a socioecological framework, to identify facilitators and barriers of PS.

**Results** 77 people from 31 cities submitted a total of 92 submissions, of which 53 remained eligible. Among participants with eligible entries, 60% were male, more than half identified as homosexual or bisexual, and 11% disclosed as living with HIV. Content analysis identified novel strategies to facilitate PS, including differentiation of care and stepwise notification. In addition, people-centered principles were highlighted, as emerged themes from the submissions emphasized on index education and self-empowerment, and the necessity to provide safe and supportive disclosure services.

**Conclusions** The contest engaged a diverse population of participants to contribute to the development of people-centered PS for MSM living with HIV in China. Differentiation of care and stepwise notification could be valuable for the next-step design of a more comprehensive, integrated intervention package. The emphasis on people-centered PS is also insightful for HIV-related policy design in China.

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**Abstracts**

**P436** ANALYSIS OF SOME INDICATORS OF IMMUNE STATUS AND A NUMBER OF CYTOKINES IN CHLAMYDIA INFECTION AND MYCOPLASMA

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**Background** Among the current and common STIs are urogenital chlamydia infection and mycoplasmosis, which lead to significant complications, infertility, pathology of pregnancy and childbirth. A characteristic feature of inflammatory diseases of the genitourinary system caused by mono- and mixed infection (chlamydia and mycoplasma) is the immunological reorganization of the organism, which is confirmed by immunological methods.

**Methods** To study the immune status of patients with chlamydia and mycoplasmosis, clinical and laboratory tests of 64 individuals aged 17 – 36 years were performed. Control group included 6 practically healthy people. The number of total T-lymphocytes (CD3), T-helpers (CD4) and T-suppressors (CD8) was determined in all patients by indirect immunofluorescence by staining cells in a monolayer, as well as the level of a number of cytokines (IL-2; IL-3; IL-4; IL-6) by ELISA. The significance of differences between the independent values was determined using Student’s t-test.

**Results** Objective examination revealed the following: cervical hyperemia – 48 (75%), urethral hyperemia – 14 (21.9%), mild cervical edema – 16 (25%), discharge – in all patients. Study of T-cell component of immunity revealed a significant decrease in total population of T-lymphocytes (CD3), T-helpers (CD4) and an increase in the number of cells with suppressor capacity (CD8). These changes in subpopulation ratio of T-lymphocytes lead to a significant inversion of the immunoregulatory index (CD4/CD8).

The study showed significant changes in some indicators of cytokines, in particular: a significant increase in IL-3, IL-4 and IL-6. Significant reduction in the amount of proinflammatory cytokine IL-2 was noted.

**Conclusion** Immune status disorders are observed in women with urogenital chlamydia infection and mycoplasmosis. In particular, changes in the population of T3 lymphocytes CD3, CD4, CD8 and CD4/CD8, as well as changes in the level of a number of cytokines (IL-2; IL-3; IL-4; IL-6) are revealed.

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**P437** CULTURE AS SOCIAL DETERMINANT OF HEALTH DETRIMENT TO MSM HEALTH IN KWAZULU NATAL, SOUTH AFRICA


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**Background** Access to health-services for men-who-have-sex-with-men (MSM) is critical in the fight against HIV/AIDS. MSM across South-Africa are experiencing factors preventing them from accessing health-services and have been denied their fundamental human rights. Culture has been identified as one of the key barriers for MSM in accessing health services.

**Method** The study used two data collection tools: in-depth interview and observation for 25 MSM. The interviews were conducted in Durban KZN province focusing on experiential assessments of MSM in the district municipality. The selected