exists and is sometimes significant, hence the need for PEP. The social, emotional, and financial implications of HIV make PEP evaluation of great import.

Also, as the prevalence rate of HIV increases, the rate of accidental exposures may increase, further increasing the incidence rate of HIV infection in Healthcare workers and the entire society if preventive measures such as Universal precautions, Blood safety measures, Injection safety measures, barrier contraception and PEP are not employed.

All patients studied were on 2 or more antiretroviral drugs.

**Method:** A retrospective study of cases of PEP, using all clinical records of cases presenting at the Antiretroviral Clinic between 2006 and February, 2008.

The data is analyzed and presented using the Excell and SPSS version 15.

51 cases were studied in all, after about 12 cases were excluded based on gross paucity of information.

**Results:** Of the 51 cases studied, 33.3% were males, 66.7% females. The age range is between 5 and 55years, mean age 26.48yrs. This corresponds to the age distribution of HIV prevalence.

49% were doctors with <2years experience. 82.35% of cases were occupational exposures involving healthcare workers. 27.5% were cases of Rape. Most people presented within 24hours of exposure, and the main cause of delay was logistics. The HIV status of 64.7% of source of exposure was unknown.

About 49% kept their 2 week follow-up appointments, of this, 96% had complaints relating to the GIT system. Of the remainder, 2% had Haematuria and dysuria. 78.43% of cases studied completed the 1 month therapy. There is only one record of Post-PEP tests.

**Conclusion:** PEP is often discontinued, with most clients hardly going beyond the first 2 weeks of therapy; most side effects of the drugs are at their peak within this time frame. Follow-up and Post-therapy tests at 6, 12 and 24weeks are hardly done, making an evaluation of the rate of seroconversion difficult to make.

It is worthy of note that no nationally-representative data exists on PEP surveillance in many countries including Nigeria.

doi:10.1016/j.ijid.2008.05.410

20.027

AIDS Knowledge, Attitudes, Beliefs and Practices (KABP) in Iranian Prisoners’ Society: Results from a Population-Based Survey in 5 Prisons of Southern Coastwise of the Caspian Sea in 2006 Iranian Epidemiological Training Programs for AIDS Prevention in Mazandaran Province

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**Background:** AIDS, one of the most complex health problems of the 21st century, is in its third decade and has become a pandemic disease that threatens the world population. The aim of this study to report data is derived from an investigation of the KABP of AIDS prevention among the large descendants of the Iranian prisoners’ society.

**Material:** Using a multistage area sampling method, a random sample of individuals aged 18–65 years in southern coastwise of the Caspian Sea from February to December 2006. To select a representative sample of the prisoners’ population within 5 different prisons in Mazandaran province had the same probability to be sampled. Prisoners who agreed to participate were given a four-page self-administered questionnaire.

**Results:** 1760 (88%) of the 2000 eligible participants completed the questionnaire. The mean age of respondents was 30.05 ± 8.1 years ranging from 18 to 59, 1686 (95.8%) were male and mostly married 1054 (59.9%), and had received secondary education or above 1178 (66.9%). Most respondents (1690, 96%) had household income levels low or average, and 716 (40.7%) were out of work. The findings indicated that the respondents had average to fairly good knowledge about AIDS. The correct answers ranged from 11.9% to about 85.9%. The majority of the respondents were strongly agree or agree with the statement that people with AIDS should have social right to study or work (1378, 78.3%) or with the statement that AIDS is public health problem (1522, 86.5%). The majority of the respondents (1538, 83.4%) said that the mass media were the main source of their information about HIV/AIDS.

**Conclusion:** findings suggest that prevention programs should be encourage and these might have the potential role to limit the emergence of Iran’s HIV/AIDS epidemic especially in prison’s this country.

doi:10.1016/j.ijid.2008.05.411

20.028

Comparing Two Methods of Training in Increasing Knowledge of People with Respect to AIDS, Shiraz Iran 2007

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**Background:** Awareness of people is a known and effective method of controlling this syndrome. In this study the differences between face to face and lecture based training on increasing awareness of people were compared.

**Methods:** The Scoring level of people awareness before and after conducting two methods of training (face to face and lecturing) by a 28 items questionnaire was compared. Eighteen were general questions related to AIDS and 10 questions were about mode of transmission. The paired sample t-test was performed for comparing before and after scoring each method. Two sample t-test used for comparing changes in mean scores between to methods. Also sex, marital status, level of education and occupation were considered as confounder.

