

tested for HIV in the past 12 months and 4% ever been tested for HIV, 50.25% reported using a condom at last transactional sex.

Conclusion The prevalence of syphilis was high among female sex workers and majority of them were treated for syphilis. Achieving good treatment coverage therefore will help not only to reduce syphilis incidence but also HIV disease burden in the high risk population and general population since the relationship between syphilis and HIV is well established. This study has shown syphilis continues to be highly prevalent among female sex workers and targeted intervention programs need to focus on curable STI like syphilis.

P3.177 IDENTIFICATION OF SUPEROXOL NEGATIVE *NEISSERIA GONORRHOEA* ISOLATES OVER 25 YEARS IN ARGENTINA

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Introduction Isolation of *Neisserias* and other related microorganisms from genital and extra genital sites require the identification of clinically important isolates and represent a challenge in low-complexity clinical microbiology laboratories. A presumptive *Neisseria gonorrhoeae* (Ng) identification includes the Superoxol test (Spx) among others. Ng produces levels of catalase activity that are stronger than others *Neisseria spp.* Spx is a simple and inexpensive test that uses 30% hydrogen peroxide as a reagent. Superoxol reaction with Ng is typically "explosive" compared to weaker reactions of other species. The objective is to report the finding of *N. gonorrhoeae* superoxol test negative over 25 years in Argentina.

Methods We studied 8047 isolates derived from the GASPP-AR for susceptibility studies between 1990 and 2015. Presumptive identification of isolates was made on the colonies that developed in selective medium. All isolates were confirmed by carbohydrate utilisation and/or coagglutination with monoclonal antibodies and/or mass spectrophotometry (Bruker Daltonik). For Spx a positive result was defined as abundant production of bubbles occurring within two to three seconds of starting emulsification. A negative reaction was defined by weak or delayed bubbling after three seconds. Pulsed field gel electrophoresis (PFGE) was carried out using *NheI* enzyme.

Results Out of the total isolates studied, 99.9% (8038/8047) showed a positive Spx, however 9 isolates were Spx negative. These isolates came from 5 different regions of the country and have been appearing since 2010. They were characterised as serogroup WII/III with 3 different susceptibility patterns corresponding to three different non-related PFGE profiles.

Conclusion This work confirms the reliability of the Spx for the presumptive identification of Ng. Since several clinical laboratories in developing countries use only presumptive tests for Ng identification, is important to alert about these atypical isolates circulating in our country. It is important to be aware of using complementary tests for identification.

P3.178 SYPHILIS IN PREGNANT WOMEN AND ELIMINATION OF CONGENITAL SYPHILIS IN BELARUS

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Introduction In Belarus the spread of syphilis (S) has been on the increase since 1988, and the incidence reached its peak in 1996 with 209.7 cases per 100 000 inhabitants. During the following years the incidence has reduced with 7.2 cases in 2015. In the years 1996–2012 all together 5147 pregnant women infected with S were registered in Belarus (8.49% from the general number of the women with S for this period – 60 604 cases). The aim of the present study is to report on pregnant women infected with C and on elimination of congenital syphilis (CS) in Belarus.

Methods The study was retrospective. The data were obtained from the patients' files from the Dermatovenereological Dispensary in the city of Minsk, the state capital of Belarus, and regional Dermatovenereological Dispensaries of Belarus.

Results Primary S was diagnosed in 13.1% of pregnant women with S, secondary S – 30.2%, latent early S – 55.8%, latent late S – 0.9%. Disease has been revealed in I trimester of pregnancy in 57.1% of patients, II trimester – 23.1%, III trimester – 17.2%, after delivery – 2.6%. 43.7% of women have made abortion after disease revealing. Among women giving birth to children with CS primary S was not diagnosed, secondary S – 26.7%, latent early S – 71.4%, seroresistant S – 1.9%. Reinfection was registered in 8.5% of patients. There are 127 children with CS registered in 1994–2015 in Belarus in total. Early CS with symptoms has been revealed in 24 (18.9%), early latent CS – in 103 (81.1%) of children. Cases of late CS have not been registered. 2 cases of CS have been registered in 1994, 1995–12, 1996–13, 1997–14, 1998–23, 1999–18, 2000–6, 2001–8, 2002–7, 2003–8, 2004–5, 2005–1, 2006–4, 2007–1, 2008–2, 2009–1, 2010–2 cases. Last five years cases of CS have not been registered in Belarus.

Conclusion Belarus has adequate system of control of S in pregnant women. In 2016 WHO certified the validation of elimination of CS as a public health problem in Belarus.

P3.179 OBSTETRICAL ASSISTANCE ON HIV-POSITIVE PREGNANCIES MAY REDUCE VERTICAL TRANSMISSION

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Introduction Assess seropositivity of HIV infection among pregnant women overseen by Hospital de Clínicas from Universidade Federal do Triângulo Mineiro (HC-UFTM). Describe their demographical and epidemiological profile, obstetrical and newborn data.

Methods Survey through the records of pregnant women from HC-UFTM spanning from 2013 to 2016, followed by medical record review and administration of a structured questionnaire on epidemiological, obstetrical and neonatal aspects from HIV-positive pregnancies.

