

**P783 FACTORS ASSOCIATED WITH SYPHILIS TESTING IN TRANSGENDER WOMEN IN CENTRAL-WEST BRAZIL**

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**Background** Syphilis, one of the oldest diseases caused by the spirochete *T. pallidum*, has been a major public health problem worldwide. Globally, social inequalities contribute to elevated sexually transmitted infections (STIs) rates among transgender women. High syphilis prevalence has been documented among transgender women in Latin America. **Objectives:** The aim of this study was to estimate the prevalence of syphilis and to analyze the potential predictors for this infection in transgender women in Goiânia, Central-West Brazil.

**Methods** A cross-sectional study was conducted in 180 transgender women (TGW) in Goiânia-GO, from April 2018 to December 2018. TGW were recruited using respondent-driven sampling (RDS) as a method to obtain a more robust and diverse sample of a hard-to-reach populations, which tends to be particularly sparse and marginalized. After obtaining the consent term, participants were interviewed using a structured form containing questions about sociodemographic characteristics and risk factors for *T. pallidum* infection. Blood samples were collected and tested for syphilis (anti-*T. pallidum*) by rapid test.

**Results** A total of 180 TGW participated in the study. Of the 180 samples tested by the rapid test for syphilis, 61.7.0% (CI 95%: 54.4–68.4%) were positive. In multiple regression analysis, previous STIs (OR aj: 6.2,  $p \leq 0.001$ ), age ( $\leq 13$  years) of sexual initiation (OR aj: 3.6;  $p = 0.009$ ), number of partners ( $\geq 15$ ) in the last seven days (OR aj: 5.3,  $p \geq 0.0001$ ) were predictors of syphilis infection.

**Conclusion** The results of the present study show a high prevalence of syphilis infection in transgender women, with the development of prevention and control strategies, including counseling and testing, as well as the provision of treatment for STIs in the setting street and temporary and/or permanent shelters.

**Disclosure** No significant relationships.

**P784 PREVALENCE OF STIS AND HIV IN TRANSGENDER WOMEN AND MEN: A SYSTEMATIC REVIEW**

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**Background** The transgender (TG) population is under-researched. Despite reportedly high rates of HIV and sexually transmitted infections (STIs) among TGs, prevalence of these in TGs has not been systematically reviewed. Our primary objective was to perform a systematic review of the literature for studies reporting laboratory test proven prevalence data of

HIV and other STIs among male-to-female (MTF) and female-to-male (FTM) TGs. Given the sexual risk factors traditionally associated with MTFs (e.g. commercial sex work), we hypothesized that HIV/STI prevalence would be higher among MTFs compared to FTMs.

**Methods** A systematic review of the literature on original English-language research involving HIV and/or STI laboratory testing in TG populations within the last 50 years was performed.

**Results** Of 32 eligible studies, most focused on MTFs, with only 10 (31%) including data on FTMs. MTFs were exclusively investigated in 22 (69%) of studies. The majority of studies including MTFs were focused on sex workers, with 7 (22%) exclusively evaluated sex workers. HIV data was reported in 31 (97%) of studies. Syphilis data was presented in 18 (56%) studies. Regarding gonorrhoea and chlamydia, 15 (47%) studies presented testing data, but only 7 reported urogenital and extragenital results. No studies evaluated trichomoniasis. In MTFs, prevalence of HIV, syphilis, gonorrhoea, and chlamydia ranged from 0%–70.3%, 1.4%–50.4%, 0%–29.4%, and 2.7%–24.7%, respectively. In FTMs, prevalence of HIV, syphilis, gonorrhoea, and chlamydia ranged from 0%–8.3%, 0%–4.2%, 0%–10.5%, and 0–11.1%, respectively.

**Conclusion** Literature involving STIs in TG people focuses on the MTF community and HIV. Testing patterns for bacterial STIs are variable, especially for gonorrhoea and chlamydia. Per current literature, STIs appear to be more prevalent in MTFs compared to FTMs. Data for STIs in FTMs is limited. These gaps present opportunities for further study involving the epidemiology of STIs in the FTM population and the relevance of extragenital bacterial and parasitic STIs in all TGs.

**Disclosure** No significant relationships.

**P785 SYPHILIS AMONG MSM/TW IN THE AMERICAS: A SYSTEMATIC REVIEW AND META-ANALYSIS (1980–2017)**

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**Background** Although syphilis remains a central public health problem, disease estimates for men who have sex with men (MSM) and transwomen (TW) in the Americas are incomplete. The purpose of this study was to compare the syphilis epidemics of North America (NA) and Latin America/Caribbean (LAC).

**Methods** We conducted a systematic review of ten databases for studies of syphilis in MSM/TW in the Americas between 1980–2017. Regional and country-specific prevalences were calculated from 2000–17 using 3 analytic frameworks: 1) All MSM/TW; 2) MSM/TW with versus without HIV; and 3) MSM and TW separately. Pooled prevalence estimates were calculated utilizing random effects meta-analysis.

**Results** 167 studies (NA=84, LAC=83) representing 368,587 subjects were included. Almost no data was available from LAC prior to 2000 and only 8% of studies from either region reported stage of infection (Primary, Secondary, Latent). For