service locations. Items most important to participants were convenience, reassurance, and that the sexual health discussion is appropriate and routine. Barriers identified were embarrassment, unease, lack of time, religion and concern of causing offence. Suggested facilitators include raising awareness, reassuring confidentiality, ensuring the discussion is facilitated by trust and professionalism at the end of the consultation.

Conclusion The majority of participants are happy to be offered 3Cs and HIV at their GP surgery. Therefore, it is important for GP staff to recognise these preferences and ensure that the full 3Cs and HIV services are made available and offered to appropriate patients.

P112 X FACTOR MAKEOVER FOR 4TH YEAR MEDICAL STUDENT LECTURES

¹Johnny Boylan*, ²Sophie Forsyth, ^{1,3}Patrick Homer. ¹Bristol Sexual Health Centre, University Hospitals Bristol NHS Foundation Trust, Bristol, UK; ²Swindon Sexual Health Clinic, Great Western Hospitals NHS Foundation Trust, Swindon, UK; ³School of Social and Community Medicine, University of Bristol, Bristol, UK

10.1136/sextrans-2016-052718.166

Background/introduction Traditionally Year 4 Medical students at Bristol University receive 4 hours of didactic lecture based teaching on sexual health topics. Overall, the feedback is satisfactory but student evaluations consistently denounce the volume of information contained in the lectures.

Aim(s)/objectives To support learner diversity and increase student participation, we decided to revamp the delivery of the sexual health curriculum.

Methods We made the lectures available on the student intranet for background reading and signposted the students towards additional sources of information such as BASHH guidelines. During a study day, 60 students in groups of 5 or 6 were asked to teach their peers using case studies on topics such as vaginal discharge, genital ulcers and sexual assault. Teaching methods included game shows, a rap about syphilis and role-play. There were prizes for the top three presentations (through peer grading) and a prize for the most innovative. A questionnaire, and open discussion were used to obtain feedback on both the old and new teaching formats.

Results Overwhelmingly the students preferred and gained more from the student led case based presentations. They felt more engaged and would recommend it for future groups. Some students felt it was also important to have an opportunity to ask questions about the online lectures in future.

Discussion/conclusion Through this alternative approach to learning new information, we have catered for different learning styles and created a positive learning environment. Peer teaching can be very effective in encouraging critical thinking and producing deeper learning outcomes.

P113 HIV IN SOCIAL MEDIA: WHAT DO YOUTUBE USERS WATCH?

Suzanne Todd*, Laura Bell, Michael Hunter. Royal Victoria Hospital, Belfast, Ireland

10.1136/sextrans-2016-052718.167

Background/introduction Increased risk-taking behaviour, sexual networks, and sexually transmitted infections have been attributed to the rapid increase in social media use. YouTube is a video

sharing, revenue generating website that's content is not scientifically vetted, and any registered user can post media content.

Aim(s)/objectives The objective of this study was to determine how HIV related issues are portrayed on YouTube.

Methods A YouTube account was created using 'worldwide' and 'English UK' settings. The search engine was cleared, Flash Player cache emptied, and cookies removed. Each of the following search terms was used: 'HIV', 'AIDS', 'PrEP' and 'HIV home testing'. Inclusion criteria: first 60 videos. Exclusion criteria: >10 minute duration, exclusively non-HIV content, not in English. Each video was scored by 2 investigators.

Results

Search Category	No. of YouTube hits	Views/ Day (Median)	Engage- ment/ view (%) (Median)	Any advert (n)		Factual Inaccuracies (n)			Contained gossip/ media (n)	
				Yes	(%)	Major	Minor	No	Yes	(%)
AIDS (n = 30)	2,240,000	585	0.34	16	(41)	2	5	23	12	40
Home Testing (n = 55)	212,000	3	0.17	29	(51)	1	1	53	0	0
HIV (n = 39)	1,250,000	1153	0.8	21	(54)	3	0	36	16	41
PrEP (n = 29)	2,190	334	0.62	16	(55)	1	3	25	2	7

Discussion/conclusion Social media is an accessible source of information to the general public and healthcare professionals. When four search terms were compared, "HIV" and "AIDS" were most popular. "HIV" generated the most viewer-engagement. Following Charlie Sheen's HIV disclosure and publication of PrEP studies (November 2015), there was a massively increased use of "HIV" and "PrEP" search terms. 10% (15/149) of videos contained factual inaccuracies with 40% (6/15) potentially causing significant harm. Due to high rate of embedded advertisements, inaccurate material, and material which could stigmatise PLWHA, it is vital that Public Health/HIV clinicians harness the potential of social media, are aware of the associated risks and strive to promote accurate information to patients.

P114

CONCORDANCE OF CHLAMYDIA INFECTIONS OF THE RECTUM AND URETHRA IN SAME-SEX MALE PARTNERSHIPS: A CROSS-SECTIONAL ANALYSIS

¹Hannah McCall*, ^{1,2}Nataliya Brima, ¹Patrick French. ¹Mortimer Market Centre, Central & North West London NHS Foundation Trust, London, UK; ²Research Department of Infection and Population Health, University College London, London, UK

10.1136/sextrans-2016-052718.168

Background Sexual health services should ask all high risk attenders about drug and alcohol use. However, the impact of drug and alcohol use on STI epidemiology remains uncertain.

Aims To audit drug and alcohol history taking after introduction of a screening tool and to describe the patterns of use and associations with STI diagnoses.