

(12.1%) were the major malignancies seen in our study. Carcinoma lung 3 (9.1%), Hodgkin's lymphoma 2 (6.1%), carcinoma anal canal 2 (6.1%) and 1 case each of Acute myeloid leukaemia, carcinoma colon and Ewing's sarcoma was seen in our study. The median CD<sub>4</sub> count at the diagnosis of malignancy was 214 IQR(159-436) cells/ $\mu$ l. In our study 24 (72.7%) patients were on cART at the time of diagnosis of the cancer.

**Conclusion** In our study the percentage of NADCs was more when compared to ADCs. Non- Hodgkin's lymphoma was the most common cancer seen in our study population. Kaposi sarcoma was not seen in our study population confirming the fact that it is a rare malignancy among PLHIV in our country. With longer survival of PLHIV in India due to potent cART malignancy will become an important issue for HIV physicians.

### P3.51 ABSTRACT WITHDRAWN

### P3.52 AWARENESS OF HIV/AIDS AMONG MALAYALI TRIBES, YELAGIRI HILLS

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**Introduction** Despite remarkable world-wide progress in the field of diagnostic, curative and preventive medicine, still there are large populations of people living in isolation in natural and unpolluted surroundings far away from civilisation, maintaining their traditional values, customs, beliefs and myths. They are commonly known as tribes and are considered to be the indigenous people of the land. This study aimed to assess HIV-related knowledge, attitudes and practices among Malayali tribes, Yelagiri Hills, Tamil Nadu, India.

**Methods** A cross-sectional study on Malayali tribes aged between 20 and 30 years old was undertaken to evaluate their KAPs. We selected 200 eligible samples through systematic random sampling from different villages of Yelagiri Hills.

**Results** The majority of the population was unaware of HIV (49%). Of the population who were aware 59% knew that it can be transmitted by sexual intercourse and 88% from mother to child. Misconceptions about transmission of HIV were observed among 39.3% to 44.3% of respondents. More 75% mentioned village health workers as major sources of information on HIV/AIDS.

**Conclusions** Despite adequate knowledge about HIV/AIDS, misconceptions about routes of transmission were found. Negative attitudes to HIV/AIDS and risky practices were also present. Educational programmes with specific interventions are recommended to increase KAPs and to prevent new HIV infections among this population. It was recommended to increase KAPs and to prevent new HIV infections among this population.

### P3.53 LOST OPPORTUNITIES INVESTIGATION TO PREVENTION MOTHER-TO-CHILD TRANSMISSION HIV WITH LATE DIAGNOSIS

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In 2011, the city of São Paulo started investigations on lost opportunities for HIV mother-to-child transmission prevention on notified children born since 2000, infected by their mother's HIV. Main office team, responsible for STI/HIV epidemiological surveillance, controls the new mother-to-child HIV transmission notifications, sending each case to their home region. The local teams investigate the cases on diagnostic sites, following, notification and, if necessary, family or caregiver's interviews. Data collected on mothers and children are registered on a database, improved and analysed on Microsoft Excel. From 2011 to 2016, 188 children born between 2000 and 2015 which were infected by mother's HIV were investigated. From which, 44 mothers (23,4%) were diagnosed before pregnancy, 25 (13,3%) during pregnancy, 22 (11,7%) during labour, 68 (32,2%) after labour and 29 (15,4%) there was no information. Among the 188 investigated mothers, 117 (62,2%) attended to prenatal consults, 42 (22,4%) didn't and there was no information on the other 29 (15,4%). 13 (13,4%) of the 97 women diagnosed after labour or without information did not attend to prenatal consults, 4 (4,1%) did it late, 2 (2,1%) denied to do it, on 2 of them (2,1%) the exams were not prescribed and 21 (21,6%) of them had negative result on the exam. Among those 97 women, 52 (53,6%) attended to prenatal consults while 21 (21,6%) didn't, and the 24 remaining (24,8%) there's no data. From the 52 that attended to prenatal consults, but had after labour diagnostic or without this information, 46 (88,5%) breastfed their children and 15 (28,8%) didn't give their children the antiretroviral drugs properly. Whereas women may be infected at the end of pregnancy, making harder diagnostic or during breastfeeding, close follow-up of just delivered woman, with periodic HIV testing and the incentive to using condoms among breastfeeding and pregnant women is important. Moreover, women more vulnerable to HIV must be encouraged to do the tests, prenatal and postnatal.

### P3.54 ABSTRACT WITHDRAWN

### P3.55 PATTERN OF SYPHILIS AND HIV CO-INFECTIONS AMONG ART TREATMENT NAÏVE ADULTS IN A TERTIARY INSTITUTION IN IBADAN, NIGERIA

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