

Sexually Transmitted Diseases

Symptoms, Treatments and Facts

By AVERT

Gonorrhoea

HIV/AIDS

Syphilis

Chlamydia

Hepatitis B

Hepatitis A

Genital Herpes

Genital Warts

Non-Specific Urethritis

Hepatitis C

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The information in this booklet was originally written from a UK perspective. We therefore recommend that you take this into account when reading sections such as 'Treatment', 'Testing' and 'Where to go for help'.

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This booklet was produced by the UK HIV/AIDS charity AVERT, and is part of a range of publications that are available to download for free from the 'Printable Resources' section of our website at www.avert.org From this website, you can also access a wide range of information about HIV/AIDS and treatment and related topics, including other areas of HIV/AIDS.

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Introduction

Sexually Transmitted Diseases (STDs) are transmitted through body contact during sex. They are caused by viruses, bacteria and parasites. They can also be known as Sexually Transmitted Infections (STIs). Some of the more common or well-known STDs include HIV, chlamydia and gonorrhoea. STDs are passed on by having sex with someone who is infected, and some are easier to transmit than others. Using a condom should protect you from becoming infected.

Many STDs have very few or no symptoms, so it is not easy to know if you are infected. If caught early enough, many STDs, such as gonorrhoea and chlamydia, can be easily treated. You can also be vaccinated against hepatitis A and B. Other STDs, such as HIV, cannot be vaccinated against or easily cured. There are however treatments available which can control the effects of HIV. If STDs are not treated, they can lead to serious health problems. You are also more likely to become infected with HIV if you are already infected with an STD. If anyone is concerned about having an STD, they should visit their local Sexual Health or GUM Clinic for advice, testing and treatment.

This booklet contains information about some of the more common STDs. At the end of the booklet you will find details of websites where you can find more information about STDs, as well sites where you can find details of Sexual Health or GUM Clinics.

Gonorrhoea

Gonorrhoea is a bacterial infection. It is sexually transmitted and can infect the cervix, urethra, rectum, anus and throat.

Signs and symptoms

Symptoms of infection may show up at anytime between 1 and 14 days after exposure. It is possible to be infected with gonorrhoea and have no symptoms. Men are far more likely to notice symptoms than women.

Women

Symptoms can include:

- a change in vaginal discharge. This may increase, change to a yellow or greenish colour and develop a strong smell
- a pain or burning sensation when passing urine
- irritation and/or discharge from the anus

Men

Symptoms may include:

- a yellow or white discharge from the penis
- irritation and/or discharge from the anus
- inflammation of the testicles and prostate gland

How gonorrhoea is passed on

- by penetrative sex (when the penis enters the vagina, mouth, or anus)

and less often by:

- rimming (where a person uses their mouth and tongue to stimulate another person's anus)
- inserting your fingers into an infected vagina, anus or mouth and then putting them into your own without washing your hands in between

Where to go for help

- Your local NHS sexual health (GUM) clinic

In the UK, You can find details of your nearest NHS sexual health clinic in the phone book under genito-urinary medicine (GUM), sexually transmitted diseases (STD) or venereal diseases (VD). Or phone your local hospital and ask for the 'special' or GUM clinic.

You will get free, confidential advice and treatment. You can go to any clinic anywhere in the country – you don't have to go to a local one – and you don't have to be referred by your GP. (Non-NHS sexual health clinics may not always offer the full range of services which are available at NHS sexual health clinics.)

- Your own GP.
- If you are in the UK, go to www.playingsafely.co.uk to find details of STI clinics.
- If you are in the USA, go to www.unspeakable.com/locator/index.jsp

The tests for gonorrhoea

- An examination of your genital area is carried out by a doctor or a nurse.
- Samples are taken, using a cotton-wool or spongy swab, from any places which may be infected – the cervix, urethra, anus or throat.
- Women are given an internal pelvic examination.
- A sample of urine may be taken.

None of these tests are painful, but may sometimes be uncomfortable.

If you have had anal sex, it is important to tell the doctor so that a swab can be taken from your rectum. Also tell the doctor if you have had oral sex.

You can have a test as soon as you think you might have been in contact with gonorrhoea.

