

Assessing burden and depth of hepatitis B infection within Asian Pacific islander families in San Francisco

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Background: Community-based data suggest that the prevalence of chronic Hepatitis B (HBV) infection among Asian and Pacific Islanders (API) is 6-14%. At least 25% of persons of API descent with chronic HBV will develop complications from liver disease and/or hepatocellular carcinoma during their lifetime. Many family members of patients with known HBV have not been screened. For each HBV-infected person of API descent, we estimated the number of family contacts that had not been screened for HBV.

Methods: From May-September 2009, 31 HBV-infected persons of API descent from a UCSF Liver Clinic who agreed to participate in the study completed a detailed questionnaire about their family history and knowledge of their disease. Each index case subsequently was given coupons to give to family members whose kinship was defined by descent and marriage and whose HBV status remained unknown. These coupons contained information to attend a free screening clinic as well as an identification number linking our index cases to each potential family member. A chart review for each index case was also performed; laboratory values recorded were taken at the time of visit.

Results: Study participants had a median age of 48 and were predominantly men born outside the US (Table 1). For every one index case, 7.5 family members who were at risk were identified; in total, we identified 233 family members whose HBV status was unknown including 26 parents, 20 siblings and 10 children. Fifty-three percent of index cases stated that they had acquired HBV from their parents, while 33% stated that they did not know how they had acquired it. Alternative transmission modes included from dirty water, "homegrown" anti-malarial medication, dentists, and street vendors. Ninety-three percent of index cases stated that they had informed their family members of their status; reasons for not informing include stigma, shame and unclear understanding of transmission methods.

Conclusion: Though nationwide vaccination campaigns are beginning to target this underrepresented immigrant

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Serological typing improves the epidemiological surveillance of gonorrhoea among men who has sex with men

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Background: Gonorrhoea remains a major sexually transmitted infection (STI) worldwide. *Neisseria gonorrhoeae* has nowadays a high prevalence of resistance to several antibiotics traditionally used for treatment. During April 2004 to February 2007, we characterized all isolates from cases of gonorrhoea reported to the County Medical Officer of Uppsala county serologically with monoclonal antibodies and for antibiotic susceptibility.

Methods: Isolates were characterized by using two panels of different monoclonal antibodies commercially available (Gentec Systems and Pharmacia). Susceptibility testing was performed according to standardized methodology using Etest for determination of MIC for ampicillin, cefixime, ceftriaxone, azithromycin, ciprofloxacin and spectinomycin. Production of beta-lactamase was examined by using nitrocefin disks.

Results: Of 57 isolates studied, 7 strains were producers of beta-lactamase (13%). Decreased susceptibility to ampicillin and ciprofloxacin was observed in 81 and 56%, respectively. Eight isolates (14%) exhibited reduced susceptibility to azithromycin. All isolates were susceptible to cefixim, ceftriaxon and spectinomycin. The majority of the isolates belonged to serogroup WII/III (98%). Bropyst (49%) and Brpyust (11%) was the most common Ph serovar. The epidemiological study demonstrated that most ciprofloxacin resistant isolates were isolated from men who had sex with men and that the majority of these isolates belonged to the same serovar. A difference in gender was obvious (4 women, 7%). The mean age was for women 36 years and for men 24 years.

Conclusion: A clonal outbreak of gonorrhoea among men who has sex with men was observed during 2005 to 2006 in Uppsala county. This clone is resistant to ciprofloxacin and has reduced susceptibility to ampicillin. Preventive measures and intensive epidemiological control of gonorrhoea among men who has sex with men is warranted.

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Table 1 Index Case Characteristics (n = 31)

Mean Age	48 (22–87)
Male	63%
Ethnicity	39% Chinese 13% Vietnamese 13% Filipino 7% Korean 9% South/Southeast Asian
Born outside of US	83%
Mean Albumin	4.0 (2.7–4.7)
Mean ALT	41 (11–182)
Detectable HBV viral load	82%