

GETTING IT ON UNIT

SEXUALLY TRANSMITTED INFECTIONS

DEFINITIONS AND INTRODUCTION

- **Sexually Transmitted infection (STI)** has replaced Sexually Transmitted Disease (STD)
 - o More encompassing – includes infections that are **asymptomatic** (no symptoms)
- STI – **infections spread by close sexual contact and intercourse** – skin, genitals, body fluids, mucous membranes
- **Help available** from: counsellor, teacher, school nurse, walk in clinic, family doctor, sexual health clinic

TYPES OF STIS

- **Bacterial/Parasitic** – infection caused by bacteria/parasite – treated: antibiotic/microbial medication
 - o Bacterial – Chlamydia, Gonorrhoea, Syphilis
 - o Parasitic – Public Lice (crabs), Scabies
- **Viral** – infection caused by virus – cannot be cured, but only treated with medication
 - o Possible to remain asymptomatic for periods of times, and can be passed on
 - o HIV/AIDS, Hepatitis B and C – blood-borne
 - o Genital Warts, Genital Herpes
- **Blood-borne diseases** – spread through contaminated blood, body fluids and breast milk (HIV only)
 - o Sharing needles, tattooing/piercing, sexual intercourse/contact, infected mother to baby

SPREAD AND SYMPTOMS

- **Males:** mouth, throat, eye, penis, urethra, rectum or anus, semen, blood, skin or around genital area
- **Females:** mouth, throat, eye, cervix, vagina, rectum or anus, vaginal fluid, blood or skin around genital area
- **Symptoms** include:
 - o Burning while urinating or itching
 - o Discharge
 - o Sores, bumps or a rash on or around genitals
 - o No symptoms at all
- **Complications** include:
 - o Infertility, urinary tract complications, cervical cancer
 - o Pelvic inflammatory disease (PID) in women
 - o Epididymitis in men
 - o Psychological impact or serious illness and death

PREVENTION

- **Abstinence** – no skin to genital, genital to genital, body fluid to genital contact
- Limiting **number of sexual partners** and **communicating** to them about sexual history
- Use of **contraceptive techniques** correctly, avoiding sex when symptoms visible
- Regular **STI testing** (annual)
 - o When? – Before having sex with new partner, forced to have sex, STI symptoms, if current/past has STI

TYPES OF STIS

HEPATITIS

- **3 types** – A, B, C
 - o A – Sharing food and drinks
 - o B, C – sex, snorting straws, needles
- **Damages the liver**
- Vaccine available for A and B
- **Effects:**
 - o Urine: dark coloured
 - o Faeces: light, can be white
- **Symptoms:** fever, jaundice, muscle aches and pains
- **Treatment:** rest, diet, no alcohol or medications

HIV

- Develops into AIDS (Acquired Immune Deficiency Syndrome – not one illness, unable to defend yourself)
- Stages:
 - o Acquire the HIV virus – through blood of infected person/sexual contact
 - If you swallow sperm, you can get HIV
 - Influenza symptoms (3 months)
 - o Asymptomatic infection – multiplying in your body (no symptoms)
 - Feel well, possible tiredness
 - Use contraceptives, can last between 5 – 12 years
 - o Persistent generalised lymphadenopathy
 - Signs and symptoms begin to appear – general fatigue
 - Lymph nodes start to swell up
 - Several years depending on individual
 - o AIDS – virus attacks immune system (body cannot fight infection) – and die
 - Kaposi Sarcoma: spots of infection, reddish lesion on skin
 - Lymphomas: cancer of immune system
 - Dementia, Pneumocystis carnee
 - Pneumonia: lungs fill with water

CHLAMYDIA

- Bacterial STI, present in eye, mouth or throat
- Males and females can become sterile
- Symptoms: none for female, burning sensation of urine for males
- Treatment: swab and urine test, cure available, removed 7 days after treatment
- Can be re-infected

METHODS OF CONTRACEPTION

- **Abstinence:** no skin to genital, genital to genital, body fluid to genital contact – other limits to be set

FIRST TWO (FOR MEMORY)

