

**Poster Exhibition Topic: Liver disease hepatitis co-infection**

**MOPEB051 - Hepatitis B co-infection in HIV positive patients in Hong Kong**

*H. Li<sup>1</sup>, S. Lee<sup>1</sup>, S. Chu<sup>1</sup>, J. Wu<sup>1</sup>, P.C. Li<sup>2</sup>, K. Wong<sup>3</sup>, M. Lee<sup>2</sup>, C. Tse<sup>3</sup>, J. Sung<sup>1</sup>*

<sup>1</sup>The Chinese University of Hong Kong, Stanley Ho Centre for Emerging Infectious Diseases, Hong Kong, Hong Kong, <sup>2</sup>Queen Elizabeth Hospital, Kowloon, Hong Kong, Hong Kong, <sup>3</sup>Integrated Treatment Centre, Department of Health, Hong Kong, Hong Kong

**Objectives:** To determine the prevalence of HBV co-infection and its correlates in a cohort of HIV patients in Hong Kong.

**Methods:** A cohort of HIV positive patients was established through the merging of data from two major HIV specialist clinics in Hong Kong, China. Three time periods were defined to study the pattern of HBV infections: 1996 to 1999 (Period I), 2000 to 2002 (Period II), and 2003 to 2005 (Period III). Chronic HBV infection was defined as a positive HBsAg test at presentation. Logistic regression analyses were used to correlate variables and HBV infection.

**Results:** A total of 778 HIV positive patients were on the register during the study period. The median age for these participants was 36; 80.7% male and 85.1% Chinese. The overall HBsAg prevalence was 11.4%. The number of patients in each period and the HBsAg prevalence were: Period I (n=31, prevalence 17.0%); Period II (n=26, prevalence 8.6%); and Period III (n=32, prevalence 10.8%). A slightly higher prevalence was found in male (11.8% vs 10.0%,  $p>0.05$ ). Heterosexuals had a higher HBsAg prevalence than men having sex with men (MSM) (12.6% vs 6.7%,  $p=0.1$ ), while that for Injecting Drug Users was 0%. (n=23). Older age (age>40) was slightly associated with lower HBV co-infection prevalence (11.7% vs 10.9%), while non-Chinese ethnicity had a significant lower prevalence (5.2% vs 12.6%,  $p<0.05$ ).

**Conclusions:** The HBsAg prevalence of HIV infected individuals in Hong Kong is higher than that in the general population. A declining trend is seen, in line with that of population pattern. Management of HIV/HBV coinfection would be a challenge to HIV treatment in Asian populations.

*Presenting author email: fallenkerry@gmail.com*