A PAP in the last year before this study was available in 30% of cases.

The correlation of screening techniques with the three methods proposed: diagnostic cytology, capture hybrid and colposcopy was made in 169 women

Prevalence of HPV infection was 39% (104 positive/165 negative).

Correlation between Cyto-colposcopic and Hybrid Capture test was:

hybrid capture (–) cytology/colposcopy (+) = 2/169

hybrid capture (+) cytology/colposcopy (–) = 15/169

hybrid capture (+) cytology/colposcopy = 32/169

hybrid Capture (-) cytology colposcopy (–) = 84/169

hybrid Capture (+) indeterminate cytology and colposcopy (–) = 19/169

hybrid Capture (–) indeterminate cytology and colposcopy (–) = 17/169

Conclusions Despite that it was not a large sample, the negative predictive value of hybrid captures for HPV detection was 98% in this population.

We recommend the incorporation of the hybrid capture as screening technique in all women with HIV regardless of the age and all those with negative cytology and positive hybrid capture for the early detection of cervical lesions.

P3.048 HIV IN CHILDREN IN A GENERAL POPULATION SAMPLE IN SOUTHERN AFRICA: PREVALENCE, CAUSES AND EFFECTS

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Background The epidemiology of HIV in children in sub-Saharan Africa remains poorly understood. To help address this gap we describe the prevalence, causes and effects of HIV in children (aged 2–14 years) and adolescents (aged 15–17 years) in a southern African population.

Methods General population survey of 3,390 children and 2,130 adolescents in Manicaland, eastern Zimbabwe. Data on possible socio-demographic correlates of HIV prevalence, sources of infection, and effects of HIV infection in children were analysed using multi-variable logistic regression. The contribution of horizontal transmission was assessed by investigating the survival and HIV infection status of mothers of infected children.

Results HIV prevalence was 2.15% (73/3,390) in children and 1.97% (42/2,130) in adolescents. Infection levels did not differ by sex, age, socio-economic status, location or religion. The mothers of most infected children were either deceased or HIV-positive which is consistent with MTCT being the primary mode of infection, but 9/73 infected children and 4/42 infected adolescents had surviving uninfected mothers. Infected children were more likely than uninfected children to be malnourished (21.6% *versus* 9.9%, p = 0.006) and stunted (42.0% *versus* 30.5%, p = 0.03). HIV infection was not correlated with physical or psychological ill-health in children, but infected adolescents were more likely to report episodes of illness than their uninfected counterparts (p = 0.003).

Conclusion Childhood HIV infection in Zimbabwe is due primarily to MTCT and is associated with poor physical development.

P3.049 HIV/AIDS IN A PUERTO RICAN WOMEN POPULATION: PSYCHOSOCIAL, RISK BEHAVIOR AND LIFESTYLES

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Background This study describes psychosocial, risk behaviour and lifestyle features of HIV/AIDS women in Bayamón, PR. It also compares the psychosocial, behavioural and lifestyle profile changes of this cohort according to their entry year to the registry (2000–2010).

Methods Baseline data was analysed from a prospective survey of HIV/AIDS-infected women reported to the HIV Central Registry at the Universidad Central del Caribe, RCMI Program from 2000 to 2010. The study group was composed of 499 adult women, with AIDS or HIV infection reported upon arrival at the University Hospital Ramon Ruiz Arnau or the Bayamon Regional Immunology Clinic. Statistical analysis included frequencies, percentages, Chi-square, Chi Square for linear trend and Fisher Exact test.

Results A large proportion of women were under 46 years (71.4%). Most reported not having graduate studies (98.8%), being unemployed (70.9%), not having a partner in the last year (57.0%) and having children (88.0%). The most frequent sexual risk behaviour was heterosexual activity (98.8%), where 71.3% reported heterosexual activity in the last year and 14.4% reported prostitution activity. Risky lifestyles reported by women included: smoking tobacco (64.7%), use of alcohol (38.3%), use of psychoactive substances (36.3%) and intravenous drug usage (IVDU) (36.3%). Most frequent psychosocial factors reported were: episodes of depression (82.2%), episodes of impulsivity (55.4%), isolation (44.6%), suicide attempt (23.7%), time served in prison (20.3%), voluntary miscarriage (17.7%) and having been sexually assaulted (7.1%). An increasing linear trend ($p < 0.05$) was observed among proportions of women that reported using psychoactive substances, attempting suicide and having been sexually assaulted.

Conclusions Women reported a wide spectrum of risky psychosocial, behavioural and lifestyle activities. Increasing changes among these were observed over the last decade. This effort was made possible by NIH grant number 8G12MD007583 and 8U54MD007587 from the National Institute on Minority Health and Heath Disparities.

P3.050 HIGH-RISK UROGENITAL HPV INFECTIONS IN PARAMARIBO, SURINAME: PREVALENCE AND RISK FACTORS AMONG ETHNIC DIVERSE WOMEN

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Background and Aim: Cervical cancer is caused by high-risk (HR) Human Papilloma Virus (HPV) infections. The mortality rate of cervical cancer in Suriname is 8/100.000 per year. Current HPV vaccinations protect against cancers induced by HR-HPV 16 and –18, and are not yet available in Suriname. We estimated prevalence of, and risk factors for urogenital HR-HPV infections among women from five major ethnic groups in Paramaribo, Suriname in a pre-vaccination era.

Methods Between July 2009 and February 2010, women aged ≥ 18 years were recruited at a Family Planning clinic and STI clinic. Vaginal swabs were collected and general HPV detection was performed using the highly sensitive broad-spectrum SPF10 PCR and DNA enzyme immunoassay (DEIA). Subsequently, DEIA-positive samples were genotyped by the LiPA25 reverse hybridization assay (Labo Bio-medical Products, The Netherlands), targeting 25 different genotypes. Logistic regression analysis was used to identify determinants of HPV infection.