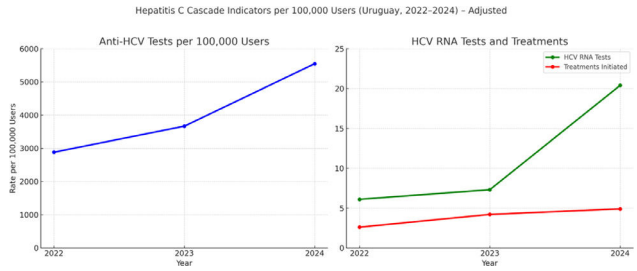

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#109

CHARACTERIZATION OF PATIENTS CO-INFECTED WITH HEPATITIS C AND HIV IN THE NORTH REGION OF BRAZ

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Introduction and Objectives: Patients co-infected with Human Immunodeficiency Virus (HIV) and hepatitis C virus (HCV) are at higher risk of unfavorable outcomes, such as accelerated development of liver fibrosis and cirrhosis, as well as increased morbidity and mortality.

To describe the profile of patients co-infected with hepatitis C and HIV in the North region of Brazil between 2013 and 2023.

Materials and Methods: A descriptive, cross-sectional study using data from the Notifiable Diseases Information System (Sinan) for the period from 2013 to 2023. The variables analyzed were sex, race, and education level. Descriptive statistical analysis was performed to characterize the profile of the cases.

Results: A total of 420 cases of co-infection with hepatitis C and HIV were identified. The majority were male (69.0%) and self-declared as "pardo" (brown/mixed-race) (81.4%). Regarding education level, 26.2% of the records were unknown; among the available data, those with complete high school education (19.0%) and 5 to 8 incomplete years of study (18.1%) stood out. In terms of geographical distribution, Amazonas had the highest proportion of cases (38.8%), followed by Pará (29.5%) and Rondônia (16.7%).

Conclusions: The data indicate a predominant profile of co-infection among men, "pardo" individuals, and those with low education levels, with a concentration in the state of Amazonas. These findings reinforce the need for specific prevention, diagnosis, and care strategies aimed at the most vulnerable populations in the North region.

Conflict of interest: None

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#110

DATA OMISSION IN COMPULSORY NOTIFICATION FORMS RELATED TO HEPATITIS A, B AND C AND HIV CO-INFECTION

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Introduction and Objectives: Co-infection with Human Immunodeficiency Virus (HIV) and hepatitis C virus (HCV) represents a significant public health challenge in Brazil, as it is associated with worsening clinical outcomes, such as accelerated progression of liver disease and increased morbidity and mortality.

To describe the rate of incomplete reporting related to HCV and HIV co-infection among individuals notified between 2013 and 2023 in the North region of Brazil.

Materials and Methods: This is a descriptive, cross-sectional study conducted using data from the Notifiable Diseases Information System (Sinan) database for the period from 2013 to 2023. The variables used were viral hepatitis classification and co-infection with HIV. Subsequently, a descriptive analysis was performed to identify omissions in the HIV co-infection variable in viral hepatitis notifications.

Results: A high number (18.6%) of data omissions was observed regarding HIV and viral hepatitis co-infection. Among the types, the highest omission rate was observed in hepatitis A notifications (21.7%), followed by hepatitis C (20.3%) and hepatitis B (17%). Among the states, Roraima showed the highest percentage of omission of information on HIV diagnosis (23.2%).

Conclusions: The data reveal a significant percentage of omissions regarding the investigation of HIV co-infection in viral hepatitis notifications, especially for hepatitis A (21.7%), C (20.3%), and B (17%). This weakness in the completeness of information compromises epidemiological surveillance and health action planning.

Conflict of interest: None

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#111

IMPACT OF HEPATITIS A VACCINATION IN PRIORITY ADULT GROUPS AS AN OUTBREAK CONTAINMENT STRATEGY IN BRAZIL

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Introduction and Objectives: Viral hepatitis A (HAV) is an infection primarily transmitted via the fecal-oral route. In 2016, the World Health Organization observed an increase in HAV cases in low-endemicity countries, associated with oral-anal sexual practices.

To evaluate the outcome of hepatitis A vaccination in adults from priority groups as a strategy for containing the hepatitis A outbreak.