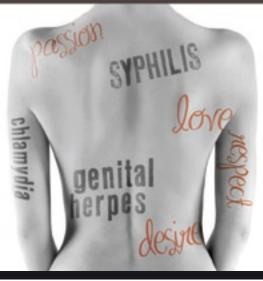


To find out more and protect yourself more effectively

Your **body** can transmit **emotions**, and more...

Sexually transmitted infections



Sexually transmitted infections

Sexually transmitted infections (STIs) are infections that are transmitted **from one person to another** during sexual relations. They are caused by microbes such as viruses, bacteria, protozoa and parasitic arthropods.

STIs affect, above all, the genital organs, but they can also be found in other places, particularly in or around the mouth and the anus. In some cases, the infection becomes generalised, invading the blood and lymphatic system and affecting other organs.

What are the main STIs?

There are many different sexually transmitted infections, some more serious than others. Aids is the best known. Human papillomavirus infections, which can cause genital warts, and genital herpes, affect large numbers of people.

The most serious STIs are, by alphabetic order, as follows:

- Chlamydia or chlamydial genital infection
- Genital herpes
- Gonorrhea or gonococcal infection (clap)
- Hepatitis B
- HIV infection/Aids
- Infections caused by certain types of the human papillomavirus (HPV)
- Lymphogranuloma venereum (LGV)
- Syphilis or infection by Treponema pallidum

Other less serious but fairly common STIs include:

- Genital warts (caused by other types of the human papillomavirus)
- Pubic lice (crab louse)
- Scables
- Trichomoniasis or infection by *Trichomones*

Many of these infections go unnoticed, as there are no visible signs of infection, particularly at first.

However, if they are not detected and treated when infection first takes place, they can cause **complications and leave sequelae**, such as sterility and cirrhosis. On the other hand, if they are detected early on they are usually easy to diagnose and treat.

Possible complications:

- Gonorrhea or Chlamydia: persistent lower abdominal pain, sterility or ectopic pregnancy (pregnancy outside the uterus).
- Hepatitis B: cirrhosis and/or liver cancer.
- Syphilis: severe cardiovascular and nervous system disorders.
- HIV infection/ Aids: HIV weakens the immune system causing illnesses and, in the long term, unless treated, death.

How are STIs transmitted?

STIs are transmitted principally during **sexual relations** with penetration (vaginal, anal and/or oral-genital) and, at times, during sexual contact without penetration.

- Through exchanges of body fluids such as semen, urethral discharge, vaginal discharge or blood from the infected person. This is the case of infection by HIV, hepatitis B, gonorrhea and chlamydia.
- Through direct contact with areas of the skin or mucous membranes affected by the infection (in certain cases, there are visible lesions or sores). This is the case of genital herpes, genital warts and syphilis.

STIs are transmitted very easily if protection is not used: a male or female condom or a mouth protector (a latex square known as a dental dam).

Some STIs can also be transmitted in **other ways** besides the sexual route:

- Hepatitis B and HIV can be transmitted through the blood of an infected person sharing contaminated drug injection equipment or using equipment which has not been sterilised to give tattoos or piercings.
- Scabies and pubic lice in the genital area can be transmitted through intimate body contact or contact with infected clothes.
- Pregnant women can infect their baby during pregnancy, at the moment of birth or in breastfeeding. This is the case of HIV and syphilis.

You should also be aware that:

Most STIs can be contracted more than once. Even when a person has been treated for one of these infections, they can become infected again.

STIs are transmitted in chains, that is to say, a person infected with an STI can pass it on to many others, and each of these, in turn, can cause new infections.

STIs facilitate transmission of HIV. A person already infected with a sexually transmitted infection is at a higher risk of becoming infected with HIV.

Remember:

 The risk of transmission is not the same for all sexual practices with unprotected penetration:

Higher risk

Anal penetration.

Vaginal penetration: the risk is higher when there is bleeding (during menstruation or the first sexual penetration).

Lower risk

In **oral sex**, the risk of transmission is generally lower, though the risk of syphilis infection is quite high. In the case of HIV, fellatio is a risk for the person who receives the ejaculation in their mouth.

 Mouth-to-mouth kissing, petting, mutual masturbation and massages are other ways of having sexual relations in which the risk of STI infection is much lower, and in which there is no risk of becoming infected by HIV.



What are the signs of STIs?

Some people who are infected by STIs –particularly women– either show no symptoms, or the symptoms are intermittent or almost imperceptible. Others, however, present clearly evident symptoms and/or signs.

It is important to watch out for the appearance of these signs and symptoms, which can alert us to the presence of an STI. There are many different such warning signs, which can appear days or months after infection has actually taken place.

In women: increased vaginal discharge with a different smell or consistency than usual; rashes, irritation or itching in or around the genitals; pain during sexual relations.

In men: a yellowish secretion (with or without pain) from the penis; pain or burning when passing urine.

In both men and women: ulcers in the genital organs, mouth or anus; warts in the genital or anal region; swollen lymph nodes in the groin.

Remember:

- Sexually transmitted infections may be manifested not only around the genitals and urinary apparatus, but also in other places.
- Not all symptoms or signs affecting the genital organs (rashes, itching, etc) are caused by sexually transmitted infections.
- Whatever the warning sign, however, it is essential to see a doctor, who will diagnose any illness and prescribe the necessary treatment.



