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Anaemia is a common medical condition. Most anaemias go undetected until symptomatic. MDP 301 is a phase III microbicide trial. We conducted this study to determine prevalence of anaemia at screening and follow-up of enrolled HIV negative women in HPRU, Durban. METHODOLOGY: We conducted a retrospective CRF review of Hb level and HIV status of the first 1000 screening participants. Any Hb < 11.5 is classified as anaemia. Anaemias were subdivided according to Hb level: mild =10 - 11.4g/dL; moderate= 8 - 9.9g/dL; severe= 6 - 7.9g/dL; critical= <6g/dL. Screened out participants (HIV positive) were counseled and referred for treatment. Enrolled participants were counseled on diet and/or referred for treatment, and FBC s repeated after 3 months. RESULTS: Of the first 1000 women , 620 were HIV positive and 380 were HIV negative. The prevalence of anaemia among HIV negative women was 15.8% and among HIV positive women was 33.9%, with an overall prevalence of 22.7% among both groups. The levels of anaemia were as follows: mild 72.4% and 74.4%; moderate 25.5% and 20.2%; severe 2.0% and 3.9% and critical 0% and 1.6% in the HIV negative and HIV positive women repectively. 68% of enrolled HIV negative participants showed an improvement in Hb levels at followup. 43% normalized by the 3 month follow-up visit. CONCLUSIONS: The prevalence of anaemia is twice as high in HIV positive as in HIV negative women at screening. Amongst the enrolled women, a high percentage showed an improvement in Hb due to improved diet and/or treatment. Through the screening process of an HIV prevention trial, women with anaemia were identified and followed-up. This is an additional public health benefit as without the trial in the community, the condition would have gone unrecognized.