

Prevalence of *Chlamydia trachomatis* and *Neisseria gonorrhoeae* in men having sex with men and female sex workers in Haiti.

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Background:

Over the last 15 years, the prevalence of HIV in Haiti has stabilized to 2.0%. There is limited information about the prevalence of other STI in the Haitian population in general and even less among key populations. Here we report the first study evaluating the prevalence of *Chlamydia trachomatis* (CT) and *Neisseria gonorrhoeae* (NG) in Men having Sex with Men (MSM) and Female Sex Worker (FSW) in Haiti.

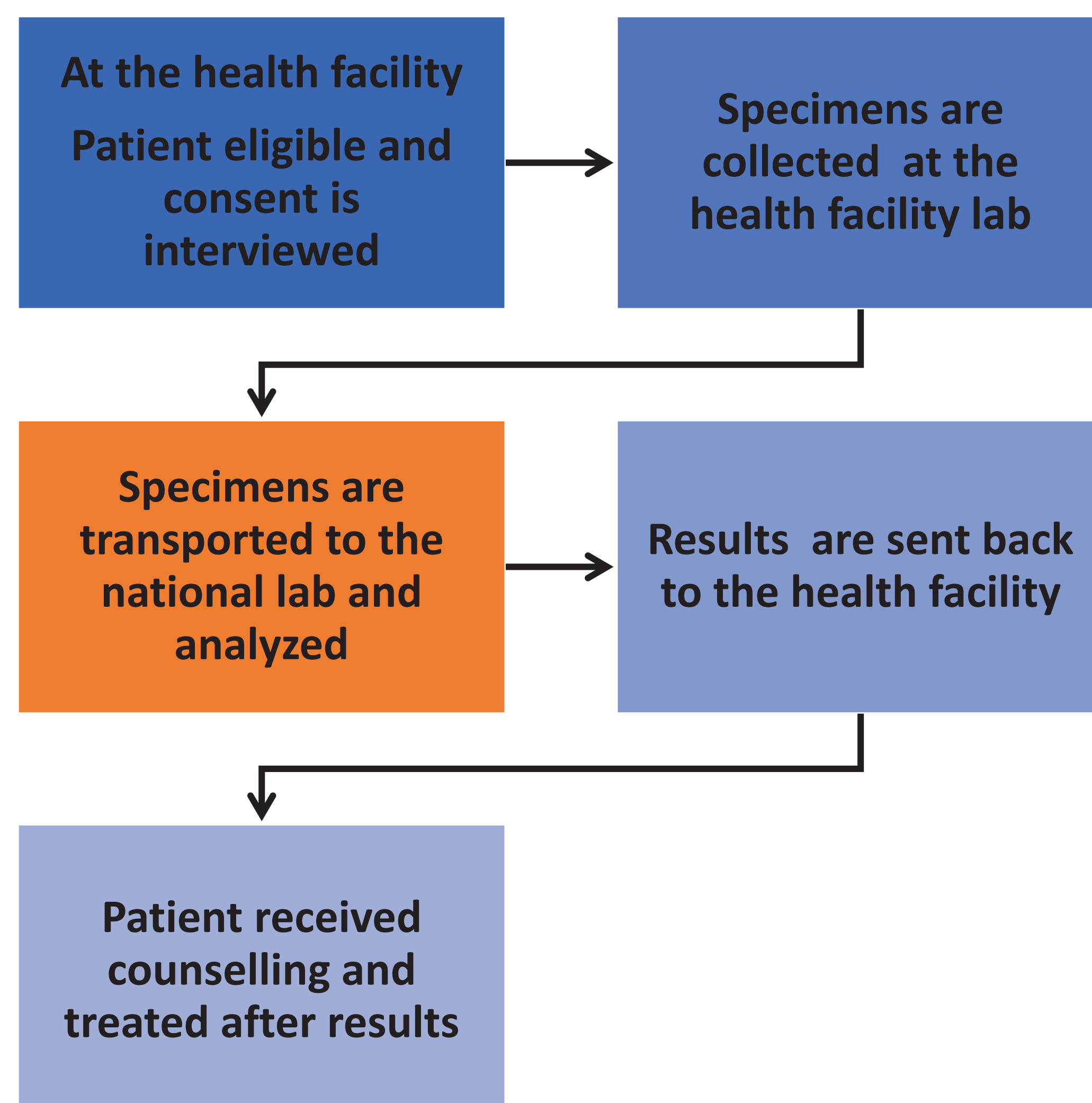
Methods:

A cross-sectional study was conducted, and participants from 7 health facilities in Port-au-Prince were recruited with these inclusion criteria:

- 18 years or older
- self-identified as MSM or FSW
- antiretroviral naïve
- under treatment for less than 12 months if living with HIV/AIDS
- provide informed consent to participate in the study.

