evaluate the influence of the use of vaccine even without identification of who used the vaccine. The frequency of atypias was compared year by year. The research was approved by Ethical committee of Federal University of Ceará.

Results During nine years was performed 205056 Pap smears in the laboratory. In general the atypias (>ASC-US) occurred in 15927 cases (2.4%). In 2006 the atypias (>ASC-US) occurred in 398 cases (2.24%), and in 2007 in 739 cases (2.7%). The vaccine was introduced in 2008 when the cytological atypia occurred in 873 cases (3.5%). The in 2009, 2010, 2011, 2012, 2013 and 2014 the frequency was respectively, 598 (2.52%), 456 (2.02%), 540 (2.42%), 437 (2.06%), 349 (1.72%) and 227 (1.4%). When we evaluated only the women with less than 18 years old the results were: 2006 – 416 (2.4%); 2007 – 363 (3.6%); 2008 – 389 (3.6%); 2010 – 459 (2.6%); 2011–440 (3.9%); 2012 – 428 (1.9%); 2013 – 375 (1.3%) and 2014 – 397 (1.01%).

Conclusion After the introduction of the HPV vaccines the cytological atypia in Pap smear decrease in Fortaleza - Brazil.

**P5.27 PREVALENCE OF CHLAMYDIA TRACHOMATIS IN DIFFERENT AGE GROUPS OF WOMEN IN FORTALEZA, BRAZIL**

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Introduction Chlamydia trachomatis infection is usually asymptomatic, affects young, sexually active women, and when not properly treated, can lead to complications such as pelvic inflammatory disease, infertility, and ectopic pregnancy.

Objectives To evaluate the prevalence of C. trachomatis in women classified into different age groups who presented at private clinics in the city of Fortaleza, Brazil.

Methods: Data from samples of sexually active women who presented at general gynaecology clinics in the city of Fortaleza, Brazil, were processed using the Hybrid Capture method (Digene ) for the detection of DNA-Chlamydia trachomatis during 2014 and 2015.

Results A total of 11.22% and 8.24% of the women who presented at the clinic were positive for C. trachomatis in 2014 and 2015, respectively. In both years, the highest prevalence in different age groups was observed in women 40 years.

Conclusion During 2014 and 2015, the prevalence of Chlamydia trachomatis was high in the city of Fortaleza, especially in women.

**P5.28 DIAGNOSIS OF BACTERIAL VAGINOSIS WITH AFFIRM VPIII**

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Introduction In gynaecology clinics, the most frequently reported women’s complaint is associated with vaginitis and vaginosis. The three most common etiologies for vaginal symptoms are bacterial vaginosis (BV), vulvovaginal candidiasis, and trichomoniais. Carefully recorded histories, examinations, and laboratory testing to determine the aetiology of vaginal symptoms are warranted.

Methods To assess the accuracy of Affirm VPIII in BV diagnosis in women with vaginal discharge.

Methods A cross-sectional study was performed in 73 women (mean age 32±9.7 years) from March to November 2014 in a private gynaecology clinic in the Brazilian city of Fortaleza. All of the women complained of vaginal discharge. After speculum placement, we obtained material from the vaginal wall with a swab and stored it in tubes using the Ambient Temperature Transport System (ATTS). At the same time, another swab was used to collect material for the Gram test (gold standard). The project was approved by Ethical Committee of Federal University of Ceará.

Results The Affirm test identified Gardnerella vaginalis in 37/73 cases (50.7%). Comparing the results from the Affirm test with Gram staining for BV indicated that the sensitivity for the Affirm test was 83.3%, the specificity was 62.2%, and the positive and negative predictive values were 20.8% and 97.1%, respectively. The Kappa index between the tests was 0.204, which was considered a fair degree of agreement.

Conclusion The Affirm test appears to be sensitive enough to diagnose BV with satisfactory specificity for G. vaginalis.
Conclusion YMSM receiving care at the BCHD STD Clinics are likely to be aware and interested in PrEP but fewer than 10% may be taking PrEP. Given that STD Clinics serve primarily minority young males who are disproportionately affected by HIV, future work should seek to improve youth-friendly services at public health clinics and leverage awareness and interest in PrEP in order to improve uptake in this vulnerable population.

Methods Exploratory qualitative study was performed between October and December 2015. 15 MSM were interviewed. Semi-structured interview of 23 questions regarding: sociodemographic, risk scale, sexual practices and PrEP knowledge. Barriers and facilitators for PrEP were also asked. All participants signed an informed consent. Data analysis was performed on Atlas.Ti.

Results Median of age 32 years old, most of the participants reported higher education. Based on CDC guidelines for PrEP, 10 of the participants should be offered PrEP based on their current risks. Condom use was high, and for 3 participants that will be the preferred option always. 13 of them were likely to start PrEP if available, with fears about side effects and cost of the medications. Facilitators for PrEP consumption was low cost, accessibility of the delivery point, counselling and knowledge about PrEP. To improve adherence, participants recommended phone alarms, text messages, extra pills, flexible or accessible hours for the service.

Conclusion PrEP has a high acceptability among MSM population in Guatemala city. Facilitators and barriers mentions will help to design a successful demonstration project. Based on the reported risks and HIV prevalence in this population, PrEP is an effective needed intervention in these country that can help to change the course of the epidemic. Based on these results, we have started a small fee-based demonstration project since 2016.