

in LMICs. Findings from this study will lead to the development of a team-based health intervention that addresses hypertension in rural populations in low and middle income countries.

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Simulation-based training of obstetric providers in Nicaragua

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Cardiometabolic risk factors in Human Immunodeficiency Virus infected patients on 2nd line anti-retroviral therapy in Nairobi, Kenya

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Background: The association of protease inhibitors (PIs) in antiretroviral therapy (ART) and development of cardiovascular disease (CVD) in HIV patients is well established in developed countries. In Kenya, the prevalence of these abnormalities in patients on PI based 2nd line ART is unknown. The objective of this study is to characterize CVD risk factors in patients receiving 2nd line ART in Kenya.

Methods: A cross-sectional study was conducted on 263 patients on 2nd line ART at Mbagathi Hospital in Nairobi, Kenya. After appropriate IRB approval and informed consent was obtained, patients 15 years and older on 2nd line ART for at least 6 months were included. For those below the age of 18, informed consent was obtained from a parent or legal guardian. Patients with diabetes, taking lipid-lowering medications, and medications that affect metabolism were excluded. Eligible patients were screened for metabolic syndrome by evaluating central obesity, lipodystrophy, blood pressure, and glucose levels as defined by the International Diabetes Federation. The primary sample size was determined using Fisher's formula. Statistical analysis was performed using SPSS.

Findings: 53 patients out of 231 (22.9%) met the criteria for metabolic syndrome. There was no correlation of response to HIV therapy with the presence of metabolic syndrome. Alcohol consumption, smoking, and sedentary hours were not correlated with metabolic syndrome. The presence of clinical lipodystrophy did have a statistically significant difference between those with and those without metabolic syndrome (ANOVA of <0.01).

Interpretation: Patients on 2nd line ART have CVD risk factors. Interventions need to be utilized to minimize preventable NCD risks in these patients. Study limitations included small sample size, the lack of previously established data and guidelines in this patient population, and the loss of 32 patients to follow-up. Further studies need to compare patients not on HIV therapy, on 1st line ART, and on 2nd line ART to understand whether CVD risk is affected by HIV infection, treatment, or both.

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Developing team skills competencies for the global health context: interprofessional predeparture training for health science students engaging in global health projects at the University of Florida

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Program/Project Purpose: The University of Florida (UF) Health Science Center prioritizes interprofessional training of its composite colleges' students—Medicine, Nursing, Pharmacy, Dentistry, Veterinary Medicine and Public Health and Health Professions. A natural component of such interprofessional training is pre-departure training for students engaging in interdisciplinary and interprofessional global health projects to focus on team skills competency development.

Structure/Method/Design: The goal of the pre-departure training is to expose the students to the personal, professional, and cultural standards required by all health professionals working in global settings. Health Science Center students participating in global health electives, service learning trips or field-work participate in a one-day interprofessional pre-departure seminar. Training consists of panel presentations by faculty, small group case studies, and facilitated, large group discussions with faculty members from the six colleges. Students are provided with knowledge and skills on safety measures, appropriate behaviors, interprofessional collaboration, and professional limitations, which prepare them for success in their various international travels. Training focuses on the interprofessional aspects of global health work, and aims to foster student understanding and appreciation of interprofessional work.

Outcome & Evaluation: One hundred thirty seven UF students participated in the second annual 2015 training. Quality improvement surveys revealed that the 2015 workshop better met students' needs by incorporating additional vignettes, case discussions, and faculty panels. Students reported increased awareness of cultural sensitivity, personal safety, and the impact of one's behaviors on working in global contexts. Students also found the workshop valuable for improved knowledge of working within one's professional limits and understanding of other professions' roles and interprofessional collaboration. Teams felt more ready to work together to utilize the skills of their colleagues to solve global health problems.

Going Forward: Interprofessional pre-departure training shows promise for cultivating team skills competencies for global health education. We will continue to strengthen pre-departure training emphasizing cultural sensitivity, student safety, and collaboration with local teams in the context of interdisciplinary teams. We