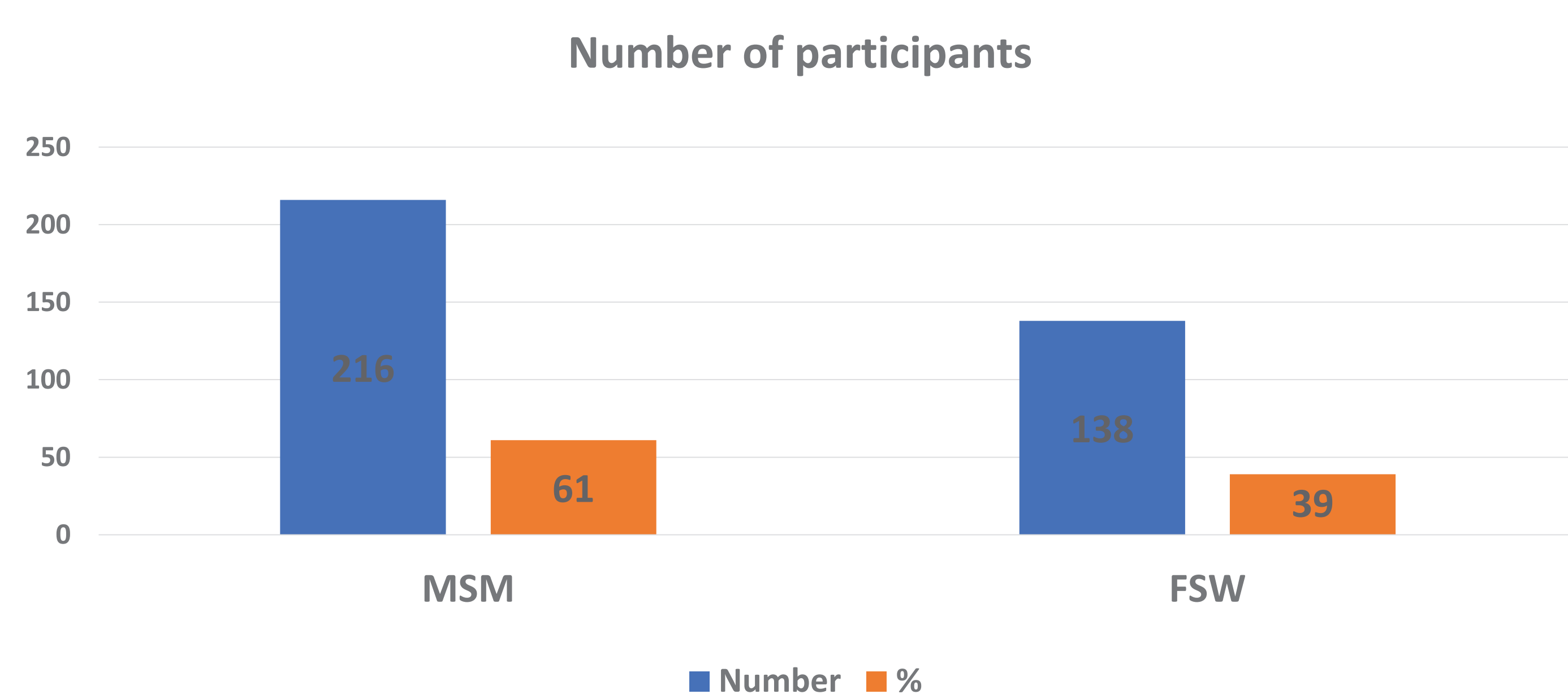
A paper-based behavioral survey was administered to the participants to collect socio-demographic, clinical, and risk behavior data.

All samples were tested by nucleic acid amplification test NAAT, using GeneXpert.

