Previous incarceration by 71% (153/214). Of all, 53% (114/216) injected drugs in the last 30 days, and 41% (89/216) reported unprotected sex in the last 12 months. Prevalence of active HBV was 1.9% (4/212), of active HCV 15.9% (34/213), and of HIV 2.8% (6/213). No active TB was diagnosed, while 14.4% (31/216) tested positive for latent TB infection. Active syphilis was found in 1.4% (3/212), NG in 2.0% (4/197), CT in 3.0% (6/197), and serological evidence of HBV vaccination in 26% (56/212). While 44% (96/216) of participants were ever tested for HCV, 71% (36/51) of those with HCV antibodies knew about their infection, 36% (13/36) of them reported previous/current treatment.

Conclusions: Burden of HCV and HIV was high among PEH in Berlin, and risk behaviours were frequently reported. There is a need to improve access to regular health care, accompanied by low-threshold prevention offers in cooperation with drug and homeless services. A nationwide expansion of the study is planned.

Key messages:
- High burden of Hepatitis C and HIV among people experiencing homelessness in Berlin, Germany.
- Access of people experiencing homelessness to regular health care needs improvement, accompanied by low-threshold prevention offers in cooperation with drug and homeless services.

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Healthcare-associated infections in a neonatal ICU before and during COVID-19: preliminary results
Mariateresa Ceparano
M Ceparano1, A Sciurti1, C Isonne1, MR De Blasiis1, V Imeshtari1, V Cammalleri1, A Romano1, RK Bellomo1, C Marzuillo1, P Villari1
1Public Health and Infectious Diseases, Sapienza, Rome, Italy
Contact: mariateresa.ceparano@uniroma1.it

Background: Healthcare-associated infections (HAIs) are a frequent complication in neonatal intensive care units (NICUs). Hospital policies caused by COVID-19 pandemic may have played a role in HAIs development. The aim of this study was to describe and characterize over time the occurrence of HAIs in a NICU at the Policlinico Umberto I in Rome both before and during the COVID-19 pandemic.

Methods: All infants of all birth weight (BW) classes with >2 days in the NICU, admitted from January 2018 to December 2021, were included. To assess the effect of the pandemic, we compared surveillance data from 2018-2019 with those from 2020-2021. Infections were defined using standard Centers for Disease Control and Prevention definitions.

Results: We included 513 infants, 274 admitted in 2018-2019 and 239 between 2020-2021. NICU stay in days was similar in the two periods (14.4 and 15.3 respectively) but the number of patients who died in 2018-2019 (N = 13) was almost double that of 2020-2021 (N = 7). A total of 27 infections were recorded in the post-pandemic period compared to 9 recorded in the previous period, mainly central line-associated bloodstream infections (CLABSI) (7% vs 3.0%, p = 0.043), followed by ventilator-associated pneumonias (VAP) (3.0% vs 0.4%, p = 0.019). The incidence density of device-associated infections was higher in patients with lower BW class in both periods analyzed. Different microorganisms were isolated: in 2018-2019 K. pneumoniae (33.3%) and Serratia marcescens (33.3%) were the most found, while S. aureus (29.0%) and Staphylococci coagulase negative (51.6%) were predominant in the following years.

Conclusions: Results indicate that patient management may have influenced the occurrence of HAIs during the pandemic. This reinforces the importance of the HAI surveillance protocol in the NICU, which monitors microbiologic isolates and medical device use for all classes of infants with BW.

Key messages:
- The Covid-19 pandemic has resulted in an increase in healthcare-associated infections occurrence in our neonatal intensive care unit.
- Monitoring device-associated infections in all BW classes of infants is critical to prevent nosocomial infections.

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The impact of the COVID-19 pandemic on the incidence of herpes zoster
Nicolas Lecrenier
N Lecrenier1, R Parikh1, C Wang2, D Curran3, R Widenmaier4
1Global Medical Affairs, GlaxoSmithKline, Wavre, Belgium
2Epidemiology, GlaxoSmithKline, Rockville, USA
3Value Evidence, GlaxoSmithKline, Wavre, Belgium
4Global Medical Affairs, GlaxoSmithKline, Rockville, USA
Contact: nicolas.lecrenier@gsk.com
Background:
There have been several case reports of herpes zoster (HZ) following COVID-19 disease and vaccination. We conducted a non-systematic literature search to elucidate the global effects of the COVID-19 pandemic on the incidence of HZ.

Methods:
The literature search was performed in October 2021 using PubMed and Embase. The search string was herpes zoster AND COVID-19. Publications were manually reviewed; case reports were removed.

Results:
Three retrospective studies reported the risk of HZ following COVID-19 disease. One study (Bhavsar, 2021) used two US databases and found higher risk of HZ following COVID-19 disease (relative risk [RR] = 1.15) and COVID-19 hospitalisation (RR = 1.21), respectively. A strong association between HZ and COVID-19 disease (RR = 5.27) was also reported in a study of the University of Florida patient registry (Katz, 2021). The third study (Barda, 2021) reported no association between COVID-19 disease and risk of HZ (RR = 0.82). In two of the three observational studies in Israel (Furer, 2021 and Barda, 2021), the incidence of HZ was increased following COVID-19 vaccination. The third study (Shasha, 2021) found no association (RR = 1.07). Other studies included a report in Brazil (Maia, 2021) that demonstrated a 35% increase in HZ diagnoses during the pandemic versus pre-pandemic and a published model (La, 2021) that estimated the declining uptake of recombinant zoster vaccine in the US may result in 63,117 avoidable HZ cases in those who remain unvaccinated in 2021.

Conclusions:
Emerging data suggest that the COVID-19 pandemic may have increased the risk of HZ and negatively impacted HZ vaccine uptake. Therefore, there is an important need to increase awareness of HZ and HZ vaccination during the pandemic.

Key messages:
• There is a need to increase awareness of HZ and HZ vaccination during the COVID-19 era.
• Further studies are needed to fully understand the impact of COVID-19 on the risk of HZ.