

016.5 THE PSYCHOLOGICAL ASPECTS OF MANAGING HIV INFECTION: QUALITATIVE DATA FROM HIV-POSITIVE MEN WHO HAVE SEX WITH MEN (MSM) AND HIV CLINICIANS IN THE UK

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Introduction In the UK, HIV disproportionately affects men who have sex with men (MSM). In the advent of antiretroviral therapy, HIV is considered a life-altering, rather than life-limiting, condition. However, the socio-psychological aspects of HIV infection can be challenging. Moreover, the promotion of positive wellbeing, health, and behaviour change can be difficult for HIV care-providers. Two studies are presented, which explore the psychological aspects of managing HIV infection from the perspectives of HIV-positive MSM and HIV clinicians, respectively.

Methods A qualitative interview approach was employed. For study 1, 15 HIV clinicians were recruited at sexual health clinics. For study 2, 20 HIV-positive MSM were recruited at sexual health agencies. The data were analysed using thematic analysis and Identity Process Theory from psychology.

Results Results from study 1 yielded the following themes: (1) Assessing the patient's knowledge base, (2) Exploring disclosure patterns in patients, and (3) Promoting positive methods of coping with an HIV diagnosis. Clinicians' accounts elucidate perceived opportunities for, and challenges associated with, health and wellbeing promotion among HIV-positive MSM. Results from study 2 yielded the following themes: (1) Difficult disclosure patterns and experiences, (2) Making sense of the identity transition process, (3) Building resilience amid identity threat. MSM's accounts highlighted the identity threat associated with the experience of living with HIV and the strategies – both effective and ineffective – for coping.

Conclusion Both studies reveal overlap in the perceived challenges of HIV infection amid social stigma. There was some divergence in the construal of HIV and the importance of HIV status disclosure. While clinicians speak from medical/public health perspectives, patients discussed their HIV infection with identity requirements in mind. Collectively, results of both studies highlight possible ways in which wellbeing and health promotion interventions for MSM living with HIV can be designed and implemented. Some recommendations are provided.

016.6 WILLINGNESS OF YOUNG PERSONS IN SOUTH-WESTERN NIGERIA TO PARTICIPATE IN EARLY HIV VACCINE TRIALS

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Introduction An estimated 36.7 million people live with HIV/AIDS in 2015, with more than 3 million people living with the virus in Nigeria, ranking the country among the top three most affected. Because adults are mostly affected by this epidemic, their inclusion in HIV vaccine trials is of utmost

importance in obtaining an effective and acceptable vaccine. This study objectives were to determine the proportion of adults willing-to-participate (WTP) in early HIV vaccine trial, evaluate the factors determining their participation as well as their entire knowledge and perception about HIV vaccine trials. Hypotheses tested included association between WTP and age, gender and knowledge about the vaccine.

Methods Data was obtained from 3500 young persons (15–49 years) recruited by a multi-stage sample technique between September 2015 and September 2016. The cross-sectional study was carried out using a face-to-face interview by trained volunteers and supervised by appointed supervisors and investigators. An informed consent was obtained through a pre-tested structured questionnaire, with questions addressing socio-demographics, HIV vaccine studies knowledge and perception, sexual behaviour and possible stigma from HIV vaccine trial participation. Ethical approval was obtained from the Ethics and Research Committee of the Federal Teaching Hospital, Ido Ekiti, Nigeria. Data was analysed using SPSS software, with significance fixed at $p < 0.05$.

Results The mean age \pm SD was 27.53 ± 3.46 years. 1094 (31.3%) expressed their willingness to definitely participate in the vaccine studies while 999 (28.5%) reported that they may participate especially if a very tangible incentive will be given. Unwillingness to participate was associated with safety concerns (12.0%), side effects (5.0%), fear of HIV infection from vaccine (4.1%), time required for study (1.9%) and partner's sexual intercourse refusal (1.2%). 983 (28.3%) reported people in good health, HIV negative individuals and at low risk of HIV infection, are eligible for HIV vaccine trial. There was a significant association between willing to participate in HIV vaccine trials as well as age and gender.

Conclusion Participation in an HIV vaccine trial in a Nigerian context is likely to be influenced by comprehensive education about the vaccine trial concept, addressing issues relating to concerns and possible risks pertaining to participation as well as incentives, as the WTP in the vaccine trial is quite low probably due to the participants' perception and inadequate knowledge as evidenced in this research.

Oral Presentation Session 17 Country-Specific Investigations

017.1 PREVALENCE OF *NEISSERIA GONORRHOEAE* AND *CHLAMYDIA TRACHOMATIS* INFECTIONS IN DIFFERENT ANATOMIC SITES AMONG MEN WHO HAVE SEX WITH MEN: RESULTS OF 380 MSM WHO ATTENDED A STD CLINIC IN GUANGZHOU, CHINA

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Introduction High prevalence of anorectal *Chlamydia trachomatis* (CT) and *Neisseria gonorrhoea* (NG) have been reported among men who have sex with men (MSM) in many settings. Regular rectal CT and NG screening have been recommended in the United States and other countries, but little data exists on rectal and oropharyngeal CT and NG among Chinese MSM. The aim of this study was to determine the prevalence