

hailed from Uberaba. 37.6% had other concomitant STDs. 45.4% had their first appointment to specialised care done only on the second trimester. The patients had an average of 7 prenatal appointments and the majority (79.1%) were using antiretroviral therapy (Biovir and Kaletra) during this period. On births, 1.4% ended in miscarriage; 26.0% were pre-term deliveries; 66.66% were on term deliveries; 1.44% were post-term deliveries and 4.3% were delivered elsewhere outside the HC-UFTM. Caesarean sections responded for 63.6% of the births and all the pregnant women received zidovudine (AZT) before their deliveries (+/-2.93 hour). On newborns, 63.76% had their weights between 2500 g and 4000g and 92.6% had their APGAR $\geq$ 7; all newborns received AZT after their births.

**Conclusion** Obstetrical assistance to HIV-positive women is fundamental on their adherence to medication and on the reduction of vertical transmission. Those women must receive specialised care as soon as possible and the staff must be trained.

### P3.180 SYPHILIS AND PREGNANCY: DIRECTING PUBLIC HEALTH

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**Introduction** Measure the incidence of syphilis among pregnant women overseen by Hospital de Clínicas from Universidade Federal do Triângulo Mineiro. Outline their epidemiological profile and assess their obstetrical assistance and immediate neonatal data.

**Methods** Retrospective study from survey of medical records from January 2007 to December 2015 of pregnant women diagnosed with syphilis, followed by the application of a structured questionnaire evaluating their epidemiological, obstetrical and neonatal data.

**Results** There were 226 cases of pregnant women with syphilis. This number grew from 9 cases (3.9%) in 2007 to 93 (41.2%) in 2015. Patients were, on average, 23.6 years old, ranging from 10 to 45 years. On obstetrical data, 74 (33.6%) were on their first pregnancy and the remaining had one or more pregnancies. 68.6% went to prenatal appointments and 69.4% were diagnosed on the second semester of their pregnancies. In 60.5% of the cases, the partner had not undertaken treatment. On births, 64.6% were vaginal births, 31.4% pre-term, 63.7% on term and 0.4% post-term births. On newborns, 68.6% weighed between 2,000–4000 grams; 72.1% had APGAR $\geq$ 7 and 31% were diagnosed with congenital syphilis and hospitalised for further treatment.

**Conclusion** Congenital syphilis remains a challenge to public health mainly due to the alarming rise in new infections on recent years. It was present on women of all ages amid their reproductive period. Syphilis deserves attention because of its impact on mothers, partners and newborns.

### P3.181 HEPATITIS C: CHALLENGING MODERN OBSTETRICS

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**Introduction** Assess the incidence of Hepatitis C on pregnant women overseen by the Hospital de Clínicas from Universidade Federal do Triângulo Mineiro; Delineate the Hepatitis C-infected patients' epidemiological profile.

**Methods** Survey through Hospital de Clínicas records from 2007 to 2015 for Hepatitis C-infected pregnant women, followed by a review of medical records and by the administration of a structured questionnaire evaluating epidemiological, clinical and neonatal data.

**Results** 44 cases of Hepatitis C were found in the survey's period – an incidence of 0.4% on the births. On demography, the age of patients varied from 14 to 47 years, with an average of 30 years. The majority of infections were to non-white (56.8%), single (63.6%) and hailing from Uberaba (81.8%) patients. The majority of surveyed women (46.5%) have been diagnosed prior to their pregnancy. On obstetrical aspects, 61.3% had up to 2 previous pregnancies; 52.27% of the women visited the specialised sector during their second trimester; 2 patients had related clinical symptoms; 13.63% missed clinical appointments and 1 patient has been admitted without any prenatal consultation. Viral load was undetectable on 22 patients and 3 patients had a viral load  $\geq$ 1 00 000 copies. On births, 84.2% of them were on term; 57.89% had vaginal births. Newborn's weight varied from 1725 to 4135 grams and 89.4% had Apgar  $\geq$ 7.

**Conclusion** Hepatitis C had a higher prevalence on pregnant women over 30 years old. The first specialised service appointment was mainly on the second trimester, probably due to delays on dispensation of public health services. Contagious and infectious diseases are a major challenge to public health, thus screening must be carried on to minimise vertical and horizontal transmissions.

### P3.182 OBSTETRIC ASSISTANCE TO HEPATITIS B-INFECTED WOMEN: STRATEGIES AND DIRECTIONS

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**Introduction** Measure the incidence of Hepatitis B (HB) among pregnant women overseen by Hospital de Clínicas from Universidade Federal do Triângulo Mineiro. Outline their epidemiological profile and assess their obstetric assistance.

**Methods** Survey of the records of pregnant women with a diagnosis of Hepatitis B from 2007 to 2015, medical record revision and application of a structured questionnaire evaluating their epidemiological, obstetrical and neonatal data.

**Results** There were 68 cases of Hepatitis B, that is, 0.6% of the births of the surveyed period. On demography, the mean age of the patients was 25.6 years, with variation from 16 to 43 years; the majority of the patients were white (48.5%) and single (45.58%). On obstetrical data, 54.4% had up to 2 previous pregnancies; 47.5% of their first appointments to specialised services were on the second semester; 2 patients had related medical symptoms and 10.29% missed any appointments. On their births, 88.13% were on term and 66.7% were vaginal births. Newborn weights were between 1035 and 4080 grams, 91.52% had APGAR $\geq$ 7 and 88.1% received

immunoglobulin and Hepatitis B vaccine. All newborns had negative HBsAg on immediate post-birth.

