

**Methods** In 2010, 44 local gynaecologists were included in this prospective study. They reported demographic data for every woman aged 15–64 years that they visited for any reason. For women diagnosed with eGW, behavioural and clinical data were recorded. Prevalence was calculated as the proportion between the number of women with eGW and that of women visited; incidence was calculated as the proportion between the number of women with a new diagnosis of eGW and that of women visited. Standardized prevalence by age was used to estimate the number of eGW cases occurring in Italy in the female population aged 15–64 years.

**Results** In 2010, 16,410 women were included; 63 women were diagnosed with eGW (prevalence: 3.8%, 95% CI: 2.9–4.9). The highest prevalence was observed among 15–24 year-old women compared to women older than 25 years of age (7.2% vs 3.2%), with a trend significantly decreasing by increasing age ( $p$ -value < 0.001) and among women living in Southern Italy compared to those living in Central and Northern Italy (5.4% vs 2.5%,  $p$  = 0.003). The incidence was 3.0% (95% CI: 2.2–3.9). The estimated number of women with eGW among women aged 15–64 years in Italy in 2010 was approximately 69,000.

**Conclusions** These data confirm the prevalence of eGW reported in a retrospective Italian study conducted among gynaecologists (Vittori *et al.* 2008), and stress the importance of clinical networks in investigating STI epidemiology, as well as promoting safe sex, implementing early diagnosis, treatment and prevention.

### P3.038 HEPATITIS C COINFECTION IN PERINATALLY INFECTED HIV CHILDREN

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**Background** this study analysed epidemiological aspects of HIV/HCV confection in HIV infected children at Instituto Infectologia Emilio Ribas, São Paulo, Brazil.

**Methods** HCV serology is performed on a routine basis on all children who attend our hospital. In this study, we analysed all patients with confirmed HCV infection (positive qualitative PCR for HCV). The data collected was age, sex, mode of transmission of HCV (HCV positive mother, use of blood transfusion and use of immunoglobulin).

**Results** Approximately 400 patients are seen regularly at our institute. Of these, 12(3%) were identified as HCV confirmed. 7 were females and 5 are males. Age ranged from 14 to 20 years on the moment of analysis. All patients were mother to child transmission of HIV. Regarding possible mode of transmission of HCV, 2 had HCV positive mothers, 2 had HCV negative mothers and 8 (66%) were unknown. Related to blood transfusions, 5 (42%) had history of blood transfusions, 6 (50%) did not and one was unknown, all blood transfusions were done at early infancy. All patients received immunoglobulin for more than 5 years (1993–2007) for prophylaxis of recurrent infections as recommend by national guidelines of HIV treatment. There were no cases of IV drug use. Two patients who initially had negative HCV serology a few years later seroconverted and had confirmation of HCV infection.

**Conclusion** our prevalence of HCV/HIV co-infection is higher than other studies, there was no significant difference between genders, unfortunately 8 children had unknown mother HCV condition, because many of them were orphans. Calls attention the use of biological products as a probable mode of transmission, in particular the 2 cases of confirmed sero-conversion observed.

### P3.039 EARLIER MENARCHE IS ASSOCIATED WITH A HIGHER PREVALENCE OF HERPES SIMPLEX TYPE-2 (HSV-2) IN RURAL MALAWI

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**Background** We have previously shown that girls with earlier menarche tend to have sexual debut and marry at a younger age, and to drop out of school earlier. We investigated the association between menarche and HSV-2 infection.

**Methods** The Karonga Prevention Study in northern Malawi includes demographic surveillance in a population of about 33,000. Information on sexual behaviour was collected in annual rounds from 2007 and serosurveys for HSV-2 were done. A question on age at menarche for women aged 15–30 was added midway through the first sexual behaviour round. For those with missing data on age at menarche from the first round the response from the subsequent round was used.

**Results** 6796 women were interviewed, 86% of those eligible. This included 3965 women aged 15–30: 3419 (86%) were tested for HSV-2 and 870 were positive (25.5%). 3166 reported age at menarche: approximately one quarter had menarche aged < 14, 14, 15 and ≥ 16. After adjusting for current age, there was a strong correlation between older age at menarche and lower prevalence of HSV-2: compared to those with menarche aged < 14, the age-adjusted odds ratios were 0.89 (95% CI 0.71–1.1), 0.71 (0.57–0.89) and 0.69 (0.54–0.89) for menarche aged 14, 15 and ≥ 16 respectively. This association persisted after adjusting for socio-economic factors, including schooling, and for proximal risk factors (marital status, age at first sex, lifetime number of partners).

**Conclusion** In this population earlier menarche appears to lead to multiple disadvantages. Since the association with HSV-2 persisted after adjusting for measured sexual behaviour factors this suggests that early menarche leads to riskier behaviours not captured in our survey, for example having higher risk partners. Age at menarche is likely to drop with improving nutrition, putting more young women at risk.

### P3.040 THE EPIDEMIOLOGY OF HERPES SIMPLEX VIRUS TYPE-2 INFECTION AMONG PREGNANT WOMEN IN RURAL MYSORE TALUK, INDIA

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**Objectives** To assess the prevalence and correlates of herpes simplex virus type-2 (HSV-2) infections among pregnant women attending mobile antenatal health camps in rural villages in Mysore Taluk, India.

**Methods** A cross-sectional community-based study was conducted between June 2007 and Dec 2008 among pregnant women living in rural villages in Mysore Taluk. Each participant completed an interviewer-administered questionnaire in Kannada and consented to provide a blood sample for HIV testing and other antenatal investigations. All women were also screened for type specific HSV-2 IgG antibodies. Multivariable logistic regression models were used to analyse sociodemographic and other behavioural related characteristics related to the prevalence of HSV-2 infection.

**Results** There were 487 women found to be pregnant in the selected 52 different villages in Mysore Taluk. Majority (478/487, 98%) participated in the study and underwent an interviewer-administered questionnaire and other procedures. HSV-2 prevalence was 6.7% (95% confidence interval [CI] 4.4–9.0) among the study population, while only a single woman tested positive for HIV. The average age of women in was 21 years and had been married for an average of 34 months. Women whose main sex partner travelled away from home had 2.68 (CI: 1.13–6.34) times the odds of being HSV-2 seropositive