We aim at evaluating the efficacy of HAART and the prognosis of AIDS patients in Tianjin.

**Methods:** (1) 62 naive AIDS patients were enrolled and were randomly divided into HAART group (n=45) and contrast group (n=17). (2) AIDS patients in HAART group were initially treated on first-line antiretroviral (ARV) drugs, AZT/D4T+3TC+NVP/EFV. (3) Observing the two groups of patients on clinical manifestations, changes in immune function and prognosis.

**Results:** (1) The baseline CD4 cell counts had no significant difference between two groups of patients (P>0.05). In HAART group, the median of CD4 cell was 73/ul (n=45) before HAART was introduced. And after 3, 6, 12 month of HAART initiation, the median of CD4 cell was respectively 120/ul (n=39), 139.5/ul (n=30) and 200/ul (n=22). (2) The incidence of OIs/cancers and mortality of patients in HAART group was 40% and 4.4%, which were obviously lower than contrast group, 88.24% and 47.06% (P<0.01). (3) 95.5% (43/45) naive patients take effect on first-line HAART but 17.78% (8/45) patients adjust drug regime as side effect.

**Conclusions:** Tianjin AIDS patients show a good effect on first-line HAART. Along with the extension of HAART period, the Immune function of patients was gradually restored and prognosis was significantly improved.

**PP-157 Risky sexual behaviors among young urban females in post-conflict Liberia**

Oretha Perry*, 1, Stephen B. Kennedy 1, 2, Ermree M. Bee 1, Pearl W. Fahnbulleh 1, Salome Garber 1, Ermee M. Barbu 1, Wede M. Nagbe 1, 1UL-PIRE Africa Center, An HIV/AIDS Prevention Research Center, A. M. Dogliotti College of Medicine, University of Liberia, Monrovia, Liberia; 2Pacific Institute for Research & Evaluation (PIRE), Louisville Center, Louisville, KY, USA

**Objectives.** Liberia, a country west of Sub-Saharan Africa, has not escaped the massive and terrible effect of this HIV/AIDS epidemic, especially among vulnerable populations like young females. Data regarding the HIV/AIDS risk behaviors of youth Liberian females have been relatively unavailable. In the presentation, we characterized the HIV/AIDS risk behaviors of young urban Liberian females and propose intervention strategies to mitigate the spread of the virus among this population.

**Method.** The study method is a community-based randomized controlled trial (RCT) in Monrovia, Liberia. Study participants were randomly assigned to either a behavioral-driven HIV/AIDS prevention program or a general health program, administer a 8-session program, and followed for up to 12 months to determine the efficacy of the HIV/AIDS program.

**Results.** Young urban Liberian females are at high risk for HIV/AIDS. For example, they are less likely to use condoms, more likely to have multiple sexual partners, and less likely to be knowledgeable about HIV/STDs. Strikingly, gender inequalities and socio-economic disparities are major contributing factors.

**Conclusion.** We conclude that the findings from this study has the potentially to contribute to the research and policy gaps as-...