Abstracts

average time passed since identification of HIV (OR = 0.989; $p \leq 0.01$); self-stigma (IA-RSS) score (OR = 1.336; $p \leq 0.01$); general health (SF-36) score (OR = 0.977; $p \leq 0.05$), perceived social support provided by friends (MPSS) (OR = 1.323; $p \leq 0.05$), family (OR = 1.217; $p \leq 0.01$) and friendship network sizes (LSNS) (OR = 0.825; $p \leq 0.01$).

Discussion/conclusion Our data suggest that HIV disclosure to confidants with different HIV status is determined by the objective and subjective characteristics of interaction with the other people, as well as the quality of life and maybe disease progress. The study was supported by the Fogarty International Centre at the US NIH, grant No. D43TW001028.

P62 SHARING WEBSITE PAGES TO SUPPORT DISEASE AND PARTNER NOTIFICATION

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Background/introduction Disease and partner notification (PN) are two key roles for a sexual health service; however, there is no simple way to deliver these services. The challenge is amplified when patients and partners are not local to the clinic.

Aim(s)/objectives We therefore tested if enabling a sign posting and information website to share pages by email or text would have utility.

Methods The database of shared pages from 01/08/2013 to 31/01/2015 was reviewed and the most popular identified. The IP address was used to determine the number of unique computers/mobile devices used for this purpose.

Results 109 unique devices shared a total of 662 pages over 542 days of analysis. The biggest users were the result teams of two sexual and reproductive health clinics.

Discussion/conclusion Sharing pages has been used successfully to communicate with patients about infections, clinic locations and contraception. The decision by NHS mail to stop their text

services in April 2015 creates a real need to develop this functionality further to effectively communicate with patients.

P63 FIFTEEN YEAR TRENDS IN HIV DIAGNOSES AMONG MEN WHO HAVE SEX WITH MEN IN THE UNITED KINGDOM: 1999–2013

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Background/introduction As in many other western countries, men who have sex with men (MSM) are most affected by HIV in the UK.

Aim(s)/objectives To describe 15-year trends in HIV among MSM to inform prevention strategies.

Methods National HIV surveillance data were linked to national register deaths and HIV testing data from sexually transmitted infection (STI) clinics. Multivariable analyses revealed predictors of late diagnosis (<350 copies/mL) and mortality.

Results Between 1999–2013, 37,560 MSM (aged ≥ 15) were diagnosed with HIV; diagnoses increased from 1,440 (1999) to 3,250 (2013). The majority of men were white (85%) and UK-born (68%). Probable UK-acquisition was high (81%) including among those born abroad (66%). Median CD4 count rose, 350 cells/mm³ to 463 cells/mm³. Despite a decline in late diagnosis (50% to 31%), >800 men have been diagnosed late annually since 2004. HIV testing in STI clinics in England increased, 10,900 to 102,600. One-year death rates among new diagnoses declined (4.6% to 0.9%) due to fewer deaths among late presenters (4.4% to 1.8%). Older age (>50) and living outside London were predictors of late presentation, while older age and late presentation were predictors of one-year mortality.

Discussion/conclusion In its third decade, the HIV epidemic among UK MSM has continued to diversify. Increases in new diagnoses reflect both increased testing and ongoing transmission. Despite improvements in patient outcomes, >800 men present late each year; death rates remain high and preventable. Culturally appropriate prevention and testing strategies require strengthening to reduce HIV transmission and late diagnosis.

P64 EXPERIENCES OF MEN WHO HAVE SEX WITH MEN (MSM) WHEN ENGAGING IN THE PARTNER NOTIFICATION PROCESS THREE MONTHS FOLLOWING A HIV DIAGNOSIS

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Background/introduction Partner Notification (PN) can be used as a tool for detecting undiagnosed HIV, but fear of stigma around disclosure and concerns about lack of confidentiality are potential barriers and may deter newly diagnosed individuals from engaging in this activity.

Abstract P62 Table 1

Number of shares	Page description
146	Clinic A page for address and transport
85	Chlamydia
35	Gonorrhoea
40	Sexually Transmitted Infections
23	Home page
20	Implant
16	Clinic B page for address and transport
15	Combined contraceptive pill
15	Intrauterine system
15	Herpes
14	Clinic C page for address and transport
8	Syphilis
8	Trichomonas vaginalis
5	Progestogen only pill
5	Non-specific urethritis