- **Male condom** (98% 😊, 85% 😊)
 - Barrier for skin to skin contact + protect against pregnancy + STI
 - Available at pharmacies, grocery stores, health clinics
 - Made from latex – polyurethane, polyisoprene (synthetic rubber)
- **Female condom** (95% 😊, 79% 😊)
 - Inserted prior to any vaginal contact – 8 hours prior (natural feeling and sensitivity from soft thin plastic)

HORMONAL CONTRACEPTION – PILL/PATCH/RING

- **How – 3 ways:**
 - Stops release of mature egg
 - Cervical mucus thickens – prevents sperm to get to egg
 - Lining of the uterus changed – difficult to implant egg
- **Effects:**
 - Makes periods more regular, less bleeding + pain
 - Protects against some cancers (ovary + uterus), **but not STIs**
- **Continuous and Extended uses:**
 - Traditional: 21 days + 7 days hormone free (period begins here)
 - Continuous: uninterrupted w/o planned hormone free break
 - Extended: prolonged (2+ cycles) w/ planned hormone free break (< 7 days break)
 - Any product with < 50 ug ethinyl estradiol can be used = most types of pills/patches/rings
- **Birth Control Pill (BCP)** (99.7% 😊, 92% 😊)
 - Oral pills containing estrogen and progestin
 - Taken same time each day
 - Traditionally 21 days of hormones followed by 7 days free of hormones (21/7), New: 24/4, 84/7
- **Birth Control Patch** (99.7% 😊, 92% 😊)
 - Hormonal patch on skin (may cause skin irritation), contains estrogen and progestin
 - Once a week for 3 weeks, 1 week break
 - Higher risk of pregnancy when > 195 lbs
- **Vaginal Contraceptive Ring** (99.7% 😊, 92% 😊)
 - Hormonal ring inside vagina (may cause discharge or irritation), contains estrogen and progestin
 - Worn for 21 days, removed for one week (hormone free)

OTHER CONTRACEPTION – MORNING AFTER/SHOT/SPERMICIDES

- **Emergency Contraception/Morning After Pill (Prescription)**
 - o Prevent pregnancy after unprotected sex/contraceptive failure
 - o Cannot affect a pregnancy that has already implanted
 - o Taken 24 hours after (95% ☺), can be taken up to 5 days (58% ☺)
- **Birth Control Injection/Depo-Provera/The Shot (99.7% ☺, 97% ☺)**
 - o Injection to the arm/hip every 24 weeks by health professional
 - o Stops body from release of egg
 - o Effects:
 - 12 mths – 55% stop periods, 24 mths – 68%
 - Irregular spotting/bleeding
 - Delay in return of cycle after stopping
 - Increase bone mineral loss (Calcium, Vit. D)
- **Contraceptive Spermicides (82% ☺, 71% ☺)**
 - o Products containing Nonoxynol 9 – kills sperm on contact
 - o Inserted before sex, should be used w/ condom, effectiveness varies
 - o Effects: Vaginal irritation = ↑ risk of STI's incl. HIV

LONG-ACTING CONTRACEPTIVES – IUD/IUS

- **Copper IntraUterine Device (IUD) (99.9% ☺ + ☺)**
 - o Left in place for 3 to 5 years, inserted by health professional
 - o Does not contain hormones, but copper affects sperm movement + prevents embryo implantation
- **Mirena IntraUterine System (IUS) (99.9% ☺ + ☺)**
 - o Left in place for 3 to 5 years, inserted by health professional, contains progestin
 - o Lining of uterus thickens the cervical mucus = difficult for sperm to reach egg
 - May prevent ovulation, decrease menstrual blood loss by 74 -97%

OTHERS

- **Abstinence (100% ☺ + ☺)**
- **Male Sterilisation (99.9% ☺, 99.85% ☺), Female Sterilisation (99.5% ☺ + ☺)**
- **Natural Family Planning (observing the cycle) (95% ☺, 75% ☺)**
- **Withdrawal (96% ☺, 73% ☺)**
- **Diaphragm (94% ☺, 84% ☺)**
- **Chance (15% ☺ + ☺)**