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Case Finding Effectiveness of Partner Notification among Patients with Early Syphilis in Madagascar

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Background: Sexually transmitted infections (STIs) constitute a significant public health concern, especially in resource poor settings. Notification and medical evaluation of recent sexual partners of infected patients is important for STI control. However, research on partner notification effectiveness in resource poor settings is very limited.

Methods: We analyzed data collected in Madagascar during a multi-site Phase III randomized controlled trial (RCT) being conducted to evaluate the effectiveness of azithromycin for treatment of early syphilis versus treatment with benzathine penicillin G. We asked index cases who had proven early syphilis during screening to identify and provide contact information for recent sexual partners (cases with primary, secondary, and early latent syphilis reported partners in the past 3, 6, and 12 months, respectively). Index cases or, if requested by the index case, clinic staff members notified sexual partners of their potential exposure to syphilis and asked them to come to the clinic for syphilis testing.

Results: Of 565 index cases, 534 reported recent sex with \geq 1 sexual partner, of whom 252 (47% of 534) reported \geq 1 contactable partner. Of cases with \geq 1 contactable partner, 247 (98% of 252) had \geq 1 partner who was contacted. Of cases with \geq 1 contacted partner, 191 (77% of 247) had a partner who came to the clinic and was tested. Of these, 106 cases (55% of 191) had \geq 1 partner diagnosed with and treated for syphilis. Of 252 index cases with \geq 1 contactable partner, 191 (76%) had \geq 1 partner who was notified and medically evaluated for potential infection.

Conclusion: Partner notification involving cooperation of index patients and staff resulted in treatment of syphilis-infected individuals who otherwise would likely have remained untreated. However, >50% of index cases reported \geq 1 contactable partner, indicating the need for other STI control and prevention strategies in addition to clinic-based partner treatment.

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Clinical Urogenital Samples from North-Eastern Croatia

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Due to the chronic and 'silent' infection and variable antigenic structure of the Chlamydia trachomatis we supplemented Direct Immune Fluorescence with the molecular diagnostic method using COBAS TaqMan 48 real time PCR instrument. The fast molecular diagnostics of C. trachomatis infections and adequate therapy of the infected individuals are the crucial step in the C. trachomatis spread control. The epidemiological data obtained from the Osijek-Baranja County Institute of Public Health archives revealed the true number of chlamydia genital infections among other genital infections in the last five years in our county.

The aim of the present study has been to reveal the most prevalent serotype of the C. trachomatis detected in urine and gynaecological samples in the population of the Osijek -Baranja County and to monitor the infection and the therapy efficiency. The determined serotype distribution has been compared with the C. trachomatis distribution pattern in other regions of the World. All the samples were collected from the Osijek-Baranja County Institute of Public Health and gynaecologist's offices. COBAS TaqMan CT test is an in vitro nucleic acid amplification test which utilizes real time PCR technology. The test has been developed to confirm analogous detection of all 15C. trachomatis serotypes and it produces results within 3 hours. Subsequently all the positive samples have been analysed directly by sequencing of the amplified omp1 fragments using Applied Biosystems 3130 Genetic Analyser. Genotyping and sequence mutation analysis have been performed by BLAST searching and compared with the reference sequences of all known C. trachomatis serotypes.

The most prevalent genotype in Osijek-baranja County was serotype E (in agreement with Sweden and Taiwan data), followed by F, G, D, K, J, H, B, and Ia (differs from Sweden and Taiwan data). Further investigation and data analysis are in progress.

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Surveillance Systems (Poster Presentation)

23.001

Polio Eradication and Acute Flaccid Paralysis Surveillance

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Objective: To review the impact of high non-Polio Acute Flaccid Paralysis (AFP) rate on Polio eradication.

Background: AFP surveillance is an essential strategy for achieving Polio eradication. Recently Advisory Committee for Polio Eradication (ACPE) doubled the operational target for non-Polio AFP to 2 to improve the sensitivity of AFP