Conclusion Acceptability and feasibility of STI screening among pregnant women in Vietnam was very high. The prevalence of CT was much higher than the mean prevalence of CT among low and middle income countries in Asia. Study findings support policy to incorporate routine screening for STIs during pregnancy to improve maternal and infant health.

P3.160 OPTIMISING EXISTING SEXUAL HEALTH CLINICS INCREASES HIV TESTING AMONG GAY AND BISEXUAL MEN AT HIGHER RISK OF INFECTION
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Introduction Globally, community-based HIV testing models are recommended to improve access to testing with less focus on optimising existing clinical services. In the past 5 years, public-funded sexual health clinics (SHCs) in New South Wales (NSW, Australia) have taken a range of initiatives to improve efficiencies such as triage to divert low-risk heterosexuals, express clinics, online booking, self-registration and SMS reminders. We analysed temporal trends in HIV testing among gay and bisexual men (GBM) attending SHCs in this period and assessed if testing was targeted to high-risk GBM.

Methods We used retrospective data from 32 SHCs in NSW participating in a surveillance network. HIV-negative GBM were categorised based on client type (new or existing), risk status (using partner numbers and/or recent rectal sexually transmitted infection), and recent HIV testing (past 6 months for high-risk, past 12 months for low-risk GBM). We used repeated measures Poisson regression to assess trends in attendance, tests and contribution to total tests by GBM categories.

Results From 2009–2015, unique GBM attending increased by 82% (5,477 to 9,983), and HIV tests increased by 155% (4,779 to 12,173) with significant increase in all categories and greatest increase in existing high-risk clients. Of 58,377 HIV tests done, 74% were in existing and 35% in high-risk clients. Over time, existing high-risk clients with recent testing had an increasingly larger contribution to total tests (13% annual increase, 95% CI:8.8%–18.1%, p<0.001). There was a simultaneous annual decline in contribution by these low-risk categories: new clients (5% decline, 95% CI:2.9%–7.0%, p<0.001); existing clients with no recent testing (6% decline, 95% CI:5.3%–7.7%, p<0.001). There were no changes in contribution by other categories (new high-risk clients; existing low-risk clients with recent testing).

Conclusion SHCs in NSW have successfully increased HIV testing among GBM, with greatest increase in high-risk men. The strategies adopted could be translated to other settings.
Abstracts

P3.163 DIFFERENCES BETWEEN WOMEN ATTENDING SPECIALIST SEXUAL HEALTH CLINICS AND THOSE ATTENDING GENERAL PRACTICES: IMPLICATIONS FOR TARGETING STI TESTING

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Introduction In Britain sexual health interventions are increasingly provided in community settings such as General Practices (GPs), while Genito-Urinary Medicine clinics have largely been replaced by Sexual Health and for Contraception clinics (SHACs). This study compared women attending GPs with those attending SHAC in an urban setting to investigate how much these populations differ and to assess the extent of sexual risk behaviour in GP populations.

Methods A convenience sample of women aged 16–44 years attending GP and SHAC services in the city of Brighton and Hove was invited to complete a short questionnaire about socio-demographic, psychosocial and sexual behavioural factors.

Results 1288 participated from GPs and 552 women from SHAC. 11.2% of GP participants and 3.4% of SHAC participants (p < 0.0001) reported no male sexual partners in the last year. GP participants were less likely than SHAC participants to report 2 or more male sexual partners in the last year (2PP) (21.3% versus 60.9% p < 0.0001) and to report non-use of condoms with two partners in the last year 6.9% versus 24.2% p < 0.0001. These associations remained after adjusting for the smaller proportion of women aged 25–44 years (33.3% versus 36.3% p = 0.362).

Conclusion Although women attending GPs are less likely than those attending SHAC to report sexual risk behaviour in the last year, a substantial minority may benefit from sexual health promotion, STI testing and alcohol awareness. This supports the development of a risk prediction tool to target sexual health and adjunct interventions in community settings among women aged 16–44 years.

P3.164 ANTIBIOTIC RESISTANCE AND MOLECULAR TYPING OF NEISSERIA GONORRHOEAE ISOLATED FROM THE THREE OVERSEAS SITES THROUGH THE GLOBAL EMERGING INFECTIONS SURVEILLANCE AND RESPONSE SYSTEM (GEIS)

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Introduction Increasing antibiotic resistance in Neisseria gonorrhoeae (GC) threatens treatment and control measures for gonorrhoea and can affect military readiness. The Global Emerging Infectious Surveillance and Response System of the US Armed Forces Health Surveillance Branch supports a repository for GC isolated at US military treatment facilities in the continental US (CONUS) and at several overseas (OCONUS) labs. Here we report the antibiotic susceptibility and N. gonorrhoeae multi-antigen sequence types (NG-MAST) of isolates collected from three OCONUS sites: Republic of Georgia, Peru and Ghana in 2012–2016.

Methods GC was identified using standard biochemical and serological methods. Susceptibility to ceftriaxone, cefixime (Cfx), azithromycin (Az), ciprofloxacin (Cip), and spectinomycin was determined by Etest. ß-lactamase (ßL) activity was determined by nitrocefin hydrolysis. NG-MAST was performed using standard methods.

Results Fifty-seven confirmed GC isolates were obtained from the three OCONUS sites. Cip resistance occurred in 74% (Ghana) and 89% (Peru) of isolates, with 63.2% (Ghana) and 28.6% (Peru) of isolates ßL positive. Cip and ßL production are common in these OCONUS sites. Several previously undescribed NG-MAST sequence types were identified among isolates from Ghana and Georgia and 18 isolates with reduced susceptibility to Az were identified among the 3 sites. Over 65% of isolates from Ghana and Peru produced ßL. Cip strains primarily encoded S91,D95G substitutions in ParC, combined with S87R (Peru) or S87N (Ghana) substitutions in ParC. Interestingly, a high proportion of isolates from Ghana (36.8%) and Peru (85.7%) were of unique NG-MAST types.

Conclusion Multidrug resistant GC and ßL production are common in these OCONUS sites. Several previously undescribed NG-MAST sequence types were identified in Peru and Ghana, suggesting the GC strains circulating in these countries are different from those in North America, Australia, and Europe. Further surveillance is needed to inform treatment recommendations in OCONUS sites.

P3.165 QUALITY OF LIFE IN WOMEN WITH GENITAL TRACT INFECTIONS BY HUMAN PAPILLOMAVIRUS (HPV)

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Introduction Human papillomavirus is sexually transmitted diseases (STDs) are among the most common public health issues...