used to determine the risk of acquiring HIV infection at 18 months among the exposed infants.

**Results** A total of 170 exposed infant were recruited and more than two-third of the infants were males (74.1%) with median age was 4±3 months. One hundred and fifty (88.2%) received infant prophylaxis and 116 (68.2%) had EID done at 6 weeks. Of the 170 exposed infants 19 (11.1%) were positive at 18 months final outcome of which 4 (21.1%) died. Time from being confirmed HIV positive to starting ART was 4.0 ±2.1 months. COX regression showed that the risk of acquiring HIV infection in females (Adjusted HR = 0.56, 95% CI 0.37–0.87), babies who received infant prophylaxis (Adjusted HR = 0.59, 95% CI 0.1–0.9), infants whose maternal CD4 count < 500 (Adjusted HR = 1.19, 95% CI 0.4–2.6) and time of starting ART > 3 months (Adjusted HR = 3.5, 95% CI 1.8–11.5).

**Conclusion** The positivity rate among studied exposed infants was high. Continuous placement of HIV positive mothers and exposed infants on prophylaxis, timely initiation of ART will go a long way in reducing the burden of pediatric HIV.

**Disclosure** No significant relationships.

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**P100**  **BIDIRECTIONAL ASSOCIATION BETWEEN HUMAN IMMUNODEFICIENCY VIRUS AND PSORIASIS: SYSTEMATIC REVIEW OF COHORT STUDIES**

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**Background** Human immunodeficiency viral (HIV) induce production of autoantibodies could attack the person’s immune system. Patients with HIV infection might present with more severe complications of psoriasis, a chronic autoimmune inflammatory skin disease. But there were insufficient evidences prove the risk between HIV and psoriasis.

**Objectives** Systematic review was performed to explore the association between HIV and psoriasis, to provide risk assessment and improve patient outcomes.

**Methods** We used the search strategy: ‘(psoriasis OR psoriatic arthritis) AND (AIDS OR HIV OR acquired immune deficiency syndrome OR human immunodeficiency virus OR CD4 OR CCR5-delta32)’ in searching the Cochrane Library, PubMed and EMBASE electronic databases without language restrictions in May 2018.

**Results** Four cohort study (187954 participants) were included in this review. Studies report the results of the incidences of psoriasis with patients with HIV infection. While the total incidence on current data of psoriasis was 0.46%, HIV patients had higher risk than normal for developing newly diagnosed with psoriasis whether receiving substance treatment or not. However, psoriasis patients in general do not appear to have increased infection rates of HIV.

**Conclusion** The available evidence shows that HIV is a potential risk factor for psoriasis. The evidence at the present stage only supports the relationship between HIV infection and psoriasis, but more literature is needed to support such relevance.

**Disclosure** No significant relationships.