P5.040 INTEGRATION OF GONORRHOEA AND CHLAMYDIA SELF-COLLECTION SERVICE WITHIN AN EXISTING REPRODUCTIVE HEALTH PROGRAMME IN KAMPALA, UGANDA


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Background Sub-Saharan Africa has the highest rates of curable sexually transmitted infections (STIs) globally with the greatest morbidity due to Neisseria gonorrhoea and Chlamydia trachomatis falling on women. In response to a demand for comprehensive reproductive health screening, we proposed that providing additional N. gonorrhoea and C. trachomatis testing within a cervical cancer screening programme involving self swabbing for HPV, would be acceptable and effective.

Methods As part of a cervical cancer screening project in Kisenyi, a densely populated urban community in Kampala, Uganda with low socio-economic-indicators, women aged 30 to 69 were offered N. gonorrhoea and C. trachomatis testing using self-collected swabs. Women were recruited in each sub-division by local health workers, after informed consent, a brief demographic and attitudes survey was completed and the method of swab collection was explained. Specimens were transported for PCR analysis within Kampala. Participants were contacted by mobile phone and asked to attend the local health clinic to receive appropriate treatment if found to be positive.

Results Out of 206 women approached, 208 provided a self-collected swab for analysis. Twenty-six women (13%) were found to have C. trachomatis, 2 (< 1%) were positive for N. gonorrhoea and one participant was co-infected. Of the women infected, 76% were successfully contacted and of these 62% attended follow-up to receive appropriate treatment. Women reporting no condom use in the last month accounted for 93% of those with C. trachomatis while use of the oral contraceptive pill was not associated with higher rates of either infection. The self-reported HPV positivity rate was 9.5%.

Discussion The acceptance and uptake of testing for common STIs in this urban sub-Saharan environment was very positive. Due to the high burden of disease inferred by these easily treated infections, further integration of appropriate screening should be incorporated into existing reproductive health programmes.

P5.041 TB TREATMENT FOR HIV POSITIVE PREGNANT WOMEN: CHALLENGES TO SCREENING AND DIAGNOSIS


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Background According to Kenya’s PMTCT guidelines, all HIV positive women who present for antenatal care should be tested for TB.

Methods HIV-positive, pregnant women were recruited from two maternity hospitals in Nairobi, Kenya. The results presented here are based on surveys completed at baseline as well as 48 hour follow up. This data was collected from 505 women as part of a study on the use of mobile technology in PMTCT programmes. Questionnaires included questions on socio-economic characteristics, history of current and previous pregnancies, knowledge of PMTCT, TB screening and treatment and the use of Nevirapine. Chi-square tests and multivariable logistic regression were used to assess statistically significant associations between variables of interest and TB screening.

Results Overall screening for TB in our sample was 10.3% with no significant difference between the two hospitals (11.4% versus 8.4%). Analysis also revealed no significant difference between groups based on sociodemographic status (including age, education, marital status and income) or based on the number of antenatal visits or gestational age at first presentation.

Conclusion Reportedly, 80% of TB patients are given access to HIV testing and a further 27% of those who test post positive are placed on ART. TB screening for pregnant women seem to be offered less regularly, however, with only 10% of women screened. In our sample, the lack of significant difference in screening between facility; by sociodemographic characteristics or by when they access services seems to suggest suboptimal TB screening in pregnant women is a systemic issue.

P5.043 EARLY EVALUATION OF THE ISEAN HIVOS PROGRAM’S HIV/AIDS BCC ONLINE INITIATIVE FOR MSM AND TG COMMUNITIES IN SOUTH EAST ASIA


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Online BCC Outreach Intervention was developed by the ISEAN HIVos Program to reach the hidden MSMs and TGs populations in Indonesia, Malaysia, Philippines and Timor Leste. The initiative
A PROACTIVE APPROACH TO ONLINE CHLAMYDIA SCREENING: QUALITATIVE EXPLORATION OF YOUNG MEN'S PERSPECTIVES OF THE BARRIERS AND FACILITATORS

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Background Increasing access to sexually transmitted infection (STI) testing among young, heterosexual men is advocated as a means of reducing STI rates in the UK. New mobile, social media platforms, such as ‘smart-phones’, give unprecedented mobile access to the Internet, and the proliferation of Internet forums and social networking sites offer potential mediums for sexual health promotion. Here, we assess the acceptability and potential barriers and facilitators of these for STI testing among young men in Scotland.

Methods Qualitative study including 15 focus group discussions with 60 heterosexual young men (aged 16–24 years) across central Scotland to explore an online approach to proactive screening for Chlamydia trachomatis. Transcripts from audio recordings were analysed with Framework Analysis.

Results Participants were favourable of an online approach for accessing postal Chlamydia tests, even if they felt it was not suitable for them. However, some spoke more favourably of attending specialist sexual health clinics for testing, particularly those from areas of higher deprivation, of younger age, and who had previously attended such clinics. We found differing levels of exposure to and facilitators of these for STI testing among young men in Scotland.

Recommendations by end-users include 1. Providing localised websites for better access, 2. Uploading the videos in youtube to allow access without registration; 3. Creation of a promotional video; 4. Coming up with electronic raffles and other rewards to promote access.

The ISEAN Hivos Program’s BCC online intervention for HIV-AIDS targeting MSM and TGS in South East Asia showed initial positive results. Areas for improvement were identified which will guide the site’s continuous re-development. This experience provides lessons on how effective HIV-AIDS-related messages can spread en-masse to otherwise “hidden” but “most-at-risk populations” at a regional Asian context, by the use of ICT.
P5.043 Early Evaluation of the ISEAN Hivos Program's HIV-AIDS BCC Online Initiative For MSM and TG Communities in South East Asia

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Sex Transm Infect 2013 89: A347-A348

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