trimester or on the date of delivery among all pregnant women, especially among pregnant women without syphilis testing before the third trimester, leaves a critical gap in the prevention of congenital syphilis infection. Interventions should be developed to increase prenatal syphilis testing as recommended.

P09.19 RESULTS FROM A PREVALENCE STUDY OF NEISSERIA GONORRHOEA AND CHLAMYDIA TRACHOMATIS IN A COMMUNITY-BASED, PEER-LED HIV TESTING SERVICE

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10.1136/sextrans-2015-052270.403

Introduction PRONTO!, Victoria's community based rapid point of care (RPOC) testing service, opened in August 2013. RPOC syphilis testing was introduced in June 2014. To assess the need and feasibility of comprehensive STI testing at PRONTO! a *Neisseria gonorrhoea* (NG) and *Chlamydia trachomatis* (CT) testing trial was conducted in November–December 2014. We describe site specific positivity of NG and CT infection and the characteristics of gay, bisexual and other men who have sex with men (GBM) testing positive.

Methods All GBM testing for HIV between November 7–December 23 2014 were offered NG and CT testing, with clients instructed in the self-collection of anal, genital and throat swabs. Client characteristics were collected using standard PRONTO! client surveys and matched to test results. All clients with an infection were notified by telephone and referred to a high case-load clinic for treatment.

Results Among 239 clients, 186 (78%) opted to receive NG and CT tests and 35 (18.8%) tested positive for at least one of NG or CT. Of the 22 (11.8%) positive NG results, there were nine anal (5.0%), two urethral (1.1%), and 15 throat (8.2%) infections. Of the 17 (9.1%) positive CT results, there were 12 anal (6.6%), eight urethral (4.3%), and three throat (1.6%) infections. Twelve men (6.4%) tested positive for more than one STI or at multiple sites. Demographic and risk characteristics were largely similar between men testing positive or negative for NG and/or CT with the exception that group sex in the previous six months was associated with both CT (OR = 4.65; 95% CI = 0.96–7.3) and NG (OR = 2.54; 95% CI = 1.02–6.33) positivity.

Conclusion STI testing using self-collected samples is a feasible model for screening in a community-based RPOC testing service. The high prevalence of infections and acceptability testing for bacterial STIs supports the introduction of comprehensive STI screening at PRONTO!.

Disclosure of interest statement All authors have no conflicts to declare. The Victorian Department of Health funds the PRONTO! service which is run by the Victorian AIDS Council. The authors would like to acknowledge the NHMRC who provide funding to Kathleen Ryan as a public health scholarship recipient and Mark Stoové through a Career Development Fellowship. The authors gratefully acknowledge the contribution to this work of Victorian Operational Infrastructure Support Program received by the Burnet Institute.

P09.20 TREND OF STIS PREVALENCE AMONG WOMEN AND MEN IN MOROCCO BETWEEN 1999 TO 2011

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10.1136/sextrans-2015-052270.404

Background The Ministry of Health in Morocco conducted several studies to determine the prevalence of STIs in the Moroccan population. Two studies in 1999 and 2011, among women consultants in family planning units (FPU) for studied the aetiology and for follow the trends of genital tract infections and two studies in 2001 and 2009 to determine the aetiological profile of urethral discharge (UD).

Methods A samples of 760 (1999) and 256 (2011) women who consult in the maternal and infant health units (MIHU) and in the FPU were recruited and samples of 422 (2001) and 171 (2009) men complaining of UD were recruited in basic health services. *Neisseria gonorrhoeae* (GC) identification was performed by culture and PCR and *Chlamydia trachomatis* (CT) was detected by PCR. HIV and Syphilis status was determined for all the patients.

Results Results showed that cervical infection due to GC and CT increased respectively from 0,7% to 0,9% and 4,02% to 4,4% from 1999 to 2011. Urethral discharge caused by GC and CT extend respectively from 41,6% in 2001 to 62,8% in 2009 and from 6,3% in 2001 to 10,4% in 2009. Syphilis serology decreased in women and men and no case for the HIV was detected.

Conclusion The increase of cervical infections and urethral discharges with GC and CT showed that the asymptomatic infections in women and the UD are a serious problem for the Moroccan population. These studies has allowed the Ministry of Health (MOH) to update the data on the aetiology of STIs in women and men and therefore to strengthen primary prevention of STIs and regularly monitor trends in prevalence of these infections among the general population and also among vulnerable groups in particular.

Disclosure of interest statement We declare that none of the authors has conflicts of interest relevant to this work and no pharmaceutical grants were received in the development of these studies.

P09.21 PERFORMANCE OF GENEXPERT® CT/NG IN THE DIAGNOSIS OF NEISSERIA GONORRHOEA AND CHLAMYDIA TRACHOMATIS AMONG MEN AND WOMEN WITH GENITAL DISCHARGE SYNDROME IN ZIMBABWE

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10.1136/sextrans-2015-052270.405

Background In many countries, patients with genital discharge syndrome (GDS) are treated syndromically with antibiotics that