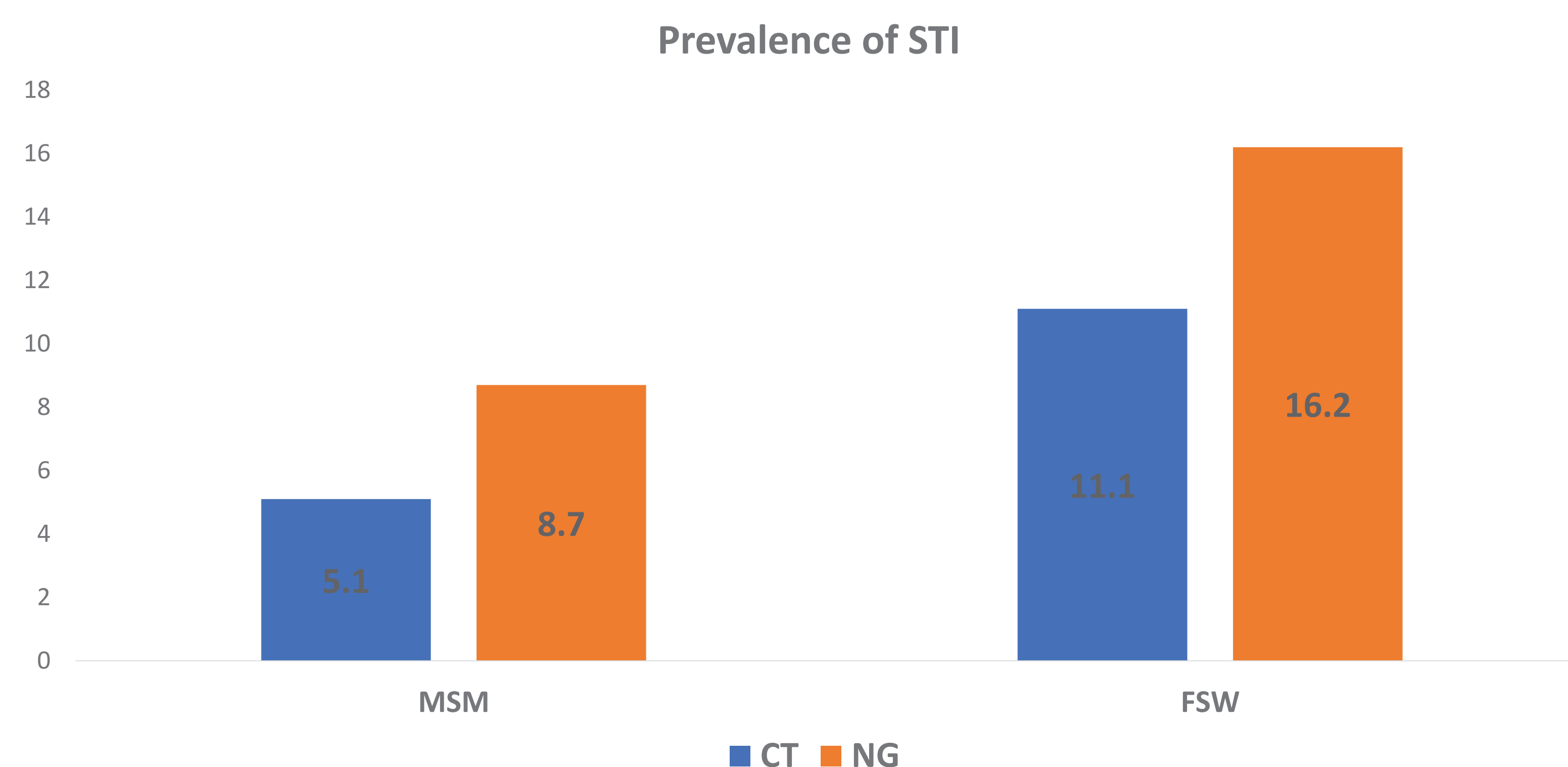


Results:

