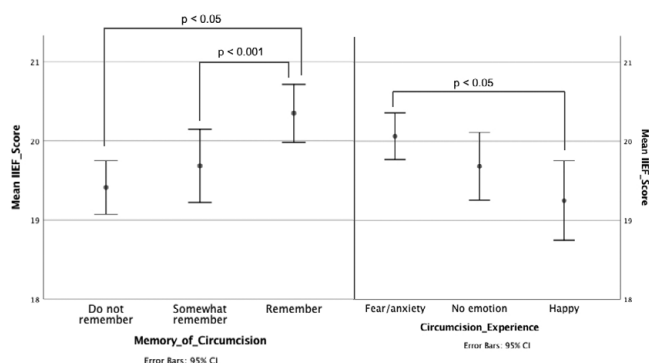


Graph-3. Simple Error Bar of Mean IIEF Scores When Participants Are Grouped According Memory of Circumcision Experience And Perception of Circumcision Experience



Conclusions: The age of circumcision does not affect the risk of PE. This is one of the very few studies that challenges psychoanalytic theory with a scientific method. Remembering the circumcision experience with fear or anxiety did not increase the risk of sexual dysfunctions.

Keywords: Circumcision; Premature Ejaculation; Sexual Dysfunction

EPP1263

Homophobia: Is it a heterosexual “privilege”?

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Introduction: The context of stigma, in which many homosexuals live, exposes them to discrimination/stigmatization and promotes the internalization of negative attitudes about sexuality. Battle feelings of rejection and isolation may lead to the development of internalized homophobia (IH).

Objectives: To elucidate the risk factors of IH and how the latter affects mental health.

Methods: Literature review (PubMed).

Results: IH has been associated with lower levels of emotional stability, rejection sensitivity, impairments in emotion regulation and a tendency to turn against the self. Studies have connected IH to depression, poor self/relationship wellbeing, sexual discrimination, addictions, shame, body dissatisfaction, suicidal ideation, binge eating/drinking, partner violence and victimization. Higher levels of attachment anxiety and avoidance, outness, religiosity and internalized stigma were correlated with higher IH levels. The key factors relating to suicide include lack of acceptance by family and/or self, negative feelings about sexuality/gender and appearance dissatisfaction. In traditional/religious societies, heterosexual orientation is a strong norm and homosexuality is considered unacceptable leading LGBT individuals to report higher depressive symptoms and increased levels of IH. Due to heterosexist ideals, IH is a predictor for heterosexual marital intention, protests against LGBT and use of masculinity as a compensatory strategy.

Conclusions: Policies in support of individuals who have recently come out should be improved to reduce the development/effects of

IH and take the social and sexual environments of rural gay men into account considering ways to increase service accessibility (e.g internet). Future research is needed to further understand the association between IH and mental health, social and cognitive mechanisms.

Keywords: LGBT; stigmatization; discrimination; internalized homophobia

EPP1264

Impact of male infertility on self-esteem

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Introduction: Infertile males experience considerable psychological distress, with feelings of inadequacy, marginalization, guilt and loss of self-esteem.

Objectives: Our study aims to investigate the impact of male infertility on men’s self-esteem and to study risk factors for low self-esteem.

Methods: We conducted a cross sectional, descriptive and analytical study, including 108 infertile men who presented to the laboratory of reproductive biology and the unit of assisted medical procreation of Military Hospital of Tunis between June and September 2019. For each patient, we collected sociodemographic and clinical data. We used Rosenberg scale to assess self-esteem.

Results: The average age of participants was 36.8 years. Eleven patients had a history of varicocele (10.18%) and six of them suffered from associated erectile dysfunction (5.55%). Infertility was primary in most of patients (77.8%) with an average duration of 3.32 years. 25% of patients had at least one previous failed assisted reproductive attempt. Spermogram abnormalities were found in 78.7% of patients. The mean score of Rosenberg scale was 30.68±4.35. Low self-esteem was associated with older age (p=0.006), lower educational level (p=0.019) and longer duration of infertility (p=0.022). Men who had children had better self-esteem (p=0.022). No associations were found between self-esteem and erectile dysfunction or previous failed assisted reproductive technique attempt.

Conclusions: Our results show that infertility reduces men’s self-esteem, especially of patients with lower educational level and longer duration of infertility. Physician dealing with infertility should be aware of these psychosocial aspects and offer help when needed.

