

providers, 36.4% from friends or sexual contacts, and 24.2% from media outlets (internet, television).

Conclusion YMSM receiving care at the BCHD STD Clinics are likely to be aware and interested in PrEP but fewer than 10% may be taking PrEP. Given that STD Clinics serve primarily minority young males disproportionately affected by HIV, future work should seek to improve youth-friendly services at public health clinics and leverage awareness and interest in PrEP in order to improve uptake in this vulnerable population.

015.6 DIFFERENCES IN REPORTED TESTING BARRIERS BETWEEN CLIENTS OF AN ONLINE STI TESTING SERVICE (GETCHECKEDONLINE.COM) AND A PROVINCIAL STI CLINIC IN VANCOUVER, CANADA

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Introduction Online STI testing programs are thought to overcome barriers posed by in-clinic testing, though uptake could reflect social gradients (e.g., technology access, higher education). To understand types of barriers mitigated by online STI testing we compared clients of a large STI clinic to clients of *GetCheckedOnline* (GCO).

Methods Our study was conducted in Vancouver after GCO was promoted to provincial STI clinic clients and men who have sex with men (MSM). Clinic and GCO clients were invited to an online survey 2 weeks after receiving test results. Survey questions included barriers/facilitators of testing at individual, provider, clinic and societal levels. We conducted bivariate comparisons between groups (significant results shown at $p < 0.01$).

Results GCO ($n=87$) were older than clinic clients ($n=424$; median 35 vs. 31 years) and a higher proportion were MSM (40.2% vs. 24.4%). More GCO clients reported their reason for testing as routine (58.1% vs. 38.9%) and fewer for symptoms or STI contact (10.3% vs 33.5%). More GCO clients considered accessing online health resources important (76.1% vs 56.5%) but otherwise did not differ on technology skills/use. GCO clients were more likely to report delaying testing in the past year due to clinic distance (22.4% vs 9.7%), less likely to agree that clinic hours were convenient (58.2% vs 77.2%) or that making appointments was easy (49.4% vs. 65.4%), and more likely to report long wait times to see a health care provider (HCP) (47.6% vs 20.7%). GCO clients were more likely to be uncomfortable discussing their sexual history with HCP in general (15.5% vs 5.7%) and where they usually presented for health care (34.9% vs 20.6%), as well as reporting more fear of being judged by HCP (28.6% vs 15.4%).

Conclusion Our study in Vancouver suggests that online testing services may effectively engage individuals with barriers to testing (i.e., clinic access, discomfort with HCP) with few social gradients in uptake. Further evaluation to verify these findings within different cities/populations is needed.

Oral Presentation Session 16

HIV

016.1 QUALITY OF LIFE AND HIV – A BIBLIOMETRIC ANALYSIS OF PUBLICATION TRENDS BETWEEN 1995 TO 2013

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Introduction With an increased longevity achievable with current therapeutic strategies for persons with HIV infection, Quality of Life (QoL) has emerged as a significant medical outcome, and its enhancement has an important goal. Though lacking clarity of definition, assessment of QoL assumes significant as a constellation of HIV-related symptoms negatively affect it. Nevertheless present literature has focused on the various domains of QoL in different setting, an analysis of their pattern of publication and their impact on the vertical transmission of knowledge is vital for a holistic approach in the management of HIV. Hence this study was aimed to analyse the trends of such articles using a new article level metric measure, the Relative Citation Ratio (RCR) which has been published in peer-reviewed journals.

Methods Publications during 1993–2013 were collected using appropriate search words, their RCR and associated factors like total citations, citations per year were calculated.

Results The trend of publications seems to increase from a mere 69 publications in 1995–97 to 423 articles between 2010–2013. However the mean RCR seems to be constant throughout the study period, with an overall mean RCR value of 1.42. Further only 9.5% of the published articles had an RCR value of above 3.

Conclusion Though not designed to be an indicator of long-term impact, citation rates have the potential to track patterns of scientific productivity over time. Data from the present findings sheds light that though the publication trend is increasing, the relative citation of the articles published on QoL is constant, well below the acceptable average. Hence efforts should be directed to improve the quality of research in this field, as this information could be used by various professional societies, individual scientists, and funding organisations to frame essential policies regarding the improvement of the QoL and thus promote positive health amongst this population.

016.2 EVALUATING THE PRESENT AND PROJECTING THE FUTURE: NATIONAL NETWORK OF YOUNG PEOPLE LIVING WITH HIV/AIDS – RJ: LIFE STORIES

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Introduction This study aims to understand the impact of HIV/AIDS related issues on the lives of teenagers and young people, activists from the “National network of teenagers and young people living with HIV/AIDS (RNAJVHA) and the State network of teenagers and young people living with HIV/AIDS of Rio de Janeiro (REAJVHA-RJ)”.