Diagnosis and treatment

Samples taken during the examination are looked at under a microscope to check for infection. In some clinics, the result is available immediately. A second sample is sent to a laboratory for testing, the result of which is available usually within one week. Treatment is easy and essential. You will be given an antibiotic in tablet, liquid or injection form.

If you are allergic to any antibiotics, or if there is any possibility that you may be pregnant, it is important that you tell your doctor. It is important to complete your course of treatment.

If you are told you have gonorrhoea, you may be asked to see a health adviser who will explain the infection to you and answer your questions. The health adviser will also ask you about your sexual partner(s), so that they can get a check-up and treatment if necessary.

You should not have penetrative sex until you have returned to the clinic and been given the all-clear by the doctor. The doctor or health adviser will tell you about which sexual activities are safe.

Follow-up

Once you have completed your course of treatment you should return to the clinic or GP for a check-up.

Some types of gonorrhoea are resistant to certain antibiotics, especially if you acquired the disease abroad. Further tests will be done to make sure that the infection has cleared. If it has not, you will be prescribed a different antibiotic.

Complications

Women

If left untreated gonorrhoea can lead to pelvic inflammatory disease (PID). This is inflammation of the fallopian tubes which can cause fever, lower abdominal pain and backache. Sex may be uncomfortable. PID can cause a woman to become infertile or have an ectopic pregnancy. A separate factsheet on PID is available.

If you're pregnant and you have gonorrhoea when your baby is born, you could pass the infection on. Also your baby could be born with a gonococcal eye infection. This must be treated with antibiotics as it can cause blindness. But it is better for you to be treated before the birth.

Men

Gonorrhoea can cause inflammation of the testicles and the prostate gland, which causes pain. Without treatment a narrowing of the urethra or abscesses can develop.

Once gonorrhoea has been successfully treated, it will not come back unless you become reinfected.

Remember, after treatment, using condoms during sex can reduce your risk of getting or passing on sexually transmitted infections.

Chlamydia

Chlamydia is the most common treatable bacterial sexually transmitted infection. It can cause serious problems later in life if it is not treated (see 'Complications' section). Chlamydia infects the cervix in women. The urethra, rectum and eyes can be infected in both sexes. Occasionally chlamydia lives in other parts of the body, including the throat, lungs and liver.

Signs and symptoms

women

Symptoms of infection may show up at anytime. Often this is between 1 to 3 weeks after exposure. However, symptoms may not emerge until a long way down the line. The majority of women who are infected with chlamydia will have no symptoms at all. Possible symptoms are:

- a slight increase in vaginal discharge - caused by the cervix becoming inflamed
- a need to pass urine more often/pain on passing urine
- lower abdominal pain
- pain during sex
- a painful swelling and irritation in the eyes (if they are infected)

men

Symptoms of infection may show up at anytime. Often this is between 1 to 3 weeks after exposure. However, symptoms may not emerge until a long way down the line. Men are more likely to notice symptoms than women. However, they too may have no symptoms. Likely symptoms are:

- a discharge from the penis which may be white/cloudy and watery and stain underwear
- pain and/or a burning sensation when passing urine
- a painful swelling and irritation in the eyes (if they are infected) Chlamydia in the rectum rarely causes symptoms.

How chlamydia is passed on

Chlamydia can be transmitted by:

- having sex with someone who is infected
- a mother to her baby at birth
- occasionally, by transferring the infection on fingers from the genitals to the eyes

Where to go for help

- Your local NHS sexual health (GUM) clinic

You can find details of your nearest NHS sexual health clinic in the phone book under genito-urinary medicine (GUM), sexually transmitted diseases (STD) or venereal diseases (VD). Or phone your local hospital and ask for the 'special' or GUM clinic. If you look in our Links section, you will find websites that list where to find your nearest clinic.

You will get free, confidential advice and treatment. You can go to any clinic anywhere in the country - you don't have to go to a local one - and you don't have to be referred by your GP. (Non-NHS sexual health clinics may not always offer the full range of services which are available at NHS sexual health clinics.)

- Your own GP.
- If you are in the UK, go to www.playingsafely.co.uk to find details of STI clinics.
- If you are in the USA, go to www.unspeakable.com/locator/index.jsp

The tests for chlamydia

- An examination of your genital area is carried out by a doctor or a nurse.
- Samples are taken, using a cotton-wool or spongy swab, from any place which may be infected.
- Women are usually given an internal pelvic examination.
- Men are given an external examination of their testicles (balls) to check that these are healthy.
- A sample of urine is usually taken.

