Nearly half of participants (48.4%) were sexually inactive during last one year and 76.4% stated decrease or complete loss of sexual desire following the diagnosis. Diminished sexual desires showed significant association with ageing. Among sexually active women 92.5% had one sexual partner for last one year and 69.4% of sexually active women used condom at last coitus. Significant low condom usage seen among women with detectable viral load. None were found positive for Gonorrhea and Trichomoniasis. Prevalence of infectious syphilis was 0.3%.

Conclusion Approximately half of WLHIV reported being sexually inactive despite satisfactory treatment outcomes and existence of a long term relationship. Findings demonstrate high condom use at last coitus, whilst low condom usage among sexually active women 92.5% had one sexual partner for last one year and 76.4% of sexually active women used condom at last coitus. Significant low condom usage seen among women with detectable viral load need evaluation.

P206 DOES THE PERFORMANCE AND OPERATIONAL SUPERIORITY OF POINT-OF-CARE TEST MAKE IT THE INVESTIGATION OF CHOICE IN CONFIRMING SYPHILIS? 
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Background According to World Health Organization, 6 million cases of syphilis occur every year, and low-income countries bear a 90% burden of the disease. Serological tests for syphilis form the mainstay of diagnosis for syphilis. Unlike various specific Treponemal tests, Rapid Immunochromatographic Test, also called the point-of-care test (POCT) for syphilis, does not require expert training or equipment. We evaluated the performance of POCT against other specific Treponemal tests for confirming the diagnosis of syphilis.

Methods Retrospectively data was analyzed of samples from the year 2017 to 2020 at Apex Regional STD centre, Safdarjung Hospital, New Delhi, which were tested by all the three treponemal tests for syphilis, namely Treponema Pallidium Hemagglutination (TPHA), fluorescent treponemal antibody absorption test (FTA-ABS) and POCT. Sensitivity, Specificity, Positive Predictive Value (PPV), Negative Predictive Value (NPV), Diagnostic Accuracy of POCT, and TPHA were evaluated against the gold standard FTA-ABS.

Result A total of 599 samples were evaluated, of which 61.76% were positive by FTABS. Upon analysis, the sensitivity of POCT was 91.08% (95%CI: 87.70%-93.78%) and TPHA was 91.89% (95%CI: 88.63%-94.46%), specificity of POCT was 89.08% (95%CI: 84.31%-92.81%) and TPHA was 92.34% (95%CI: 82.32%-91.35%), PPV of POCT was 93.09% (95%CI: 89.97%-95.48%) and TPHA was 92.14% (95%CI: 88.91%-94.67%), NPV of POCT was 86.08% (95%CI: 81%-90.22%) and TPHA was 86.96% (95%CI: 81.91-91.02%) and Diagnostic accuracy of POCT was 90.32% and TPHA was 90.15%.

Conclusion Owing to its operational superiority and higher specificity, POCT can replace TPHA for confirming the diagnosis of syphilis. POCT is affordable, equipment-free, has room temperature storage, and yields results within 15 minutes, enabling same-day testing and treatment. It can be used in a limited resource setting, community setup, or even self-testing. Wider patient reach will help improve patient identification and treatment, thereby strengthening STI prevention and control programmes.