**Results:** The total number of 771 people was participated in this study, which 292 of them were men (37.9%), 472 women (62.1%). The correct answers to general questions were 75% and to the mode of transmission, were 66.5%.
There was significant difference between the two methods of training for both parts of questionnaires ($p < 0.001$). The Scores obtained shows that the effect of face to face training was twice as lecture based training ($p < 0.001$). Other variables such as sex, marital status and etc. were not shown any effect on these differences ($p = 0.24$).

Conclusions: The face to face training is more effective than lecture based one. This may be due to possibility of interaction between trainees and trainers or because of feeling more security in asking questions about dangerous behavior. Our findings show that socio-demographic variables do not have any confounding effect on training outcome.

doi:10.1016/j.ijid.2008.05.412

20.029

Reduction in Prevalence of Sexually Transmitted Infections by Preventive Health Education and Condom Promotion Among Males Having Sex with Males

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Background: Sexually Transmitted Infections (STI) are quite common cause of morbidity in Males Having Sex with Males (MSM). Due to recent introduction HIV/AIDS there has been an increasing emphasis on prevention of STIs including HIV. Pakistan is recently experiencing concentrated HIV epidemic among Intravenous Drug Users (IDU) and MSM in certain cities. To prevent STI including HIV services delivery packages were implemented in few cities having high numbers of MSMs. Infection Control Society Pakistan is implementing one such project in Karachi. A base line survey of knowledge, attitude, Skills and Behavior was conducted along with HIV antibody and VDRL tests as markers of HIV infection and Syphilis respectively.

Methods: A mapping of hot spots and number of target population was conducted with the help of key informants. KASB survey along with HIV antibody and VDRL tests were conducted at the beginning of intervention and after one year. Services included raising awareness, education, behavior change communication, provision of Primary Health Care and syndromic management of STIs, provision of condom and water based lubricants and referral for other related services including anti retro viral therapy (ARV).

Results: STI/HIV Knowledge improved from 18 to 45%, attitude 17 to 38%, Skills 9-37% and behavior 12 to 49%. Condom use increased from 19 to 49%. Peer education and delivery of services close to hot spots proved quite successful in accessing the target group. Interpersonal communication is of great importance in addressing STIs and sexual behaviors and bringing positive change.

Conclusions: There is significant improvement in all the parameters and reduction in rate of syphilis. One year is too short a period to ascertain impact of prevention on HIV prevalence. Comprehensive services delivery using successful models needs to be implemented in all the cities to prevent HIV infection in high risk groups.

doi:10.1016/j.ijid.2008.05.413

20.030

Safe Sex Practice Among HIV Positive Women on Antiretroviral Therapy: A HIV Prevention Challenge for Poor Resourced Settings

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Background: The desire of many HIV-infected women to reproduce has implications for the fight against HIV/AIDS especially for countries with poor resources. We asked HIV positive women about their desire to have biological children and its impact on sexual practices. We determined contraceptive and condom use, disclosure of positive-HIV status to sexual partner and knowledge of partner’s HIV status. The aim was to determine the impact of HIV positive women’s sexual practices on HIV prevention.

Methods: The study was conducted in two sites, Uganda -175 HIV-positive women on HAART, and Botswana -26 HIV-positive pregnant women enrolled in the PMTCT programme. Semi-structured questionnaires and in-depth interview guides were used to collect data. Systematic random and purposive sampling were used to select participants.

Results: Respondents’ mean age was 34.3; mean duration after positive HIV test was 3.87 years. 21% had intentions to reproduce, 35% had future intentions while 15% were pregnant, 30% reported pressure from sexual partners as reason for reproduction while 35% of pregnant respondents fell pregnant to fulfill their partner’s desire for a child. Majority (69%) were sexually active, of which 20% (24) did not disclose HIV status to current sexual partners, and 25% (30) did not know the HIV status of sexual partners. Majority 83.5% (76) reported using contraceptives compared to 16.5% (15) that did not, while 70.8% of the pregnant women discontinued contraception before falling pregnant, and 25% (24) did not use condoms.

Conclusion: Non-disclosure of HIV status to sexual partners compromises HIV prevention and safe sex practice efforts, women are likely to find it more difficult to practice safe sex under this condition. Prevention is further compromised HIV positive women’s desire to reproduce where the partners compromise HIV prevention and safe sex practices.

doi:10.1016/j.ijid.2008.05.414