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SYPHILIS AND ITS ASSOCIATION WITH HIV INFECTION IN PATIENTS FROM A GENERAL HOSPITAL IN BUENOS AIRES, ARGENTINA

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Background: Syphilis is an old known sexually-transmitted disease (STD). Despite it can be easily prevented and treated, each year more than 10-million cases are still diagnosed worldwide, with an incidence of 1, 5 cases/1000 inhabitants in Latin-America. There is limited epidemiological data from South-America available.

Materials & Methods: We performed a retrospective analysis of medical records of patients with clinical diagnosis of syphilis and non-treponema-test data (VDRL) available between June-2012 and October-2015. Age, gender, HIV status, HIV plasma viral load (VL), follow-up and repeat infection rates were analyzed. Loss to follow-up was considered when post-treatment-VDRL was not performed, and repeat infection was defined as a fourfold increase in VDRL titer after effective treatment. HIV VL<200 copies/mm³ was considered as virologic suppression (VS). Statistical analysis was performed using Epi Info 7.2.1.

Results: 3464 VDRL results from 994 subjects were analyzed. 83.9% were men, with a median age of 35-years (IQR 27-43). 771 patients (77.6%) were HIV-positive (HIV+) and 353 of the 654 subjects with available VL data were on VS (54%). 663 (63.7%) had at least one VDRL during follow-up period, with higher follow-up rates in HIV+ (66.9% versus 52.5% p<0.01) and older than 35-years subjects (67.7% versus 59.6% p<0.01). Overall repeat infection rate was 19%, with higher rates in older-than-35-years (23.1% vs. 14.2% p<0.01), HIV+ patients (20, 7% vs. 11,1% p=0.02), and HIV+ patients on VS (27.3% versus 12.9% p<0.01). Median time to repeat infection was 506 days (IQR 363-658).

Conclusions: As stated in previous epidemiological reports, rates of syphilis repeat infections are higher in subjects older than 35-years and in HIV+ patients, especially in those on VS. Our findings remark the need for reinforcement of STD-preventive measures in this population. The usual medical care in HIV+ patients may overestimate the rates of follow-up and repeat infection compared with HIV negative patients.

Biography

Jose Barletta is an Argentine Physician graduated from Universidad de Buenos Aires. He is a Teaching Assistant in Clinical Pharmacology at Universidad de Buenos Aires since 2009. He is currently working as an Infectious Diseases Resident at Hospital Fernández, a reference center for HIV in Argentina where he carries out research and patient-care activities. He has authored and co-authored several research projects.

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