

P3.192 CONSERVATIVE TREATMENT OF PENILE EXTRAMAMMARY PAGET DISEASE IN HIV POSITIVE PATIENT - IMIQUIMOD CREAM VS. PHOTODYNAMIC THERAPY

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Background The penis is an uncommon site for the presentation of extramammary Paget disease (EMPD). EMPD usually occurs in individuals between the ages of 50–80 years and is more common in women. European age standardised Incidence of EMPD within Europe is 0.6 per 1000,000 person years. Radical resection of diseased skin is the preferred therapy. Several non-surgical modalities have been used to treat EMPD, which include radiotherapy, topical imiquimod, topical 5-fluorouracil, topical bleomycin, photodynamic therapy, CO₂ laser ablation, and topical retinoids. Systemic chemotherapy also has been used to treat advanced EMPD.

We describe a case of EMPD that was discovered in our patient.

Results The patient initially underwent a biopsy from the lesion on the glans penis with the result EMPD. Based on CT examination the tumour (size 3 × 2cm) was localised on the glans penis, with no signs of overgrowth from the urogenital tract. The urologists recommended wide local excision of the tumour or glansctomia as the last treatment possibility due to the potential functional disability of the genital.

We started the conservative therapy with imiquimod cream with initial good response. Due to the lack of effect of the imiquimod after 3 weeks the treatment was changed to the photodynamic therapy (PDT). After three cycles of PDT at intervals of two months seems the results to be satisfactory based on the gradual regression of the tumour.

Conclusion The photodynamic therapy seems to be an effective therapy for the conservative treatment of EMPD in patients in whom is the surgical treatment contraindicated for some reason.

P3.193 THE PREVALENCE OF HIV AND STIS AMONG FEMALE SEX WORKERS IN SHIRAZ, SOUTH OF IRAN: BY RESPONDENT DRIVEN SAMPLING

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Background As a concentrated epidemic, HIV is spreading rapidly in one or more sub-groups, but in the general population its prevalence is relatively low. Female sex workers (FSWs) and their partners are at greater risk for HIV infection. A successful comprehensive HIV surveillance should include the prevalence of HIV, sexually transmitted infections (STIs) and associated risk behaviours. The aim of the present study was to determine the prevalence of HIV and STIs including gonorrhoea, Chlamydia, Herpes simplex type 2 (HSV-2) and syphilis among FSWS in order to plan appropriate interventions.

Materials This is a cross-sectional study of 278 FSWS conducted in Shiraz, by using respondent driven sampling (RDS), from June to March 2010. The recruitment chain started with 14 seeds, were taken for HIV, syphilis, HSV-2, gonorrhoea, and Chlamydia tests.

Results The HIV prevalence was 4.7% (13/278); the most prevalent STI was HSV-2 9.7% (27/278), followed by Chlamydia 9% (25/278), gonorrhoea 1.43% (4/278) and syphilis (0/278). The FSWS reported history of drug abuse (69.9%) of which 16.4% had history of injecting drug use (IDU). 79.8% of the participants stated, their

incentive for having sex in the previous month was financial. During this period, 24.4% had unprotected intercourse in previous month and 30.1% used condom sometimes, 4.7% almost every time and 40.6% every time.

Conclusions The necessity of implementing preventative intervention programme is an urgent issue. Educational programmes on mode of transmission of HIV/STIs, STIs syndrome, and HIV/STIs counselling, testing and reproductive healthcare should be included in FSWS- oriented programmes.

P3.194 AN OUTBREAK OF GONORRHOEA IN YOUNG HETEROSEXUALS: ENHANCING EPIDEMIOLOGICAL UNDERSTANDING BY THE USE OF MOLECULAR TYPING

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Background Since 2011, an outbreak of gonorrhoea (GC) has affected heterosexual young adults in Northumberland, England. Despite extensive control measures, the outbreak has continued. An in-depth epidemiological analysis, using enhanced clinical and behavioural data complemented by molecular typing, was used to characterise the sexual networks associated with the outbreak and thereby enable better targeting.

Methods A multifaceted approach to outbreak control has been implemented including health promotion/awareness-raising amongst public and healthcare professionals, increased testing including dual-testing of chlamydia screening programme samples, and the introduction of enhanced surveillance linked to molecular typing (NG-MAST) to identify clusters and delineate the extent of the outbreak.

Enhanced surveillance collected demographic, risk factor and partner information for the outbreak cases (Northumberland residents) and cases in the wider area from April 2011 to December 2012.

Results A total of 433 GC cases were diagnosed in the study period, of which 166 (38%) were part of the outbreak. Compared with other local cases, outbreak cases were significantly associated with; being heterosexual (OR:12.8[95% C.I.: 5–31]), female (OR:2.2[1–3]), white British (OR:9.6[2–84]), under 20 years (OR:3.3[2–5]), co-infected with Chlamydia (OR:1.8[1–3]), no contraception use (OR:2.7[1–6]), no test of cure (OR:1.6[1–2]) and strain type genogroup G25 (OR:11.6[3–55]).

G25 accounted for 58% of all typed cases (5% in UK) and was almost exclusively found in the outbreak area, which supported local knowledge that the networks were restricted to a particular geographical area and the outbreak was not spreading into the wider population. G2992 (4% in UK, 18% in local cases) was not seen amongst outbreak cases.

Conclusions Enhanced epidemiological data complemented by molecular typing can be used to better characterise outbreaks; this study demonstrated a highly concentrated sexual network of young adults, highlighting the importance of targeted messages and approaches to improve uptake of testing and practise of safe sex.

P3.195 BURDEN OF HEPATITIS 'C' AMONG HIGH RISK PEOPLE OF HIV/IV DRUG USERS: A COMMUNITY BASED STUDY FROM EASTERN NEPAL

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Background Hepatitis C (HCV) is a single stranded RNA flavivirus, it is estimated that 170 million people worldwide are infected