

P3.031 CONDOM USE AS A FUNCTION OF NEW YOUNG ADULT RELATIONSHIP DURATION

doi:10.1136/sextrans-2013-051184.0491

¹J Harezlak, ¹F He, ²D J Hensel, ²J D Fortenberry. ¹Indiana University Fairbanks School of Public Health, Indianapolis, IN, United States; ²Indiana University School of Medicine, Indianapolis, IN, United States

Objective To find out how condom use in new relationships changes as a function of time, gender, as well as sexual and relationship satisfaction.

Method Participants in a larger study who reported at least one new partner during the 12-week study interval (N = 115; 18–29 yrs; 48% women; 75% African American) completed weekly STI testing and 3x/day electronic diary collection assessing individual and partner-specific affect, daily activities, sexual behaviour and condom use. We analysed event-level condom use percentage and subject-level behaviour response effects. Generalized Additive Mixed Models (GAMMs) were used to estimate condom use probability accounting for within-subject and within-nested-partners correlations via random effects.

Results The average initial condom use in the new relationships was 62% for men and 46% for women. The plotted smooth shapes of the estimated condom use probabilities fitted using GAMMs were qualitatively similar for both sexes throughout the study period. The initial high condom use percentage was followed by a sharp decline during the first 1.5 weeks to 19% for men and 14% for women. The condom use rates stabilised at around 6% after 4 weeks in a new relationship. Women who reported high levels of relationship satisfaction exhibited marginally significant negative association with condom use probability (p-value = 0.055). Sex satisfaction was not significantly associated with condom use when both the time trends and gender were taken into account.

Conclusion Condom use declines sharply for both males and females during the early stages of new relationships. Men use condoms more frequently than women in the early and middle stages of relationships. Relationship characteristics may also influence lower levels of condom use, especially among women.

P3.032 EPIDEMIOLOGY OF SEXUALLY TRANSMITTED INFECTIONS IN TVER, RUSSIA

doi:10.1136/sextrans-2013-051184.0492

¹K Koniuchova, ¹M Rozova, ²A Savicheva, ³E Sokolovskiy, ⁴M Domeika, ⁵M Unemo, Eastern European Network for Sexual Reproductive Health. ¹Avaev's Center of Specialized Medical Aid, Tver, Russian Federation; ²Ott Institute of Obstetrics and Gynecology Academy of Medical Sciences of Russian Federation, St Petersburg, Russian Federation; ³Pavlov State Medical University of St Petersburg, St Petersburg, Russian Federation; ⁴Department of Control and Prevention of Communicable Diseases, Uppsala County Council, Uppsala, Sweden; ⁵WHO Collaborating Centre for Gonorrhoea and other STIs, Örebro, Sweden, Örebro, Sweden

Background Tver region belongs to the Central part of Russia, its territory is 84,200 km² with a population of 1,342,200 inhabitants, including the city of Tver populated by 406,918 inhabitants. The aim of this paper is for the first time to internationally present the epidemiological trends of STIs in the region.

Methods Site visits and yearly epidemiological reports of the Center.

Results The peripheral laboratories are poorly equipped and therefore the diagnosis of STIs is mainly concentrated to the Center of the Specialized Medical Aid in Tver. However, the long distances for specimen transportation and lack of appropriate transport system are large obstacles for providing effective diagnosis of STIs. In 2009, vaccination against human papilloma virus (HPV) was introduced into the prevention programme against cervical cancer in Tver. The epidemiological trends of the main STIs in the Tver region are

changing. A decrease in the incidence (cases per 100,000 inhabitants) of almost all STIs has been observed, namely during the years 2008 and 2012 the incidence of syphilis was 62.1 and 21.0, gonorrhoea - 42.5 and 19.2, genital chlamydial infection - 58.7 and 34.4 cases, *T. vaginalis* - 120.5 and 73.6, genital herpes - 8.1 and 6.5, and anogenital warts 21.1 and 16.6, respectively. Since introduction in 2009, 373 girls, aged 12–13 years, have been vaccinated for HPV.

Conclusion In Tver, Russia, the difficulties to reach the population in most need for testing is of major concern. The reported epidemiologic data is also suboptimal due to many reasons such as lack of appropriate diagnostic methods, frequent use of self-treatment (antibiotics available over the counter), and private laboratories and outpatient clinics do commonly not report STI cases to the authorities. Accordingly, it is imperative to optimise the laboratory diagnosis and epidemiological surveillance of STIs, and introduce evidence-based STI guidelines.

P3.033 EPIDEMIOLOGY OF VIRAL STIS IN 2000–2011 IN RUSSIAN FEDERATION

doi:10.1136/sextrans-2013-051184.0493

E Bogdanova, L Melekhina. State Scientific Centre of Dermatovenereology & Cosmetology, Moscow, Russian Federation

Introduction and Objectives To examine epidemiology of genital herpes simplex virus and human papillomavirus (HPV) during 2000–2011 in Russian Federation.

Materials and Methods Overview of national statistical surveillance data for 2000–2011 on STI.

Results In 2011 a total of 67834 newly diagnosed cases of viral STIs were reported in Russia, which corresponds to an overall rate of 47.5 cases including genital herpes simplex virus rate of 18.3 and human papillomavirus rate 29.2 per 100,000 population.

The age-specific genital herpes simplex virus rates in 2011 were as follows: 21.8 among those aged 18 years and older, 15.7 among those aged 15–17; whereas the age-specific HPV rates were 39.0 among those aged 15–17 versus 34.3 cases per 100,000 population among adults.

During 2000–2011 the total rates of genital herpes simplex virus remain constant (mean rate 19.8 ± 1.4 per 100,000 population). The total rates of HPV during the same period increase from 27.4 to 29.2 per 100,000 population with maximum reported rates of 34.7 in 2009.

During 2000–2010 the mean rate of genital herpes simplex virus among adolescents aged 15–17 was 9.5 ± 1.2 per 100,000 population; whereas significant increase of the rate (15.7 per 100,000 population) was observed in 2011. The mean rate of HPV among those aged 15–17 increased from 37.7 in 2000 to 39.0 in 2011 with the highest rates of 43.7 per 100,000 population reported in 2004.

Conclusions against overall 2.6-fold decrease of total reported STI rates in 2000–2011 in Russian Federation the rates of viral STIs remain generally constant except for the 1.7 fold increase of genital herpes simplex virus rate among adolescents aged 15–17 in 2011.

P3.034 GENERAL PRACTITIONERS IN THE NETHERLANDS MISS OPPORTUNITIES TO TEST FOR STI/HIV DURING STI-RELATED CONSULTATIONS

doi:10.1136/sextrans-2013-051184.0494

¹IVF van den Broek, ^{1,2}S M Trienekens, ³G A Donker, ^{1,4,5}J E A M van Bergen, ^{1,6}M A B van der Sande. ¹Epidemiology & Surveillance Unit, Centre for Infectious Disease Control, National Institute of Public Health and the Environment, Bilthoven, The Netherlands; ²Department of HIV & STI, Health Protection Services, Colindale, HPA, London, UK; ³NIVEL, Dutch Sentinel Practice Network, The Netherlands Institute for Health Services research, Utrecht, The Netherlands; ⁴STI AIDS The Netherlands, Amsterdam, The Netherlands; ⁵Department of General Practice, University Medical centre, Amsterdam, The Netherlands; ⁶Julius Centre, University Medical Centre, Utrecht, The Netherlands