Keywords: infertility; self-esteem; men

EPP1265

Third generation cognitive-behavioral therapies and genital pain

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Introduction: Genital pain is a heterogeneous chronic pain condition and the relationship between biological, psychological and social factors sets a complex clinical challenge. The importance of negative thoughts and emotions has opened up an opportunity for the role of third generation cognitive-behavioral therapies (CBT). While the majority of evidence revolves around female sexual desire and arousal problems, research on genital pain disorders is beginning to take shape.

Objectives: To review the evidence of third generation CBT on genital pain disorder.

Methods: Review of literature using the Pubmed platform.

Results: We identified 21 publications. Evidence shows that mindfulness-based CBT (MbCBT) improves reduction of fear linked to sexual activity, pain acceptance, catastrophizing and decentering. MbCBT shows significant improvements on secondary outcomes (overall sexual function, sexual satisfaction, depression and anxiety) while reduction of genital pain has yielded contradictory results. Acceptance and commitment therapy (ACT) has been studied for chronic pain disorders with improvements on pain acceptance, psychological flexibility, anxiety, depression and functioning. Compassion-focused therapy (CFT) has yielded favorable results on pain distress and intensity, self-efficacy, self-acceptance, anxiety and depression. Self-compassion may be a promising protective factor in genital pain. Both ACT and CFT have not yet been studied specifically for genital pain.

Conclusions: Third generation CBT are most commonly used for depressive, anxiety and chronic pain disorders which signals the logical role that these interventions may have in genital pain. While MbCBT has started to present favorable results in treating genital pain (as well other sexual problems), ACT and CFT require more research.

Keywords: genital pain; mindfulness; acceptance and commitment therapy; compassion focused therapy

EPP1269

Sexual assault in the mahdia region : Epidemiological peculiarities of victims

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Introduction: Women around the world are still victims of violence and discrimination in many areas. In Tunisia, discrimination against women remains a reality, and they are often more vulnerable to violence, especially sexual violence, compared to men.

Objectives: To describe the epidemiological characteristics of victims of sexual assault in the Mahdia region in Tunisia

Methods: This is a descriptive and retrospective study of 110 sexual assault cases examined at the legal medecin department of Mahdia University Hospital between January 2016 and August 2018.

Results: The majority of victims were female (80 %). All genders, 77% were under the age of 25 years old. The median age of the men was 11.5 years. The median age of women was 18. The urban origin was more common (55.5%). Only 8.1% were married compared to 87.4% single. Only 2.7% said they were divorced and only one woman was a widow. 41.8% of the sample said they were still in school and almost 29,1% of the cases were out of work. 3.6% reported a history of sexual assault. The sexual act was the same in all situations. The perpetrator was unique in 73.6% of cases, male (100%), known to his victim (57%) or even a member of the family circle (14%). Sexual assault by penetration was mostly reported (51%), and it was almost exclusively penile (98.2%).

Conclusions: Sexual violence remains under-reported. The statistical data do not allow to know the phenomenon of its whole, because the majority of acts remain unknown, due to the absence of complaints or medical consultations.

Keywords: epidemiology; sexual assault; rape; Molestation

EPP1270

A remarkable benefit of group psychotherapies with gender dysphoric adults among a case study

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Introduction: A person who has gender dysphoria can experience some difficulties in his/her/their life (as we can see even in language). These difficulties are mostly because of the binary gender system. Especially in countries like Turkey, homophobia is very common. Because of that, a homosexual person can think that he/she/they is a transgender.

Objectives: At this point, group psychotherapies are worthwhile, especially for differential diagnosis. These individuals can share their experiences about the process. On this way, they can also explore themselves.

Methods: We have a monthly group psychotherapy for transgender and gender nonconforming adults in our clinic. We accept the individuals who have problems about gender identity. All trans adults who apply to us and are considered to be suitable are directed to the support group.

Results: An individual, aged 20, who defines herself as a FtM trans has joined to the group for 4-5 months. She was in hurry and had decided to go under surgery for gender transition. She was referred to surgery by another clinic which didn't have a group psychotherapy. So she applied to our clinic. During the group psychotherapy, she realized that she was homosexual and gived up gender transition.

Conclusions: Group psychotherapy is helpful for trans individuals to reduce psychological distress and manage their process. This study shows that it is not the only benefit of group support psychotherapy. It also helps the individuals to explore themselves, like our case. Its benefit can be as major as saving themselves from an irreversible step and its consequences.

Keywords: gender dysphoria; group psychotherapy