From the high risk groups of the patients attending the HIV clinic Jawahar Lal Nehru Hospital Ajmer, Blood samples were collected and were screened for HIV, HBV, HCV and Syphilis co-infection. Out of 256 samples 12 samples were positive for HBV i.e. 4.68% Positivity. Highest prevalence among age group 36-45 years (50.0%), while not a single HBV positive case were recorded in age group <15 years. 6 out of 12 patients were between 36-45 year of age, which implies that HBV infection is more common in adult males.

Out of total samples 03 samples were positive for HCV i.e. 1.17 % positivity. Patients were between of 16-30 years of age, which implies HCV infection is also common in younger generation. 26 samples of all were positive for syphilis i.e.10.15% positivity. Patients were between of 26-35 year of age which implies syphilis is common in younger generation. Seroprevalence of syphilis is highest seen in sexual age.

Co-infection with HIV & HCV or HBV in growing public health concern because disease spread in a similar manner. HCV, HBV are the viral infection of the liver, over time they can lead to serious consequences including liver cirrhosis and liver cancer. Co-infection can complicate treatment due to chronic hepatitis in HIV Positive patients. With careful management, most people with HIV/HCV or HIV/HBV co-infection can be successfully treated for both diseases.

Out of total 256 samples studies, 26 samples were found to be positive for syphilis i.e. 10.15% positively. Seroprevalence was highest in age group 26-
35 years which implies that syphilis infection is more common in adults. In both the sexes *T. palladium* can spread throughout the whole body, infecting major organs.

Syphilis has long been known to be an important factor for adverse pregnancy outcome. The consequences of untreated maternal infection include still birth, low birth weight (LBW), preterm live birth and also congenital infection in proportion of surviving.

Thus, high prevalence of such infectious diseases may pose serious health risk to human beings. We believe our data could help the health professionals to deal better with HBV, HCV and syphilis co-infection in HIV infected patients. We also believe our data reinforces the need of prevention programmes, which can reduce prevalence of HBV and HCV in HIV infected patients.