the study was to describe the epidemiology of HIV/AIDS in the period 2000–2009.

**Methods** We conducted a descriptive study using secondary data provided by the National HIV/AIDS Program in Ecuador for the period 2000–2009. The analyses were performed in Epi Info 3.5.2.

**Results** The general population prevalence of HIV was 0.14% in the period 2000–2009. In this period there were 5791 AIDS cases and 13,567 HIV cases. The incidence rate of HIV/AIDS increased from 5.25 per 100,000 inhabitants in 2000 to 38.35 per 100,000 in 2009. During this period, the mortality rate was 5.05 per 100,000 inhabitants. In 2009, the HIV prevalence among MSM (men who have sex with men) was 19%, among sex workers 3.2%, and among pregnant women 0.15%.

**Conclusion** The prevalence of HIV in the general population is low. The results also show an increasing incidence rate of HIV/AIDS in the period 2000–2009. The mortality rate from HIV was low in relation to the mortality rate in Central and South America (14.5 per 100,000 inhabitants) for the same period. In MSM, the prevalence of HIV was more than 5% meeting the criteria of

**Objectives** To evaluate the plaque index and oral hygiene habits of adolescents.

**Methodology** Tranversal and descriptive study in a sample of 189 adolescents aged between 11 and 17 years of age. Data collection was conducted through a questionnaire to adolescents about oral hygiene. There has yet to assess the plaque index simplified by applying the developer board.

**Results** For the Plaque Index Simplified the vast majority (98.9%) of adolescents reveals plaque. Most (69.3%) of teens brush their teeth twice a day, 54.3% of those referred to brush your teeth, tongue and gums and 60.3% state that it takes 2–5 min to perform brushing. However, 56% never runs brushing at night. The deficient oral hygiene habits (46.6%) and good oral hygiene habits (46%) among the adolescents are very similar.

**Conclusion** The results suggest that there is need to develop with teenagers individualised training and supervision of proper brushing of teeth.

**Background** Metabolic syndrome comprises a set of aggregated risk factors, which increase the risk of cardiovascular disease and type 2 diabetes mellitus, and changes in the abnormality criteria account for differences in prevalence rates and in the population attributable risk.

**Aim** Verify the prevalence of metabolic syndrome according to the NCEP-ATPIII, IDF and AHA/NHLBI criteria.

**Method** This cross-sectional study enrolled HIV infected patients from a HIV/AIDS reference Center in southern Brazil. Metabolic syndrome was identified according to the NCEP-ATPIII, IDF and AHA/NHLBI criteria, using standardised questionnaire and blood testing.

**Results** A sample of 1240, out of 1295, HIV-infected patients was enrolled. Males were on average older, more educated, and had shorter time since the HIV diagnosis. The population attributable risk (PAR) for waist circumference explained 80% of the prevalence among men and women (AHA/NHLBI criteria). Triglycerides had the highest impact on prevalence of metabolic syndrome according to all criteria, independently of age, skin colour and HAART use, among men. The southern and south regions of Brazil had the highest population of subjects HIV-infected with metabolic syndrome.

**Conclusion** In this large sample of HIV infected patients, the overall prevalence of metabolic syndrome, under either classification, was noticeable and the AHA/NHLBI definition accounted for the highest prevalence. The largest population HIV-infected with metabolic syndrome is concentrated in the southern and south of Brazil.