

P418 UPTAKE OF HIV PRE-EXPOSURE PROPHYLAXIS (PREP) IN WESTERN NIGERIA: ARE HEALTHCARE PROVIDERS PREPARED FOR THE KEY POPULATIONS?

¹Ibiwumi Usman*, ²Saheed Usman. ¹Kids and Teens Resource Centre, Akure, Nigeria; ²APIN Public Health Initiatives, Abuja, Nigeria

10.1136/sextrans-2019-sti.504

Background HIV pre-exposure prophylaxis (PrEP) can decrease HIV incidence among several high-risk populations. In order to successfully implement PrEP, healthcare providers will need to have knowledge about counselling, monitoring and drug adherence. This study was carried out to determine the awareness, practice and preparedness of healthcare professionals to prescribe PrEP in clinical settings especially to key populations in our communities and identify the factors associated with or encouraging its prescription.

Methods This cross-sectional study was carried out in randomly selected primary, secondary and tertiary level hospitals in Western Nigeria. The target population were physicians and nurses largely involved in the antiretroviral clinics in the hospitals. Data was collected by trained volunteers and supervised by appointed supervisors by a face-to-face interview. All data were statistically analysed, using Statistical Package for the Social Sciences (SPSS) and statistical test of significance was performed with Chi-Square test.

Results A total of 256 consenting respondents participated in the study with a mean age \pm SD of 38.52 ± 9.29 years. A total of 89.8% of the respondents have heard about PrEP, with 54.3% of them aware of both oral and topical PrEP while only 4.3% have ever prescribed PrEP. The main factor associated with PrEP prescription was work experience ($\chi^2 = 20.815$, $df = 1$, $p = 0.001$). Work experience has lower association with PrEP prescription (OR: 0.88, 95% CI: 0.82–0.95).

Conclusion Healthcare professionals in public hospitals in Nigeria are PrEP aware and willing to prescribe, but few have actually ever done the prescription. Regular supply of drugs for pre-exposure prophylaxis purpose and addressing the potential safety issues and medication-related adverse effects will help aid the PrEP implementation effort nationwide especially with focus on the key populations of men having sex with (MSM) who are in a hostile environment in our own neighbourhood.

Disclosure No significant relationships.

P419 PATTERNS OF GROUP SEX ACTIVITY AMONG GAY AND BISEXUAL MEN IN MELBOURNE AND SYDNEY IN AUSTRALIA, 2013–2018

¹Eric Chow*, ²Toby Lea, ¹Christopher Fairley, ²Limin Mao, ²Timothy Broady, ³Benjamin Bavinton, ³Garrett Prestage, ²Martin Holt. ¹Alfred Health, Melbourne Sexual Health Centre, Carlton, Australia; ²UNSW Sydney, Centre for Social Research in Health, Sydney, Australia; ³UNSW Sydney, The Kirby Institute, Sydney, Australia

10.1136/sextrans-2019-sti.505

Background This study analysed trends in group sex among gay and bisexual men (GBM) and the factors associated with group sex. It is important to understand GBM who engage in group sex as they may be at risk of and require more intensive screening for sexually transmitted infections (STI).

Methods The Gay Community Periodic Surveys are annual behavioural surveys of GBM. We analysed data collected from

Melbourne and Sydney during 2013–2018. Participants were eligible if they were ≥ 16 years, male, and reported sex with men in the last 5 years. We calculated trends in group sex (sex involving at least two other men) in the last 6 months and used multivariable logistic regression to identify factors associated with it.

Results Among 31,341 GBM, the proportion engaging in group sex increased from 30.9% in 2013 to 36.8% in 2018 ($p_{\text{trend}} < 0.001$). Group sex was associated with having ≥ 10 male partners in the last 6 months (aOR: 3.63; 95% CI: 3.38–3.90), using Viagra (aOR: 1.40; 95% CI: 1.29–1.52) and testing for HIV/STI in the last 12 months (aOR: 1.36; 95% CI: 1.25–1.47). Compared with HIV-negative GBM who did not use PrEP ($n=23,003$), HIV-negative GBM who used PrEP ($n=2,299$; aOR: 1.57; 95% CI: 1.39–1.77) and HIV-positive GBM ($n=2,701$; aOR: 1.15; 95% CI: 1.03–1.28) were more likely to report group sex. GBM who met male partners at private sex parties (aOR: 5.03; 95% CI: 4.30–5.89) and saunas (aOR: 2.34; 95% CI: 2.17–2.51) had the highest odds of engaging in group sex.

