Conclusions: We have identified through this study different beliefs about sexuality during pregnancy, sometimes aberrant and which can affect the sexuality of couples. Attention of health professionals should be attracted to this issue and sexuality should definitely be integrated into prenatal care and counselling.

Disclosure of Interest: None Declared

EPP1065

Clinical characteristics of chemsex users attended in a ngo in madrid

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Introduction: The intentional use of drugs before or during sexual intercourse (chemsex) is a phenomenon of special importance in the MSM (men who have sex with men) population due to its impact on mental, physical and sexual health.

Objectives: The objective of this study was to describe the sociodemographic and medical characteristics, psychoactive substances use of a sample of users with sexualized drug use (chemsex) attended by the non-govenrmental organization Apoyo Positivo in the program "Sex, Drugs and You".

Methods: A cross-sectional descriptive analysis of a sample of users attended by the non-govenrmental organization Apoyo Positivo in the program "Sex, Drugs and You" was performed.

Results: 230 participants were included. Most common drugs used during sexual intercourse were: mephedrone, cocaine, poppers, GHB and methamphetamine. The frequencies of substances consumed during sex were: mephedrone (95%), methamphetamine (80%), GHB (92.2%), ketamine (52%), poppers (alkyl nitrites) (95%), cocaine (89 .7%), speed (amphetamine sulfate) (49.6%) and drugs for erectile dysfunction (86%). 61.3% reported having practiced slamsex intravenous substance use at some time in their life, being a habitual practice at the time of collecting information for 50.7%. The most frequent genitally transmitted infections were: syphilis, chlamydia and gonorrhea. Users reported having been diagnosed with the following genitally transmitted infections: hepatitis B virus (7.4%), hepatitis A virus (18.6%), syphilis (69.6%), human papillomavirus (16%), herpes (9.4%), chlamydia (43%), gonorrhea (60.5%) and candidiasis (9.7%).

Conclusions: Slamsex and STIs are usually reported in our sample. Interventions for chemsex users must include a colaborative model which includes professionals from different areas, including internists and emergency physicians, psychiatrists, psychologists, nurses, social workers and sexologists.

Disclosure of Interest: None Declared

EPP1066

Chemsex behaviours, sexual response and sexual health

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Introduction: The intentional use of drugs before or during sexual intercourse (chemsex) is a phenomenon of special importance in the MSM (men who have sex with men) population due to its impact on mental, physical and sexual health. Sexual health issues related to chemsex practice have been described such as difficulties in achieving sober sex, erectile dysfunction or problems with sexual desire.

Objectives: The objective of this study was to understand the impact of chemsex on sexual health and sexual response by the participantes of a sexual health program for chemsex users in two Substance Use Disorder Clinics in Madrid.

Methods: Qualitative research approach. We analyze an anonymous survey with chemsex users with open answer questions about the impact of chemsex practice on sexual response and sexual health. Data analysis was based on thematic analysis of content.

Results: Several differences were identifed between chemsex and sober sex. In sober sex it can take longer to feel aroused, sexual desire is more context-dependent and more easyly controled. They connect easily with other people needs when they had sober sex. They described difficulties with consent with some sexual practices when they were on drugs. Shame and guilt was associated with chemsex. They describe more arousal, more independent of the erotic context, longer sexual intercourse and delayed ejaculation when they had sex under the influence of drugs.

Conclusions: Chemsex is a phenomenon that needs a multidisciplinary approach and mental and sexual health must be taken into account including sexological perspective. Interventions that provide sexual counselling and sexual therapy for chemsex users must be developped.

Disclosure of Interest: None Declared

EPP1067

Features of sexual behavior of senior university female students

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Introduction: Changes in the attitude of modern society to the intimate sphere - the increasing emancipation of women, their desire for equality with men, including in sexual life, significantly changes the nature of the sexual behavior of young women, which is becoming less dependent on the presence of common myths and stereotypes

Objectives: To identify the features of the sexual behavior of senior university students

Methods: One hundred seventy two senior students of the Ural State Medical University aged 20 to 24 years (average age 21 ± 3.15) attended an anonymous online survey using the Google Forms platform. The author's questionnaire developed at the Department of Psychiatry, Psychotherapy and Narcology together with the Department of Obstetrics and Gynecology of USMU and included 51 questions.

