P159 INFLUENCE OF HIV STATUS AND OPIOID MISUSE ON STI RISK AND INFECTION: RESULTS OF A PILOT STUDY

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Background The United States (US) is experiencing record rates of sexually transmitted infections (STI) and opioid misuse, and has in excess of 1.1 million individuals living with HIV. Risk reduction interventions can vary greatly by drug of choice and sexual orientation. This pilot study sought to examine STI risk as a factor of drug misuse and HIV status.

Methods From 1 Jul to 21 Dec 2018 we recruited individuals from a sexual minority support organization also providing syringe exchange services (Springfield, IL). Participants completed surveys of risk and behavior and were screened (genital and oral) for chlamydia (CT) and gonorrhea (GC). Drug use was categorized as: none; opioids only (e.g. heroin, hydrocodone); stimulants only (e.g. methamphetamine, cocaine); and combined.

Results The 54 participants were: 94% male; had a mean age of 41 years; and were 76% white race. Stratified by opioid use (yes/no)/HIV status (pos/neg), participants for each category were: yes/pos=6; yes/neg=27; no/pos=6; and no/neg=15. The 2 identified infections were one oral GC and one genital CT. Among the 50 who identify as male, reported orientation was: 26 heterosexual, 20 homosexual, 3 bisexual (1 missing); and reported drug use was: 14 none, 4 opioids, 7 stimulants, and 25 combined. Drug category was strongly associated with sexual orientation (60.0% of homosexuals reported none vs 72.0% of heterosexuals reporting combined; $p=0.003$) and employment (64.5% of unemployed reported combined vs 22.2% employed; $p=0.008$). Drug type use was not significantly associated with: race; ever being diagnosed with a STI; giving or receiving sex for money or drugs; engaging in anonymous hookups; or group sex (though reported by 26% of participants).

Conclusion Given the reported risky behaviors of study participants, actual STI prevalence was surprisingly low. The data show drug use differences by sexual orientation and employment status, indicating areas for further intervention research.

Disclosure No significant relationships.

P161 ADOPTING A POLITICAL ECONOMY APPROACH TO HIV RESEARCH: A CASE STUDY OF ONGOING CONFLICT IN UKRAINE

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Background Armed conflict erupted in eastern Ukraine in 2014. Ukraine has the highest HIV rates in Europe, there is concern that the epidemic can worsen in the current climate. Past research on HIV prevalence in conflict zones has been limited and the few studies that exist yield contradictory results. In this paper we describe the historical events leading up to the current conflict and explore its politico-socio-economic consequences as related to HIV risk.

Methods This project takes a political economy approach to examine Ukraine as a case study to understand the impact of conflict on HIV and HCV. We undertook archival research to examine the structural factors related to the current conflict and its politico-socio-economic consequences. Political economy draws upon economic, political, historical, cultural and sociological approaches to examine the evolution of states, markets and society. This perspective accounts for a wide range of factors that influence the downstream realities of people living with HIV. It illuminates the structural parameters of conflict within which the epidemics exists.

Results Preliminary results reveal that the social, political, and economic turmoil leading up to the armed conflict can be traced back to Ukraine's formation as a sovereign state following the dissolution of the Soviet Union. These factors have also been associated with the beginning of Ukraine's HIV epidemic. High inflation, deep recessions, and a burgeoning kleptocracy led to civil unrest and the ousting of the president which was followed by backlash from Russia. The ensuing conflict has ignited several factors known to contribute to HIV risk such as violence, migration and increased mobilization of armed forces might be expected to exacerbate prevalence.

Conclusion Ukraine as a case study presents a unique opportunity to examine the influences of conflict on the HIV epidemic before, during and possibly post conflict.

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