Prevention is the best way

is the best way to avoid them

Early diagnosis can prevent most complications

Possible symptoms or signs of sexually transmitted infections

Gonococcal or chlamydial infections	In women: abnormal vaginal discharge. Abnormal vaginal bleeding between menstrual periods. Pain during sexual relations. In men: abnormal secretion from the penis or anus. Pain in passing urine.
Infection by Trichomonas	In women, abnormal vaginal discharge with unpleasant smell, sometimes accompanied by itching.
Genital herpes	Painful sores in the genital organs or anus, appearing and disappearing periodically.
Syphilis	One or more painless ulcers around the genital organs, anus or mouth. These ulcers may disappear spontaneously, even without treatment. Later, red marks or rashes may appear on the body and then disappear again.
Lymphogranuloma venereum (LGV)	This begins as a small, painless ulcer around the genitals. Later, painful abscesses (swollen lymph glands) develop around the groin. If the anus becomes infected, mucus (which may be bloody) discharges may appear, along with swelling similar in appearance to haemorrhoids.
Condiloma	Painless warts or growths (sometimes in large numbers) around the genital organs (penis, vagina, neck of the uterus, scrotum) or anal region.
Pubic lice	Rashes, irritation or itching with inflammation around the pubic region and/or armpits.
Scabies	Intense nocturnal itching; irritation between the fingers and around joints (elbows and wrists) and/or the genital organs.
Hepatitis B	Jaundice, dark urine, light-coloured stools, nausea, fatigue.
HIV infection	At the beginning of infection: fever, swollen lymph nodes, skin eruptions.

How to find out if you are infected?

Generally speaking, **specific tests** are needed to detect STIs. These tests are quick and simple, requiring only a small sample of blood and/or genital secretions (from the urethra, vagina, neck of the uterus, etc) or urine.

After examining the results and carrying out a physical examination, the doctor will then make the diagnosis.

Remember:

- A routine gynaecological check-up, even if it includes cytology ("pap test") does not always enable the doctor to detect the presence of STIs.
- As some infections can be transmitted to the foetus or newborn, testing is recommended to detect any STIs at the beginning of a pregnancy (or before, if the pregnancy is planned).

Do treatments exist?

In most cases, treatment **is easy and effective**. Although curative treatments do not exist for all sexually transmitted infections, it is important to begin treatment as soon as possible in order to prevent most of the complications that STIs can cause.

According to the specific diagnosis, the doctor will prescribe the necessary treatment. It is very important not to self-medicate, as inappropriate treatment may disguise the physical signs without curing the infection, which will continue to be active.

If you are diagnosed as having a sexually transmitted infection, it is important to take preventive measures and/or provide treatment for all those who may have been or may become infected: people you have had sexual contact with, and people you have shared needles with. This is the only way of preventing the infection from returning and breaking the transmission chain.

How to prevent stis?

Prevention is the best way of avoiding these infections. To prevent STIs, you should:

 Use protective barriers in your sexual relations, and avoid coming into contact with skin or mucous membrane lesions, particularly around the genital area, unless both partners are certain that they are not infected.

Condoms (male and female) have proved effective, but they must be used correctly, with sufficient lubrication, for every sexual relation (for both vaginal and anal sex, and fellatio).

Note: it is vitally important to use lubricant (a water-soluble gel such as glycerine) with the condom for anal penetration. Do not use oil-based lubricants (butter, oil, sun cream, Vaseline, etc), as these weaken the latex, making it easier for the condom to break.

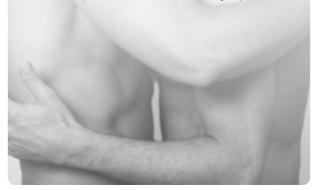
- Continue to use condoms, even in a stable relationship, until both members of the couple have taken laboratory tests to check for certain sexually transmitted infections.
- Avoid having sexual relations whilst under the
 effects of alcohol or drugs, as these substances
 decrease the sense of danger and may lead you to
 have sex without a condom or to share needles when
 taking drugs. This state of euphoria or inebriation is
 often the reason behind the failure to use a condom
 even when those concerned are aware of the
 importance of doing so.
- Never share syringes or needles to inject drugs, hormones or other substances.
- Use disposable or sterilized injection material to perforate the skin (tattoos, piercings).

Remember:

- The risk of becoming infected with gonorrhea or syphilis during unprotected oral sex cannot be ignored. Always use a condom or, depending on the sexual practice, a latex dental dam.
- If you exchange sex toys, cover them with a condom before each use, as they can transmit infections if not protected.
- The contraceptive pill, the diaphragm, local spermicides (sprays, gels, ovules), coitus interruptus (withdrawal of the penis from the vagina before ejaculation) and other contraceptive methods do not protect against HIV or against other sexually transmitted infections.
- Vaccination can prevent hepatitis A and B infection.
- The human papillomavirus vaccine is effective against only certain types of this virus. At present, this vaccine is recommended for girls before the age at which sexual relations begin.

Find out about these vaccines at your health centre.

 Anyone exposed to HIV and therefore at high risk of infection should contact hospital emergency services. There, after medical evaluation, they will be given preventive treatment (post-exposure treatment) over the 72 hours following exposure.



By finding out more about sexually transmitted infections and diseases, you can learn how to prevent them, and about the need to request for early tests in order to avoid complications and prevent them from spreading.

If you have any doubts, if you think you may be infected, or if your lifestyle places you at risk of infection, do not hesitate to talk to a professional health worker: your family doctor, or a dermatologist, gynaecologist or urologist.

You can also contact the sexual and reproductive health care units at your public health system health centre.

For more information, phone:





