

EV0001

ePoster Viewing

HIV/AIDS (incl anti-retroviral drugs, treatment & susceptibility/resistance, diagnostics & epidemiology)

STI and HIV prevalence in MSM attending for the first time a metropolitan sexual health service in New Zealand.

Massimo Giola^{*1}

¹*Bay of Plenty DHB, Tauranga Hospital, Medical Dept., Tauranga, New Zealand*

Background: The Regional Auckland Sexual Health Service (ASHS) covers the greater Auckland metropolitan area (approximately 1.5M people). In recent years, case reports and case series have suggested an increasing incidence of sexually transmissible infections (STIs) and HIV among men who have sex with men (MSM) in New Zealand (NZ), but no data were available regarding the prevalence among an unselected NZ population of first-time MSM presenters.

Material/methods: A query was run through the electronic medical records database of ASHS to extract the records of the MSM who attended for the first time one of the ASHS clinics between 07/06/2013 and 06/06/2014. We retrieved from the Laboratory database the results of the STI screening for: HIV; syphilis; pharyngeal, rectal, and urethral gonorrhoea; pharyngeal, rectal, and urethral chlamydia; HAV, HBV, and HCV. For statistical analysis, the data was imported into SPSS version 22/2013. Descriptive statistics (counts, frequencies, percentages) and analytical statistics (Chi-square tests for categorical variables and independent samples t-tests for continuous variables) were used as appropriate.

Results: During the 12 months considered, 253 MSM attended for the first time one of the ASHS clinics and had a STI screening. Their mean age was 32.2 ± 10.7 years. The ethnicity was very diverse: 43.5% MSM were registered as NZ European/Pakeha, 20.2% as Other European, 8.3% as Chinese, 6.3% as Maori, 6.3% as Other Asian, 6.3% as MELAA (Middle East, Latin America and Africa). The prevalence of bacterial STIs (syphilis, chlamydia and gonorrhoea) in our sample was high: 30.4% had at least one STI; 3.7% had two, and 0.5% had three. 7.5% of the MSM in our sample tested positive for HIV at their first STI screening: there was a significant association between testing positive and being of non-European ethnicity (Chi-square = 9.123 with DF = 1, $p = 0.003$). No men tested positive for HCV; 67.1% were not immune for HAV; 0.7% were chronic carriers of HBV (HBsAg positive), and 45.6% were not immune for HBV (HBsAb negative).

Conclusions: Our study provides some interesting findings and new data regarding the epidemiology of STIs and blood-borne viruses in NZ. Our 7.5% HIV-positivity rate is slightly higher than in the 2011 community-based NZ survey performed on oral fluid samples, where a prevalence of 6.5% was found, suggesting that the prevalence of HIV among NZ MSM might be increasing. The proportion of people diagnosed with at least one bacterial STI was 30.4%. This is much higher than the most recent self-reported figures from the 2014 NZ community-based surveys (11.7% to 12.9%), but more in line with the results from other clinic-based samples from comparable settings. The high proportion of MSM still not immune HAV and HBV reinforces the need for continuous promotion of those vaccinations.