Conclusion Group sex has become more common among GBM in Melbourne and Sydney over the last 6 years. While group sex is concentrated among PrEP users and HIV-positive GBM, there remains a large group of non-PrEP-users who engaged in group sex and would benefit from regular STI screening (and potentially the offer of PrEP).

Disclosure No significant relationships.

P420 UNDERSTANDING PREP SERVICE DELIVERY PREFERENCES AMONG BLACK WOMEN IN URBAN AND RURAL COUNTIES IN THE US DEEP SOUTH

¹Latesha Elope*, ¹Chastity McDavid, ¹Bernadette Johnson, ²Bretia Gordon, ³Barbara Van Der Pol, ⁴Jeanne Marrazzo, ¹Michael Mugavero. ¹University of Alabama at Birmingham, Medicine, Birmingham, USA; ²Montgomery Advocacy and Outreach, Montgomery, USA; ³University of Alabama at Birmingham, Medicine/Infectious Diseases, Birmingham, USA Minor Outlying Islands; ⁴University of Alabama, USA

10.1136/sextrans-2019-sti.506

Background In the US, women account for approximately 20% of all new HIV infections, among which two-thirds are Black women. These health disparities are most pronounced in the Deep South. We conducted focus groups in urban and rural settings in Alabama to understand attitudes and preferences for PrEP service delivery among Black women.

Methods Our group members consisted of HIV-negative women between the ages of 16–65. Items and analyses were grounded in a conceptual framework using constructs from two behavioral models. Two coders independently conducted inductive and deductive thematic coding to determine major themes.

Results 25 rural (median age 44, 48% income $< \$25,000$, 36% Bachelor's degree) and 22 urban residents (median age 35, 14% income $< \$25,000$, 54% Bachelor's degree) were enrolled. Common themes identified among both groups of women were lack of awareness regarding PrEP and openness to utilization of PrEP if self-perceived risk for HIV was high. Among rural women, many expressed more overall distrust in knowing their partners risk of HIV infection as well as fear of potential disclosure if accessing PrEP within their community. Rural women also reported more concerns about stigma related to PrEP and structural barriers limiting access to service. Many rural women felt churches could be avenues to

increase PrEP awareness. While urban women did not endorse the same concerns over where they would receive PrEP, they commonly reported concerns that PrEP would lead to increased “promiscuity” among its users.

Conclusion Black women in the Deep South had differing preferences regarding PrEP service delivery and messaging depending on whether they lived in urban or rural settings. These findings can inform targeted intervention development by emphasizing the need for partnerships with trusted community organizations and utilization of service delivery strategies that allow for anonymity to increase uptake of PrEP especially among rural Black women.

Disclosure No significant relationships.

P421

“THE PROMISE OF PREP”: MOTIVATIONS FOR TAKING PREP AMONG EARLY-ADOPTING NEW ZEALAND GAY AND BISEXUAL MEN

Tanushi Punihiwewa, Peter Saxton*, Janine Wiles. *University of Auckland, School of Population Health, Auckland, New Zealand*

10.1136/sextrans-2019-sti.507

Background In 2018 amid rising HIV diagnoses, New Zealand became one of the first countries to fully fund pre-exposure prophylaxis (PrEP) through its public health system. PrEP has clear HIV prevention benefits but also potential trade-offs, namely behavioural risk compensation among gay and bisexual men (GBM). These concerns can trouble public health leadership, soften PrEP promotion and delay service re-orientation towards PrEP delivery, hampering implementation. Understanding the motivations of early PrEP adopters could address stakeholder concerns and improve PrEP roll-out.

Methods We examined data from the baseline “NZPrEP” demonstration project among 150 GBM conducted in Auckland sexual health clinics 2017–18. All participants completed a linked anonymous online survey at enrolment. Open-ended responses to questions on PrEP motivations and clinic experiences were coded in NVivo and subject to inductive thematic analysis. Secondly, using a deductive approach we applied the identified themes to the theory of planned behaviour (TPB).