**Conclusion** Generally, Hepatitis B patients had an average age from 20 to 30 years. The first appointment on specialised services was mainly on the second trimester, probably due to delays on public health dispensation. Hepatitis B vertical transmission prophylaxis has been done on 90% of the pregnant women – other cases may be lacking pertinent annotations. This evaluation needs to be carried on in order to minimise horizontal and vertical transmissions. Due to public dispensation mismanagement, viral load quantifications on Hepatitis B only started last year.

### P3.183 PREVALENCE AND FACTORS ASSOCIATED WITH SYPHILIS IN PREGNANT AND NON-PREGNANT WOMEN ATTENDED IN 24 MONTHS IN A UNIVERSITY HOSPITAL

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**Introduction** It is estimated that 1.8 million pregnant women worldwide are infected with syphilis and less than 10% are diagnosed and treated. In Brazil, about 30 thousand cases/year with progressive growth are related to social inequalities and lost opportunities of diagnosis and prevention. Considering the importance of a faster detection of this disease, an analysis is necessary because such data could contribute to the development of new syphilis control strategies in this population.

**Methods** This retrospective case-control study included 170 women (34 cases and 136 controls), where the presence of VDRL and TPHA have defined as a case. The study was based on analyses of medical records of women admitted to the Women's Hospital Prof.Dr.José Aristodemo Pinotti/Unicamp-São Paulo-Brazil, matched by age over a period of 24 months. Statistical analysis was performed using chi-square and Fisher's exact tests. For the quantitative variables, descriptive measures were obtained and to verify a significant difference between the mean values, a Mann-Whitney test was used.

**Results** The prevalence was 1.04% and the mean age was 27.5a. 58.8% of women cases were white, 52.9% with a fundamental education and were in the 3.24 gestation (or 6.77). 70.6% of the controls were white with 45.6% average education and were at 2.27 gestation. In women with syphilis, the average number of sexual partners was 7, the beginning of the sexual activity was 15.3a, 29.5% were drug users (or 0.0001), and 35.3% had a history of STDs. Controls had an average of 2.6 sexual partners, sex at 17.1a, 11.1% used drugs and 7.4% had a history of STDs. The cases had 6.2 consultations ( $p=0.0664$ ). Half of the partners were not treated. There was 1 neonatal death. Of the 34 women diagnosed with syphilis, only 5 achieved follow-up and cure.

**Conclusion** A high prevalence of syphilis was identified, which was associated with white, young and multiparous women. Socio-demographic vulnerability and difficulty in diagnosis seem to influence the disease, it is noteworthy that only 1 in 7 women obtained a cure.

### P3.184 TEMPORAL EVOLUTION OF RESISTANCE RATES AMONG CLINICAL ISOLATES OF *NEISSERIA GONORRHOEAE* FROM SÃO PAULO, BRAZIL

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**Introduction** The emergence of antimicrobial resistance among *N. gonorrhoeae* isolates is a major concern worldwide. Although quinolones and macrolides are still recommended for empirical treatment of urethritis according to our national guidelines. The objective of this study was to evaluate the antimicrobial susceptibility profile of *N. gonorrhoeae* recovered from 2003 to 2015 from outpatients assisted at the Centro de Referência e Treinamento DST/AIDS-CRT Santa Cruz, São Paulo – SP.

**Methods** The identification was carried out by MALDI-TOF MS. The minimal inhibitory concentrations (MIC) for penicillin, ceftriaxone, ciprofloxacin and azithromycin were determined by agar dilution method and interpreted according to CLSI (2016) clinical breakpoints, except for azithromycin, which was interpreted using EUCAST (2016). The genetic relationship of isolates presenting reduced susceptibility to ciprofloxacin was evaluated by ERIC-PCR. Hydrolysis rates towards ceftazidime and cefotaxime were evaluated by mass spectrometry.

**Results** Among the 125 *n. gonorrhoeae* recovered, reduced susceptibilities to penicillin, ciprofloxacin, and azithromycin were observed for 89.6% (112/125), 22.3% (21/94), and 26.4% (33/125) of the isolates. Only one isolate was resistant to ceftriaxone, with MIC of 0.5 µg/mL. Reduced susceptibilities to penicillin, ciprofloxacin and azithromycin were already observed in 2003, and increased over the years, while resistance to ceftriaxone was only observed in 2006. The ceftriaxone-resistant isolate did not present detectable hydrolysis for ceftazidime and cefotaxime, suggesting that a no enzymatic mechanism was involved.

**Conclusion** Our data corroborates with other international series and pose in question the recommended syndromic treatment with quinolones and azithromycin. Our result suggests that ceftriaxone still remains a valuable therapeutic option for the empirical treatment of gonococcal infections in Brazil. Further analysis will be performed in order to better characterise the genetic relationship and the resistance mechanisms involved.

### P3.185 ADOLESCENTS WITH HPV: THE PROFILE OF YOUNG PEOPLE ATTENDING A STI AND HIV REFERENCE CENTRE IN SALVADOR/BAHIA

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**Introduction** The adolescence is a period marked by intense vulnerability, with a high prevalence of HPV, mostly of