None of these tests should be painful, but may sometimes be uncomfortable.

Chlamydia will show up on the tests a few days after you have been in contact with it, often before you have any symptoms.

Diagnosis and treatment

Samples taken during the examination are sent to a laboratory for testing, and the result is available usually within one week.

The treatment for chlamydia is simple and effective once it has been diagnosed. You will be given antibiotic tablets.

If you are allergic to any antibiotics or if there is any possibility that you may be pregnant, it is important that you tell your doctor. This will affect which antibiotics you are prescribed.

It is important that you finish any course of treatment. If treatment is interrupted, it may be necessary to start again from the beginning.

If you have chlamydia a health adviser will explain the infection to you and answer your questions. The health adviser will also ask you about your sexual partner(s), so that they can get a check-up and treatment if necessary.

You should not have penetrative sex (when the penis enters the vagina, mouth or anus) until you have returned to the clinic and been given the all-clear by the doctor.

Follow-up

It is important to return for a check-up once you have completed the treatment to make sure you are well and have no other infection.

Complications

Women

- If untreated, chlamydia can lead to pelvic inflammatory disease (PID). This is an inflammation of the fallopian tubes (the tubes along which an egg passes to get to the womb). PID can lead to problems with fertility. Many cases of infertility can be traced back to infection with chlamydia.
- Appendicitis (inflammation of the appendix) can also be caused by chlamydia.
- If a woman has chlamydia when she is pregnant she risks having an ectopic pregnancy (pregnancy outside the womb) or a premature birth. The infection can be passed on to the baby, giving it an eye or lung infection. Chlamydia can be safely treated during pregnancy.
- Chlamydia can also lead to chronic (long-term) pelvic pain.

Men

Complications caused by chlamydia in men are uncommon. But it may lead to painful inflammation of the testicles, which can cause infertility.

Men and women

- Reiter's syndrome is a result of chlamydia. It causes inflammation of the eyes and joints and sometimes a rash on the soles of the feet and genitals.
- Appendicitis (inflammation of the appendix) can also be caused by chlamydia.

Remember, after treatment, using condoms during sex can reduce your risk of getting or passing on sexually transmitted infections.

Syphilis

Syphilis is not a common infection in the UK but it is more common in some other countries. It is a bacterial infection. It is usually sexually transmitted, but may also be passed from an infected mother to her unborn child.

Signs and symptoms

The signs and symptoms are the same in both men and women. They can be difficult to recognise and may take up to 3 months to show after having sexual contact with an infected person. Syphilis has several stages. The primary and secondary stages are very infectious.

Primary stage

One or more painless sores appear at the place where the bacteria entered the body. On average, this will be after 21 days. You may not notice them.

These sores can appear anywhere on the body but mainly:

- on the vulva (lips of the vagina), the clitoris and around the opening of the urethra (the water passage)
- on the cervix (neck of the womb) in women and on the penis and foreskin in men
- around the anus and mouth (both sexes)

The sore (or sores) is very infectious and may take from 2 to 6 weeks to heal.

Secondary stage

If the infection remains untreated the secondary stage usually occurs 3 to 6 weeks after the appearance of sores. The symptoms include:

- a non-itchy rash covering the whole body or appearing in patches
- flat, warty-looking growths on the vulva in women and around the anus in both sexes
- a flu-like illness, a feeling of tiredness and loss of appetite, accompanied by swollen glands (this can last for weeks or months)
- white patches on the tongue or roof of the mouth
- patchy hair loss

When these symptoms are present syphilis is very infectious and may be sexually transmitted to a partner. Treatment at any time during these first two stages of syphilis will cure the infection.

Latent stage

Latent syphilis refers to the presence of untreated syphilis. You can have no symptoms or signs of the infection, which is diagnosed by a positive blood test. If left untreated, you may develop symptomatic late syphilis. This would usually develop after more than 10 years. It is then that syphilis can affect the heart, and possibly the nervous system.

If treatment is given during the latent stage the infection can be cured. However, if there has been heart or nervous-system damage before treatment is started this may be irreversible.

How syphilis is passed on

Syphilis can be transmitted by:

- having sex with someone who has the infection
- a mother to her unborn baby

Where to go for help

- Your local NHS sexual health (GUM) clinic.

