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bipolar disorder (García-Portilla, 2010).

SEXUAL DYSFUNCTION IN PATIENTS WITH SCHIZOPHRENIA VS BIPOLAR DISORDER E.M. Díaz-Mesa, M.P. García-Portilla, S. Al-Halabí, P.A. Sáiz, J. Bobes Area of Psychiatry, CIBERSAM, University of Oviedo, Oviedo, Spain Introduction: Healthy sexual functioning is an important part of the human experience, but there is a lack of studies regarding sexuality and sexual behavior in schizophrenia and

Aim: To determine the differences on the sexual dysfunction profile between patients with schizophrenia and bipolar disorder.

Method: Naturalistic, cross-sectional, multicentre, validation study. A total of 89 patients with schizophrenia (SQF) and 82 with bipolar disorder (BPD) were evaluated using the Changes in Sexual Functioning Questionnaire Short-Form (CSFQ-14).

Results: Sample description (SQF vs BPD): Mean age (SD) were 39.2 (11.0) vs 46.7 (10.9) (p< 0.001), men were 58.8% vs 41.2% ( $\chi^2$ =4.0, df.=1 , p< 0.05), 61.8% vs 38.2% were single ( $\chi^2$ =12.8, df.=1 , p< 0.001). Mean (SD) scores on CSFQ-14 scales were (SQF vs BPD): Pleasure 2.2 (1.0) vs 2.6 (1.0) (t=-2.2, p< 0.05), Sexual desire/frequency 5.3 (2.0) vs 5.9 (2.0) (t=-2.0, p< 0.05), Sexual desire/interest 5.7 (2.6) vs 6.9 (3.0) (t=-2.5, p< 0.05), Arousal/excitement 8.6 (3.1) vs 8.9 (3.4), Orgasm/completion 7.9 (3.2) vs 8.8 (3.2), Desire 11.1 (3.9) vs 12.9 (4.4) (t=-2.7, p< 0.05), Arousal 8.6 (3.1) vs 8.9 (3.4), Orgasm 7.9 (3.2) vs 8.8 (3.2) and Total 39.5 (9.7) vs 42.2 (11.0).

Conclusions: Patients with schizophrenia have more difficulty to get pleasure and more problems in the phase of desire (frequency and interest) than the patients with bipolar disorder.