

dual therapy to treat gonococcal infection (ciprofloxacin plus azithromycin). However, regional studies performed in three Brazilian states demonstrated quinolone resistance. For these states it was recommended to replace the quinolones by third generation cephalosporin. The aim of this study was to perform a Brazilian national gonococcal antimicrobial surveillance.

Methods The surveillance study included seven collection sites representing five geographic regions of Brazil. A total of 550 NG isolates from male urethral discharge was sent to the gonococcal national reference laboratory for analysis. The minimum inhibitory concentration (MIC) with the agar dilution method was performed for penicillin, tetracycline, ciprofloxacin, ceftriaxone, cefixime and azithromycin.

Results The sensitivity profile of the NG isolates was performed in 131 isolates from the Southeast, 104 from the Northeast, 100 from the North, 68 from the Center-West and 147 from the South. In addition to penicillin and tetracycline, a high level of resistance for ciprofloxacin (47% to 78% of isolates) was observed in the isolates of all the regions. All the isolates were sensitive to ceftriaxone and cefixime, although one isolate was found with elevated MIC. Regarding azithromycin sensitivity, the majority of the isolates were sensitive, but the emergence of an intermediate (5% to 15%) or resistant (4% to 10%) profile needs to be monitored.

Conclusion The national survey confirmed the high level of ciprofloxacin resistance already described worldwide. These results indicate the need to urgently change Brazilian recommendation for gonorrhoeae treatment and the importance of systematic gonococcal resistance surveillance.

P3.147 PREVALENCE OF SEXUALLY TRANSMITTED INFECTIONS AND ASSOCIATED FACTORS IN WOMEN WHO HAVE SEX WITH WOMEN

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Introduction The present research aims to fill a gap in the national and international literature concerning prevalences and factors related to STI (Sexually Transmitted Infections) in Women who Have Sex with Women (WSW).

Methods It is a cross sectional, analytical and non-randomized study with 100 WSW from Botucatu - SP and surrounding regions who answered the call from social media, mass communication means, health services and friends or acquaintances from January to November, 2015. Data was obtained by the researchers involved in the main study, through interviews, blood tests to diagnose HIV, syphilis and hepatitis B and cervical sample collection to investigate Chlamydia Trachomatis, Neisseria Gonorrhoeae, HPV through PCR and oncotic cytology to screen Trichomonas vaginalis. Associations were estimated by multiple regression.

Results Total prevalence of STI was 35%, chlamydia infection (3.3%), HIV infection (2.0%), Trichomonas vaginalis (1.1%) and syphilis (1.0%). Neisseria Gonorrhoeae and Hepatitis B were not found. The factors associated to STI were: to be single, [OR=3,76 (CI:95%: 1.14–12.43); p=0030], use of sex toys [OR=3,87(CI:95%: 1.14–13.16); p=0030], and number of male partners in the previous year [OR=7,99 (CI:95%: 1.51–42.44); p=0015].

Conclusion Considered as whole, these data lead to conclusion that the individuals of this study presented high vulnerability to STI/AIDS, as shown by the high prevalence of STI. This study clearly shows the need for a specific health assistance to these women, promoting prevention and education in a holistic approach.

P3.148 REPORTED SEXUALLY TRANSMITTED INFECTIONS IN BRAZIL: PREVALENCE AND RISK FACTORS

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Introduction Population-based studies help provide more-robust prevalence estimates and related factors, which are needed to drive sexually transmitted infection (STI) prevention and control programmes. We use data from the Brazilian Survey of Knowledge, Attitudes, and Practices (PCAP) to examine the prevalence of self-reported STIs and its association with demographics, behaviour, and the uptake of interventions.

Methods A probability sample survey was conducted in 2013 (PCAP-2013; n=12,000) and in 2008 (PCAP-2008; n=8,000) among men and women aged 15–64. The participants completed the survey in their homes through computer-assisted face-to-face interviews and self-interviews. We describe the age-specific and sex-specific prevalence of self-reported STIs in relation to demographics, behavioural factors, and the uptake of interventions and explore associated changes since the PCAP-2008.

Results Overall, 9.4% of men and 5.3% of women reported having had an STI in 2013. This prevalence decreased from that in 2008 (15.9% in men and 8.8% in women). In 2013, self-reported STIs were mainly urethral discharge (5.8%) among men and genital ulcers (2.9%) among women. Men sought care and treatment more often than women did during their most recent experience of STI symptoms (care: 85.7% and 81.2%; treatment: 77.5% and 68.7%, respectively). Self-reported STI infections were associated with increasing age, decreasing socioeconomic status, current or previous drug use, sex with a casual partner in the last 12 months (for both sexes), sex with a same sex partner, and no condom use during the last sexual intercourse (for men), and non-indigenous status and one or more previous HIV tests (for women).

Conclusion This probability sample survey highlights a decrease in STIs for men and women in Brazil. Women carry a higher STI burden than men do. The increases in health care-seeking behaviour and treatment received when presenting symptoms are encouraging. Increasing age, casual sexual partners, and drug use are the main risk factors for STI acquisition.

P3.149 SPATIOTEMPORAL DYNAMICS OF THE HIV EPIDEMIC IN BRAZIL, 2009 TO 2014

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