after the patient has stopped any antibiotic therapy for at least 4 weeks. If the midstream urine of the patient does not indicate any urinary tract infection, a localization study should be performed.

Pathogens usually recognized as causing a chronic prostate infection are the same as the traditional uropathogens (TP), mainly *E. coli*, other *Enterobacteriaceae*, *Pseudomonas aeruginosa*, and enterococci. But also non traditional pathogens (NTP) including Gram-positive bacteria, such as staphylococci and streptococci, and also ureaplasmas, mycoplasmas and especially *Chlamydia trachomatis* (Skerk 2008). A gonococcal prostatitis may be fairly rare and can be acute and chronic.

The fluoroquinolones are recommended as drugs of choice in chronic infection of the prostate, if the pathogens are susceptible, because of their favourable prostate pharmacokinetics, which are however different between the analogues. Clinical studies with levofloxacin have shown, that our conventional dosage regimens may have to be reconsidered in favour of higher dosages and probably shorter treatment durations. In case of STI in addition macrolides and tetracyclines may be included into the therapeutic armamentarium.

In chronic pelvic pain syndrome (CPPS) where infection cannot be found, phenotyping of the symptoms and a multimodal therapy may be considered since such a complex syndrome may have several underlying pathologies.

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Type: Invited Presentation

Final Abstract Number: 40.003
Session: Sexually Transmitted Infections: Global Challenges
Date: Saturday, March 5, 2016
Time: 15:45-17:45
Room: G.01-03

Global challenges of implementing human papillomavirus vaccines

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Abstract: Every year cervical cancer affects around 528000 women and causes 266000 deaths worldwide with 80% of deaths occurring in less developed countries with a concomitant 18-fold difference in mortality occurring between developed and developing countries. Cervical cancers is caused by the Human Papilloma Virus (HPV) with the oncogenic types 16 and 18 accounting for 70% of invasive disease. Other cancers associated with HPV infection include vaginal, vulvar, penile, oropharyngeal and anal cancers. In addition, HPV types 6 and 11 cause anogenital warts and recurrent respiratory papillomatosis. In 2009, the World Health Organisation issued the first position paper on HPV vaccines, revised in 2014, in which it supported HPV vaccine introduction into national immunization programmes where: 'i) prevention of cervical cancer and/or other HPV-related disease is a public health priority ii) the introduction is programmatically feasible and economically sustainable, and where iii) cost-effectiveness aspects have been duly considered. They recommended that the primary target population should be girls aged 9-13 years but that HPV vaccination of males is not recommended as a priority, especially in resource-constrained settings, as the available evidence indicates that the first priority should be for cervical cancer reduction by timely vaccination of young females and high coverage with each dose. In 2014 the recommendations for HPV vaccine changed form a three dose to a two-dose schedule.

In 2011 the Global Alliance on Vaccines and immunisation (GAVI), tasked with supporting the introduction of new vaccines into the world's poorest countries, approved support of HPV vaccines introduction into GAVI eligible countries with the low negotiated price of US$ 4.50 per dose compared to US$ 100 in high-income countries. By 2015 GAVI plans to support the immunisation of approximately one million girls with HPV vaccines and by 2015 more than 30 million girls in less developed countries.

This presentation will explore the reach, successes and epidemiological impact of HPV vaccine introduction worldwide and will consider some of the challenges such as the introduction of school immunisation programmes, the immunisation of boys, and the controversy around HPV vaccine introduction in India.

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Room: G.01-03

Prospects of untreatable gonorrhea and ways forward

T. Tbd

Abstract: (no abstract received from presenter)

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Type: Poster Presentation

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Time: 12:45-14:15
Room: Hall 3 (Posters & Exhibition)

Antimicrobial resistance, phylogenetic distribution and molecular docking of integrons in multidrug resistant diarrheagenic E.coli isolates from children under five in Delhi, India.

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Background: Integrons are versatile gene acquisition systems commonly found in bacterial genomes. They are ancient elements that are a hot spot for genomic complexity, generating phenotypic diversity and shaping adaptive responses. Mobile gene cassettes captured within integron arrays encompass a vast and diverse pool of genetic novelty. These elements are able to capture and express gene cassettes encoding antibiotic resistance. The main aim of this study was to investigate the distribution of integrons in multidrug resistant diarrheagenic *E.coli* isolates, to analyze the possible relationship between the antimicrobial resistances profiles,