Epidemiology

PO - (8483) - ASSOCIATIONS BETWEEN HIV AND OTHER STIS AMONG GAY, BISEXUAL MEN AND TRANSGENDER WOMEN IN NAIROBI, KENYA

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Background

Men who have sex with men (MSM) are a key target population for HIV prevention and control in Kenya. Although male sex workers remain the focus of research in Nairobi, HIV/STI prevalence has not been assessed among the wider MSM population since 2010. This study set out to reassess prevalence and associations of HIV and other STIs.

Methods

Respondent-driven sampling recruited 618 MSM. Eligibility criteria were age 18+, male (birth or currently), Nairobi residence and consensual oral or anal intercourse with a man in the last year. Consenting participants completed an online survey including current experience of STI symptoms. Participants tested for HIV [Determine, First Response [2nd gen] & GeneXpert HIV-Qual [4th gen]], syphilis [RPR/TPHA], hepatitis B and C [HBsAg and HCV ELISA], urine and rectal chlamydia and gonorrhea [GeneXpert CTNG]. Associations with prevalent HIV were assessed using multivariate logistic regression.

Results

HIV prevalence was 26.4%[22.6-30.6] including 0.5%[0.2-1.5] detected solely on 4th gen testing. Prevalent HIV was independently associated with age, lower education, Kenyan birth, transgender identity and exclusive sex with men in the past 3 months but dependently associated with STI symptoms. Prevalence of syphilis was 0.8%[0.3-1.9]; hepatitis B 4.4%[3.4-6.9]; hepatitis C 0.5%[0.2-1.5]. 6.4%[4.5-9.0] of participants reported current symptoms consistent with urethritis. Prevalence of urethral GC and CT were 4.4%[2.9-6.7] and 7.3%[5.2-10.3] respectively. 8.6%[6.3-11.6] of participants reported symptoms consistent with proctitis. The prevalence of rectal GC and CT were 13.3%[10.4-16.8] and 8.7%[6.7-11.2] respectively. Overall, only 17.7%[9.2-31.2] of participants with urethral CT/NG and 17.8%[10.7-28.0] rectal CT/NG were symptomatic.

Conclusion

The burden of HIV among GBMSM remains considerably higher than other men in Nairobi, whilst the prevalence of syphilis and hepatitis C are relatively low. Chlamydia and gonorrhoea infections, particularly rectal, are common and frequently asymptomatic. Capacity of GBMSM-friendly and community-based providers to offer CT/NG screening should be prioritised.