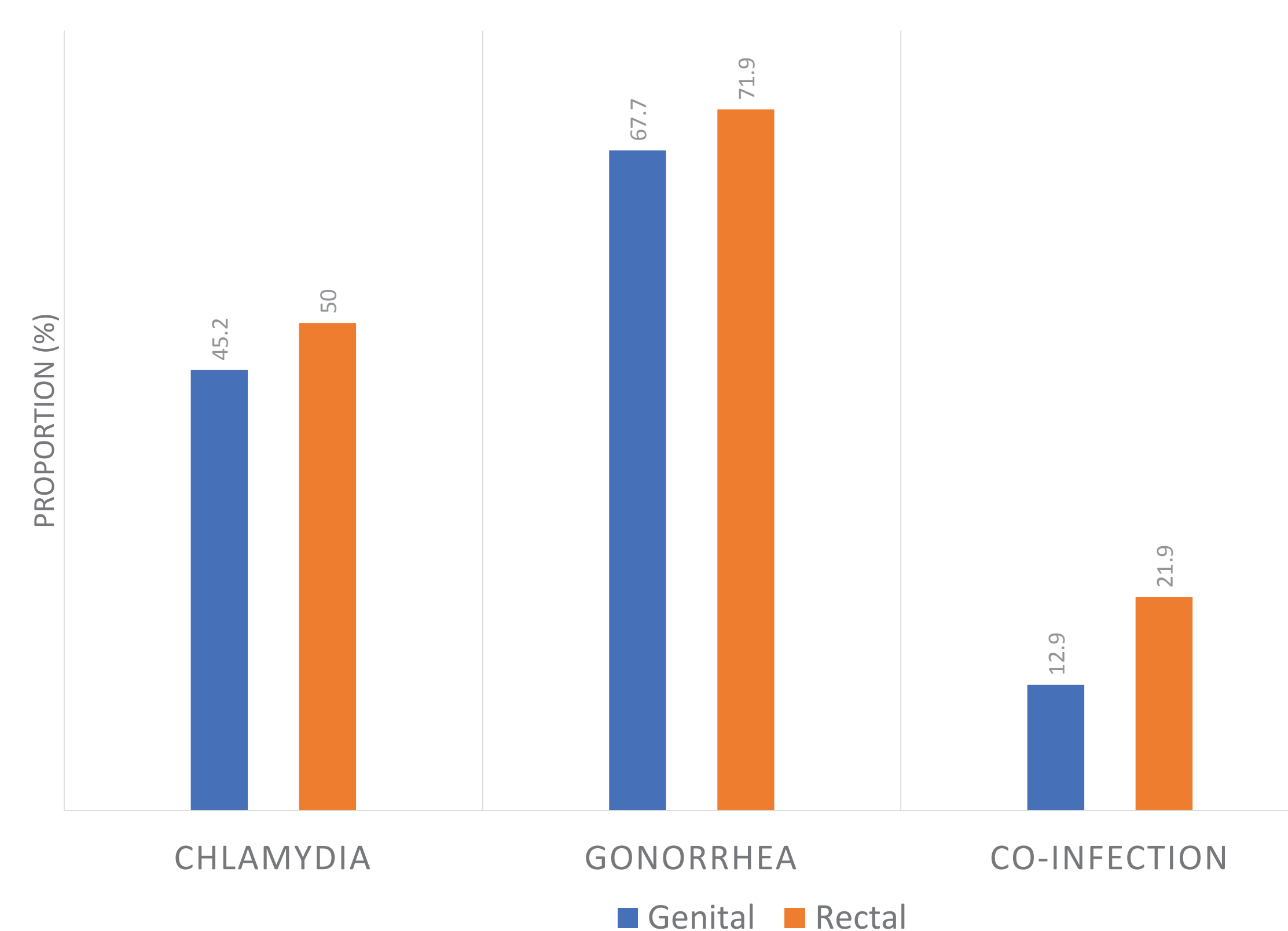
A total of 354 participant with 138 (39%) FSW and 216 (61%) MSM were recruited in the study.



The prevalence of CT was 11.1% among MSM and 5.1% among FSW. The prevalence of NG was 16.2% among MSM and 8.7% among FSW.



There were as many infections in both rectal and genital sites and higher rectal co-infections



Participants between 18-30 years old were significantly more likely to be infected with CT and NG (OR: 4.8, 95% CI: 1.3-17.8; OR: 5.2, 95% CI: 1.9-13.9 respectively).

Participants who never attended school or had some primary education were significantly more likely to be infected with NG (OR: 2.3, 95% CI: 1.0-5.6).

People living with HIV/AIDS were significantly less likely to be infected with CT (OR: 0.4, 95% CI: 0.1-0.9).

Conclusions:

Given the high rates of CT and NG infections among MSM and FSW in the metropolitan area of Port-au-Prince, performing routine risk assessments and appropriate screening are critical to the sexual health of these populations and their partners and to prevent HIV in HIV-negative subgroups.

Periodic risk assessment and testing for STI should be offered in Haiti as part of a comprehensive strategy to improve the sexual health of key populations.