predictive factor for mortality ($p=0.02$), HR=3.2 (1.3 to 7.7), adjusted for the other scales, gender and age (Cox).

**Discussion and Conclusions** Of the elders’ morbidity, ADL alterations are the causes for most concern as they are already noted to be predictive for mortality after 3 years of the cohort’s survival.

**SP3-42** TRENDS AND CHARACTERISTICS OF SELF-REPORTED HIV TESTING IN WOMEN OF CHILDBEARING AGE, IN PERU 2000, 2004 – 2008

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**Introduction** In the 26-year HIV/AIDS epidemic in Peru more than 39,682 cases of HIV and 25,533 cases of AIDS have been reported. Despite a higher concentration of the epidemic in men who have sex with men, there has been transmission to other groups and a decline in the male to female ratio of HIV infection. The objective of our study was to examine trends and factors associated with obtaining HIV testing for women of childbearing age (WCBA).

**Methods** We used Demographic and Family Health Surveys databases of Peru from the years 2000, and 2004 to 2008 to study trends of self-reported HIV testing. The association between HIV testing and sociodemographic and reproductive health factors was assessed using bivariate analyses and logistic regression.

**Results** We analysed data from 124,797 Peruvian WCBA. There was a significant difference in the number of WCBA who reported having been tested for HIV, with more than a doubling of testing between 2000 (15.3%) and 2008 (39.6%) ($p<0.001$). HIV testing was associated with urban residence (OR 1.96), higher educational level (OR 5.14), speaking Spanish (OR 3.10), having a partner (OR 3.21), and having had a sexually transmitted infection in the preceding year (OR 2.15).

**Conclusion** There has been an increasing number of WCBA who report HIV testing since 2000, but less than half of WCBA do not seek HIV testing. Major factors associated with HIV testing should be considered when planning new initiatives to increase HIV testing of WCBA.

**SP3-43** FACTORS INFLUENCING WOMEN TO RETURN TO RECEIVE THEIR PAP SMEAR RESULTS, IN THE STATE CAPITAL OF RIO DE JANEIRO IN BRAZIL

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**Introduction** Although actions for cervical cancer reduction in primary care were implemented in Rio de Janeiro in the 80s, the incidence and associated mortality are still among the highest in the country. For effective prevention it is essential women complete follow-up after their Pap smear. More information about the reasons preventing follow-up is needed.

**Objective** To investigate the factors that influence women not to return to receive their Pap smear result in the Brazilian Public Health System in Rio de Janeiro city, Brazil.

**Material and Methods** A cross-sectional study was conducted. All participants signed a consent form and 1,278 women completed the protocol. The questionnaire included: socio-demographic status, self-evaluation about health status, knowledge about prevention, last Pap smear and reproductive history.

**Results** The percentage of women who did not return to receive the result of Pap smear was 23.1% (18.3–27.9). Schooling, marital status, race, religion and per capita income, self-evaluation about health status, knowledge about prevention, reason to perform exam, satisfaction level in medical attendance were not associated with the return for getting the results. Women who were not informed of a date to return for her result were less likely to return than those who had been informed, 47.0% (55.9–58.4).

**Discussion** The results showed that the behaviour of the health professional and the infrastructure of the healthcare system can influence the return of women to receive the Pap smear result and their follow-up treatment.