PREVALENCE AND RISK FACTORS FOR TRICHOMONAS VAGINALIS AMONG WOMEN ATTENDING A SEXUAL HEALTH CLINIC IN MELBOURNE, 2006-2019

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Background:
There is limited data on epidemiological trends in Trichomonas vaginalis (TV) in Victoria as it is not a notifiable disease. The aim of this study was to examine the prevalence of TV in women in Melbourne over the last 15 years and identify associated risk factors.

Methods:
All women aged ≥16 years who presented to Melbourne Sexual Health Centre between 2006 and 2019 were included. The diagnostic method was changed from culture to NAAT in August 2018. The positivity of TV each year was calculated and temporal trends examined using the chi-squared trend test. Multivariable logistic regression was performed to examine the factors associated with TV positivity, and generalised estimating equations (GEE) were used to account for repeated measures.

Results:
Between 2006 and 2019, 67,694 women were tested for TV at MSHC, and 270 women tested positive (0.40%, 95% CI 0.36-0.45). TV positivity increased significantly from 0.27% (95% CI, 0.16-0.46) in 2006 to 1.57% (95% CI, 1.18-2.07) in 2019 (ptrend <0.001). TV positivity increased from 0.98% in the culture period to 1.67% in the NAAT period (p=0.009). Multivariable analysis adjusted for the diagnostic method used, year of diagnosis, age, Indigenous status, country of birth, condom use in the last 12 months, and injecting drug use in the last 12 months. Women with TV were more likely to be above 35 years old (aOR 3.07, 95% CI 1.99-4.74), identify as Aboriginal or Torres Strait Islander (aOR 3.22, 95% CI 1.32-7.83), not always use condoms (aOR 1.86, 95% CI 1.14-3.06) and report injecting drug use within the last 12 months (aOR 8.69, 95% CI 5.49-13.76).

Conclusion:
Increasing TV diagnoses in women attending a sexual health clinic in Melbourne are likely due to the change to a more sensitive diagnostic test. Risk factors for TV include older age, condomless sex, Indigenous status and injecting drug use.

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