P372 BACTERIAL VAGINOSIS AND HIGH-RISK HUMAN PAPILLOMAVIRUS COINFECTION AMONG AFRICAN AMERICAN WOMEN IN THE UNITED STATES

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Background: Bacterial vaginosis (BV) increases the risk of many sexually transmitted infections. The co-occurrence of persistent BV and high-risk HPV (HR HPV) increases the risk of developing cervical cancer. This study aims to investigate the co-occurrence of HR HPV and BV among young women in the US.

Methods: Stored vaginal swabs were acquired from a previously completed clinical trial. The kinds of bacteria present in the samples were identified by classifying 16S rRNA gene sequences in each sample using high-throughput pyrosequencing. HPV genotyping was performed using quantitative polymerase chain reaction using TaqMan probes in a customized plate (Thermo Fisher Scientific; Waltham, Massachusetts). BV was classified using Nugent Scores of Gram stain.

Results: Eighty reproductive age African American (AA) women were included in the analysis. The point prevalence of HR HPV was 48.1% (95% CI: 37–59%). The mean age of the participants was 21.4 years (SD: 2.11). Among the women, prior antibiotic use was low (3.8%), and 75% were not treated for BV during their lifetime. Among those who had been treated previously for BV, most women were treated five or more times (60%). According to Nugent Scores, 70% had BV, 13.7% had intermediate and 16.3% had healthy vaginal flora. TV was diagnosed among 11.1% (95% CI: 4–8%) of the women. Prior antibiotic use was low (3.8%), and 75% of women had not been treated for BV during their lifetime. Among those who were previously treated for BV, 60% were treated five or more times. Douching was reported by 49% of the sample. 55% of TV cases had concurrent BV, while 11.1% of TV cases also had intermediate vaginal flora. There were no associations with prior antibiotic use, hormonal contraception, douching or prior treatment.

Conclusion: Young African American women of reproductive age found to have abnormal vaginal flora should be screened for Trichomonas vaginalis infection.

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