professionals registering on an online platform to receive a panel with four dried tube specimens with unknown reactivity for syphilis. The respondents test the samples as if they were from their own patients and submit the results online for subsequent analysis.

**Methods** We analysed reports from eight EQA-RT rounds conducted in 2014–2016. The quality of the professionals’ performance was assessed by examining the degree of concordance between the results from the panel samples that were expected and those actually reported. A certificate of approval is issued in the event of 70% accuracy. Any professional receiving less than 70% approval rating is sent a report suggesting possible causes and solutions for issues that might have been responsible to prevent the quality of testing.

**Results** The average number of participants per round was 843 (545 in 2014, 909 in 2015 and 1.075 in 2016) distributed in 347 mainly primary healthcare units. It was interesting to note that many higher complexity services, despite registering in the program, failed to report the results (e.g. a 55% abstention rate in one of the rounds). Regarding the performance on EQA-RT, an average of 93% of respondents were approved per round, with 88% achieving 100% accuracy. The most common failures identified so far have been incorrect pipetted sample volumes and result reading times.

**Conclusion** The majority of healthcare professionals currently participating in Brazil’s EQA-RT program are maintaining a high level of RT quality. While the number of participants doubled in 2014–2016, there is still a need for education work to encourage more adherence to the Program aimed at ensuring the reliability and credibility of the TR results.

**P6.19 KNOWLEDGE, ATTITUDE AND PRACTICE ABOUT SEXUALLY TRANSMITTED DISEASES AMONG UNIVERSITY STUDENTS IN GHANA**

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**Introduction** Sexually transmitted diseases (STDs) remain an important cause of morbidity and mortality among women in the child-bearing age. In order to institute appropriate preventive measures there is need to establish the profile of knowledge of the predisposing factors and causation of STDs, attitude to sexual practice and sexual patterns among the susceptible young people, such as university students.

**Method** A detailed questionnaire identifying socio-demographic characteristics, sexual patterns, knowledge of STDs as well as attitudes towards prevention of STDs was administered to 400 non-medical students of University Of Cape Coast, Ghana.

**Results** Knowledge of the clinical features of gonorrhoea and AIDS was high; most knew the predisposing factors for STDs (multiple sexual partners 90%; unprotected sexual intercourse 93%; rape 81%; sex outside marriage 78%, and sex under the influence of alcohol 73%) but not so for syphilis. Males were three times more likely to contract STDs (27%) than their female (9%) counterparts. Whereas knowledge on methods of prevention was high (90%) it was not followed by appropriate behavioural patterns. More female (33.5%) students had heard about *Trichomonas vaginalis* than males (23%); (X2=17.1;<0.0001). This study has shown that more female than male students got information from their parents (X2=25.3; p=0.001) while more male students had their information from previous sexual intercourse (X2=12.9; p=0.001).

**Conclusion** The level of knowledge about STDs and their prevention is not matched by sexual behavioural patterns, and male students undertake more risky sexual behaviour. Sexual education should be introduced at the university as a means of increasing students’ awareness about the problem and prevention of sexually transmitted diseases including HIV/AIDS.