Results: To the question "Are you brought up in the belief that there is nothing shameful in sex?" answered in the affirmative by 63.0% (108 people) of female students. Most of them 94.0% (162 people) consider it possible to have sexual relations before marriage – "Yes, this corresponds to the norms of modern society." The age of onset of sexual activity for this sample was 17.5 years. Extreme deviations from the median norm: 14 years - 4.0% (7 people); 23 years old – 2.0% (3 people). To the question "What is your attitude towards representatives of non-traditional sexual orientation?" the answers were distributed as follows: neutral attitude 72.0%, (92 people); 22.0% (28 people) expressed a positive attitude; negative - only - 6.0% (7 people). The study showed that the sexual behavior of young women - university students is determined mainly by intimate and personal attitudes, due to the specifics of society, cultural context, individual and personal characteristics.

Conclusions: Based on the identified trends, the features of the sexual behavior of young women - senior students of the university become more definite and predictable.

Disclosure of Interest: None Declared

EPP1068

Relation of Non-Suicidal Self-Harm to Emotion Regulation and Alexithymia in Sexually Abused Children and Adolescents

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Introduction: Globally, children are abused sexually. It physically and mentally strains society. Abusers can develop eating problems and non-suicidal self-harm. Emotion regulation links purging, NSSI, and abusive situations. We examined 80 13-20-year-olds, 62.5% of whom had CSA, and 30 healthy controls. Victims were given the Toronto Alexithymia Scale, an eating disorders clinical interview, the Difficulties in Emotion Regulation Scale to assess emotion dysregulation, the Self-punishment Scale to assess NSSI, the Mini-Kid for children under 18 and the Structured Clinical Interview for DSM-IV Axis I Disorders (SCID I) for those 18 and older. 62.5 percent have CSA. CSA was connected to emotional dysregulation. Alexithymia is connected with problems describing and identifying feelings and outside oriented thinking. CSA patients exhibited severe self-punishment symptoms, greater than controls. Kids and teens often have CSA.

Objectives: to look into the link between CSA and NSSI, as well as Alexithymia, emotional eating, and emotion dysregulation.

Methods: We interviewed 80 mental outpatients from October to February 2019. 30% of healthy controls have CSA. Participants were 10–24-year-olds without PTSD or ASD. Mini-Kid is a 10- to

18-year-old neuropsychiatric interview (Sheehan et al., 1998), Selfinjury scale measures non-suicidal self-harm (NSSI), Problems (DERS; Bjureberg et al., 2016) TORONTO ALEXITHYMIA QUESTIONNAIRE (Bagby et al., 1994). The Eating disorders clinical interview (Kutlesic et al., 1998) **Results:**

Table. Describing the difference between control group and patients' group regarding self- punishment scale.

	Control group	Patient group		
Self-punishment scale		N (%)	N (%)	P value
Physical punishment	Mild	18 (60)	9 (18)	<0.001
	Moderate	11 (36.7)	28 (56)	
	Severe	1 (3.3)	13 (26)	
Thinking & affective punishment	Mild	15 (50)	9 (18)	0.001
	Moderate	11 (36.7)	16 (32)	
	Severe	4 (13.3)	25 (50)	

Conclusions: CSA survivors had higher rates of self-injury, emotional eating, alexithymia, and emotional dysregulation than healthy controls. CSA victims should be evaluated for non-selfinjury, emotional dysregulation, and emotional eating.

Disclosure of Interest: None Declared

EPP1069

Sexual education and body estimation among women in early adulthood - Polish experience

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Introduction: Chronic sexual health problems often emerge in young adulthood, when adults begin to build the close relationship and develop lifelong sexual health behaviors. The associations between body estimation and sex education, especially in women group, is not well known in Poland.

Objectives: The aim of the research was to check a relationship between body estimation and (1) taking part in formal sex education classes in the past and (2) subjective rating of one's knowledge in the field of sexuality among women in early adulthood.

Methods: We examined 159 women between 18 and 35 years. We used a survey, consisted of respondents' particulars and Body Esteem Scale (Franzoi, Shields, 1984) including 35 items related to body. BES consists of three subscales for women (Sexual attractiveness, Weight concern, Physical condition) and three subscales for men (Physical attractiveness, Upper body strength and Physical condition). Respondents had to pick one of the answers on a five-point scale, where 1 meant "strong negative feelings" and 5 meant "strong positive feelings". The study was conducted online, via MS Forms platform.

Results: There was a statistically significant relationship between taking part in formal sex education classes in the past and