Results From January 2013 to November 2016, there were 69 births from HIV-positive women. On demography, the maternal age varied from 16 to 40 years, with 26.8 years average; the majority, 53.6% were in common-law marriages and 59.42

hailed from Uberaba. 37.6% had other concomitant STDs. 45.4% had their first appointment to specialised care done only on the second trimester. The patients had an average of 7 prenatal appointments and the majority (79.1%) were using antiretroviral therapy (Biovir and Kaletra) during this period. On births, 1.4% ended in miscarriage; 26.0% were pre-term deliveries; 66.66% were on term deliveries; 1.44% were post-term deliveries and 4.3% were delivered elsewhere outside the HC-UFTM. Caesarean sections responded for 63.6% of the births and all the pregnant women received zidovudin (AZT) before their deliveries (+/-2.93 hour). On newborns, 63.76% had their weights between 2500 g and 4000g and 92.6% had their APGAR \geq 7; all newborns received AZT after their births. **Conclusion** Obstetrical assistance to HIV-positive women is fundamental on their adherence to medication and on the reduction of vertical transmission. Those women must receive specialised care as soon as possible and the staff must be trained.

P3.180 SYPHILIS AND PREGNANCY: DIRECTING PUBLIC HEALTH

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Introduction Measure the incidence of syphilis among pregnant women overseen by Hospital de Clínicas from Universidade Federal do Triângulo Mineiro. Outline their epidemiological profile and assess their obstetrical assistance and immediate neonatal data.

Methods Retrospective study from survey of medical records from January 2007 to December 2015 of pregnant women diagnosed with syphilis, followed by the application of a structured questionnaire evaluating their epidemiological, obstetrical and neonatal data.

Results There were 226 cases of pregnant women with syphilis. This number grew from 9 cases (3.9%) in 2007 to 93 (41.2%) in 2015. Patients were, on average, 23.6 years old, ranging from 10 to 45 years. On obstetrical data, 74 (33.6%) were on their first pregnancy and the remaining had one or more pregnancies. 68.6% went to prenatal appointments and 69.4% were diagnosed on the second semester of their pregnancies. In 60.5% of the cases, the partner had not undertaken treatment. On births, 64.6% were vaginal births, 31.4% pre-term, 63.7% on term and 0.4% post-term births. On newborns, 68.6% weighed between 2,000–4000 grams; 72.1% had APGAR \geq 7 and 31% were diagnosed with congenital syphilis and hospitalised for further treatment.

Conclusion Congenital syphilis remains a challenge to public health mainly due to the alarming rise in new infections on recent years. It was present on women of all ages amid their reproductive period. Syphilis deserves attention because of its impact on mothers, partners and newborns.

P3.181 HEPATITIS C: CHALLENGING MODERN OBSTETRICS

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Introduction Assess the incidence of Hepatitis C on pregnant women overseen by the Hospital de Clínicas from Universidade Federal do Triângulo Mineiro; Delineate the Hepatitis C-infected patients' epidemiological profile.

Methods Survey through Hospital de Clínicas records from 2007 to 2015 for Hepatitis C-infected pregnant women, followed by a review of medical records and by the administration of a structured questionnaire evaluating epidemiological, clinical and neonatal data.

Results 44 cases of Hepatitis C were found in the survey's period – an incidence of 0.4% on the births. On demography, the age of patients varied from 14 to 47 years, with an average of 30 years. The majority of infections were to non-white (56.8%), single (63.6%) and hailing from Uberaba (81.8%) patients. The majority of surveyed women (46.5%) have been diagnosed prior to their pregnancy. On obstetrical aspects, 61.3% had up to 2 previous pregnancies; 52.27% of the women visited the specialised sector during their second trimester; 2 patients had related clinical symptoms; 13.63% missed clinical appointments and 1 patient has been admitted without any prenatal consultation. Viral load was undetectable on 22 patients and 3 patients had a viral load \geq 1 00 000 copies. On births, 84.2% of them were on term; 57.89% had vaginal births. Newborn's weight varied from 1725 to 4135 grams and 89.4% had Apgar \geq 7.

Conclusion Hepatitis C had a higher prevalence on pregnant women over 30 years old. The first specialised service appointment was mainly on the second trimester, probably due to delays on dispensation of public health services. Contagious and infectious diseases are a major challenge to public health, thus screening must be carried on to minimise vertical and horizontal transmissions.

P3.182 OBSTETRIC ASSISTANCE TO HEPATITIS B-INFECTED WOMEN: STRATEGIES AND DIRECTIONS

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Introduction Measure the incidence of Hepatitis B (HB) among pregnant women overseen by Hospital de Clínicas from Universidade Federal do Triângulo Mineiro. Outline their epidemiological profile and assess their obstetric assistance.

Methods Survey of the records of pregnant women with a diagnosis of Hepatitis B from 2007 to 2015, medical record revision and application of a structured questionnaire evaluating their epidemiological, obstetrical and neonatal data.

Results There were 68 cases of Hepatitis B, that is, 0.6% of the births of the surveyed period. On demography, the mean age of the patients was 25.6 years, with variation from 16 to 43 years; the majority of the patients were white (48.5%) and single (45.58%). On obstetrical data, 54.4% had up to 2 previous pregnancies; 47.5% of their first appointments to specialised services were on the second semester; 2 patients had related medical symptoms and 10.29% missed any appointments. On their births, 88.13% were on term and 66.7% were vaginal births. Newborn weights were between 1035 and 4080 grams, 91.52% had APGAR \geq 7 and 88.1% received