Background
Sub-Saharan Africa has the highest rates of curable sexually transmitted infections (STIs) globally with the greatest morbidity due to Neisseria gonorrhoea and Chlamydia trachomatis falling on women. In response to a demand for comprehensive reproductive health screening, we proposed that providing additional N. gonorrhoea and C. trachomatis testing using self-collected swabs.

Methods
As part of a cervical cancer screening project in Kisenyi, a densely populated urban community in Kampala, Uganda with low socio-economic-indicators, women aged 30 to 69 were offered N. gonorrhoea and C. trachomatis testing using self-collected swabs.

Results
Out of 206 women approached, 203 provided a self-collected swab for analysis. Twenty-six women (13%) were found to have C. trachomatis, 2 (1%) were positive for N. gonorrhoea and one participant was co-infected. Of the women infected, 76% were successfully contacted and of these 62% attended follow-up to receive appropriate treatment. Women reporting no condom use in the last month accounted for 95% of those with C. trachomatis while use of the oral contraceptive pill was not associated with higher rates of either infection.

Discussion
The acceptance and uptake of testing for common STIs in this urban sub-Saharan environment was very positive. Due to the high burden of disease inferred by these easily treatable infections, further integration of appropriate screening should be incorporated into existing reproductive health programmes.

TB TREATMENT FOR HIV POSITIVE PREGNANT WOMEN: CHALLENGES TO SCREENING AND DIAGNOSIS


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Background
According to Kenya’s PMTCT guidelines, all HIV positive women who present for antenatal care should be tested for TB.

Methods
HIV-positive, pregnant women were recruited from two maternity hospitals in Nairobi, Kenya. The results presented here are based on surveys completed at baseline as well as 48 hour follow-up. This data was collected from 305 women as part of a study on the use of mobile technology in PMTCT programmes. Questionnaires included questions on socio-economic characteristics, history of current and previous pregnancies, knowledge of PMTCT, TB screening and treatment and the use of Nevirapine. Chi-square tests and multivariable logistic regression were used to assess statistically significant associations between variables of interest and TB screening.

Results
Overall screening for TB in our sample was 10.3% with no significant difference between the two hospitals (11.4% versus 8.4%). Analysis also revealed no significant difference between groups based on sociodemographic status (including age, education, marital status and income) or based on the number of antenatal visits or gestational age at first presentation.

Conclusion
The screening for TB among pregnant women seems to be offered less regularly, however, with only 10% of women screened. In our sample, the lack of significant difference in screening between facility, by sociodemographic characteristics or by when they access services seems to suggest suboptimal TB screening in pregnant women is a systemic issue.

EARLY EVALUATION OF THE ISEAN HIVOS PROGRAM’S HIV/AIDS BCC ONLINE INITIATIVE FOR MSM AND TG COMMUNITIES IN SOUTH EAST ASIA


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Online BCC Outreach Intervention was developed by the ISEAN HIVos Program to reach the hidden MSMs and TGs populations in Indonesia, Malaysia, Philippines and Timor Leste. The initiative