Results We identified six motivations by early-adopters for taking PrEP: risky behaviour; engaging in condomless sex; altruism; risk reduction and prevention; early and free access to PrEP; and peace of mind and autonomy. These themes clearly mapped onto the three main tenets of TPB, namely behavioural beliefs, normative behaviours, and perceived behavioural control. In addition, five themes were also identified regarding PrEP implementation: accessibility; clearer communication; greater promotion; clinic attitude; and gratitude.

Conclusion Early-adopters expressed several motivations for PrEP that align with recognised public health values. Themes such as altruism (wanting to protect partners and the community as well as oneself), risky behaviours (difficulties negotiating safe sex) and peace of mind (reducing anxiety in a high HIV prevalence community) can help persuade stakeholders that PrEP is an ethical as well as an effective HIV prevention tool. Such findings are especially pertinent for government officials, general practitioners, the general public and gay communities themselves.

Disclosure No significant relationships.

P422

USE OF DOXYCYCLINE PROPHYLAXIS AGAINST STI AMONG GAY AND BISEXUAL MEN TAKING PRE-EXPOSURE PROPHYLAXIS IN MELBOURNE

Eric Chow*, Christopher Fairley. *Alfred Health, Melbourne Sexual Health Centre, Carlton, Australia*

10.1136/sextrans-2019-sti.508

Background Two trials have shown the use of doxycycline prophylaxis could prevent sexually transmitted infections such as chlamydia and syphilis among men who have sex with men (MSM) but its use is controversial because of concerns about the potential to increase antimicrobial resistance. This study aimed to estimate the proportion of MSM who used doxycycline prophylaxis and the related factors.

Methods MSM who taking pre-exposure prophylaxis for HIV (PrEP) attended the Melbourne Sexual Health Centre between June and November 2018 were invited to complete a question on whether they had taken doxycycline to prevent STI in the past month. Demographic characteristics and sexual behavioural data were also collected as part of routine STI care. Multivariable logistic regression with generalised estimating equations was used to identify the factors associated with the use of doxycycline prophylaxis for STI.

Results There were 1,686 men reported taking PrEP during the study period and 1,065 (63%) completed the additional question on doxycycline. Of those, 105 men (9.9%; 95% CI: 8.1–11.8%) used doxycycline prophylaxis in the past month. Multivariable analysis showed that men who injected drugs in the last 3 months had higher odds of using doxycycline prophylaxis (aOR 3.26; 95% CI: 1.50–7.08) compared to those who did not inject drugs. Use of doxycycline prophylaxis was not associated with demographic characteristics (age and country of birth) and sexual behaviours (number of casual partners and condomless anal sex in the last 3 months).

Conclusion About one in ten MSM taking PrEP who also use doxycycline prophylaxis to prevent STI. This is the first estimate among Australian MSM and it is similar to the data from London showing 8% of MSM taking doxycycline prophylaxis in a sample of 106 MSM. Use of doxycycline prophylaxis is associated with drug use behaviours but not sexual behaviours.

Disclosure No significant relationships.

P423

PRE-EXPOSURE PROPHYLAXIS AS AN ALTERNATIVE TO PEP FOR ELECTIVES. SURVEY ASSESSING MEDICAL STUDENTS' KNOWLEDGE AND BELIEFS

¹Zayn Majeed*, ¹Hyun Lee, ²Pete Taylor-Hunt, ¹Kiran Kaur Khepar, ¹Ann Wylie, ³John Mcorley. ¹King's College London, GKT School of Medical Education, London, UK; ²King's College London, King's Undergraduate Medical Education in the Community, London, UK; ³London North West University Healthcare NHS Trust, Northwick Park Hospital GUM, London, UK

10.1136/sextrans-2019-sti.509

Background Pre-exposure prophylaxis (PrEP) is indicated for many populations at a higher risk of acquiring HIV through sexual exposure. Healthcare students engaging in medical electives may also be at a higher risk of acquiring HIV through occupational exposure. Since access to post-exposure