



874 - SELF-REPORTED SEXUALLY TRANSMITTED INFECTIONS AMONG WOMEN PARTICIPATING IN A CERVICAL CANCER SCREENING PROGRAMME IN KINSHASA

S. Carlos, J. Segovia, B. Tendobi, J.D. Kudimanya, M. Iñigo, C. Ugwu, M.D. Lozano, L. Chiva, G. Reina

Universidad de Navarra; Centre Hospitalier Monkole; Clínica Universidad de Navarra-Pamplona; Nnamdi Azikiwe University; Clínica Universidad de Navarra-Madrid.

Resumen

Background/Objectives: Sexually transmitted infections (STIs) remain a major public health concern in sub-Saharan Africa due to their impact on sexual and reproductive health and their interaction with HIV and high-risk human papillomavirus (hrHPV). In low-resource settings, limited access to laboratory diagnostics means that STI burden is often assessed through self-reported data. This study aimed to describe the prevalence of self-reported STIs among women attending a cervical cancer screening programme in Kinshasa and to analyse associated factors.

Methods: A cohort study was conducted among women attending a cervical cancer screening programme at Monkole Hospital, Kinshasa (D.R. Congo) between 2022 and 2025. Participants completed a questionnaire collecting clinical and epidemiological information, including self-reported history of STIs. Testing of hrHPV was done on cervico-vaginal samples from all participants. Cervical cytology or histopathological examination of biopsy specimens was carried out in a subset of women. Descriptive and regression analyses were performed using Stata 12.0.

Results: A total of 3,880 women participated (mean age 47.3 (SD:12) years); 55% married and 17% widowed; 32% employed; 42% belonged to Eglise de Reveil and 29% Catholic. Women reported 6.8% early sex (< 15 years), 26.1% ? 4 lifetime sexual partners, 43.8% condom use (only 2.9% consistent use). Hormonal contraception was used by 33.4%. Self-reported HIV+ was 3.9%, and 2.4% had an HIV+ partner. The prevalence of hrHPV was 24.5%, and 6.0% of women had precancerous lesions or cervical cancer. STIs were self-reported by 17.1%, including HIV (9.9%), gonorrhoea (3.9%), trichomoniasis (2.9%) and syphilis (1.5%). Among women with STI, 17.9% had an STI-infected partner. STIs were more frequent among hrHPV+ women than among hrHPV- women (19.6 vs. 16.1%; $p < 0.05$). In multivariate analysis, self-reported STIs were associated with HIV infection (aOR 23.8, 95%CI 9.5-59.2), condom use (aOR 1.5, 95%CI 1.1-2.1), use of vaginal plants (aOR 1.8, 95%CI 1.3-2.5), oral sex (aOR 1.9, 95%CI 1.4-2.8), having an HIV-positive partner (aOR 1.2, 95%CI 1.0-1.4), early sexual debut (aOR 1.6, 95%CI 0.95-2.8) and multiple lifetime partners (aOR 1.1, 95%CI 0.9-1.4). There was also an association between self-reported STIs and hrHPV (aOR 1.4, 95%CI 1.0-1.9).

Conclusions/Recommendations: Self-reported STIs were common among women attending cervical cancer screening in Kinshasa and were associated with hrHPV infection, HIV status, sexual risk behaviours and

vaginal products use.

Funding: Gobierno de Navarra 2024/028.