.02.129