You can find details of your nearest NHS sexual health clinic in the phone book under genito-urinary medicine (GUM), sexually transmitted diseases (STD) or venereal diseases (VD). Or phone your local hospital and ask for the 'special' or GUM clinic. If you look in our Links section, you will find websites that list where to find your nearest clinic.

You will get free, confidential advice and treatment. You can go to any clinic anywhere in the country – you don't have to go to a local one – and you don't have to be referred by your GP. (Non-NHS sexual health clinics may not always offer the full range of services which are available at NHS sexual health clinics.)

- Your own GP.
- If you are in the UK, go to www.playingsafely.co.uk to find details of STI clinics.
- If you are in the USA, go to www.unspeakable.com/locator/index.jsp

The tests for syphilis

At the clinic the following tests will normally be made:

- A blood sample is taken.
- If you have a sore, a specimen of fluid is taken from this and looked at under a microscope.
- Your genital area and whole body are examined by the doctor.
- Samples are taken, using a cotton-wool or spongy swab, from any sores.
- Women are given an internal examination.
- A sample of urine is taken.

None of these tests should be painful, but they may be slightly uncomfortable.

You can have the test as soon as you think you might have been in contact with syphilis.

Diagnosis and treatment

Samples taken during the examination are looked at under a microscope to check for infection. Samples are sent to a laboratory for testing. The result is usually available within one week.

If you are told that you have syphilis a health adviser will explain the infection to you and answer any questions you may have. You will also be asked about your sexual partner(s), so that, if necessary, they can get treatment too.

If it is suspected that you have the early infectious stages of syphilis, you should not have oral, vaginal or anal sex. You should also not have any kind of sex involving contact between your partner and any sores or rashes you may have until the treatment is completed. Treatment for syphilis is usually a 2-week course of penicillin injections or, in some cases, antibiotic tablets or capsules.

If you are allergic to any antibiotics, or if there is any possibility that you may be pregnant, it is important that you tell your doctor. It is important that you finish any course of treatment. If treatment is interrupted, it may be necessary to start again from the beginning.

Once you have completed your treatment, you will be asked to attend the clinic at regular intervals for blood tests.

Pregnancy and syphilis

In the UK blood tests for syphilis are given to all pregnant women when they visit an ante-natal clinic. If syphilis is found, treatment can safely be given during pregnancy with no risk to the unborn baby. If a woman has untreated syphilis she may pass the infection to her baby in the womb. In some cases this can lead to miscarriage or stillbirth.

Once syphilis has been successfully treated, it will not come back unless you become reinfected. However your blood test will be positive in any future tests (e.g. for immigration reasons). Make sure you get a certificate from your clinic explaining about your treatment.

Remember, after treatment, using condoms during sex can reduce your risk of getting or passing on sexually transmitted infections.

Hepatitis A

Hepatitis is inflammation of the liver. This can be caused by alcohol and some drugs, but usually it is the result of a viral infection. There are many types of virus which can cause hepatitis. Each of these viruses acts differently.

How it's spread

The hepatitis A virus (HAV) is a common infection in many parts of the world. It is possible to become infected through eating or drinking contaminated food or water.

The virus is found in faeces. It can be passed on if even a tiny amount of faeces from a person with hepatitis A comes into contact with another person's mouth.

This means the virus can also be passed on sexually through practices such as rimming. Personal hygiene, with careful hand washing, can minimise the risk of the virus being passed on.

Signs and symptoms

People may have no symptoms at all, but they can still pass on the virus to others. Symptoms may include:

- a short, mild, flu-like illness
- nausea and vomiting
- diarrhoea
- loss of appetite
- weight loss
- jaundice (yellow skin and whites of eyes, darker yellow urine and pale faeces)
- itchy skin.

Some people may need to be admitted to hospital.

Where to go for help

- Your local NHS sexual health (GUM) clinic.

You can find details of your nearest NHS sexual health clinic in the phone book under genito-urinary medicine (GUM), sexually transmitted diseases (STD) or venereal diseases (VD). Or phone your local hospital and ask for the 'special' or GUM clinic. If you look in our Links section, you will find websites that list where to find your nearest clinic.

You will get free, confidential advice and treatment. You can go to any NHS clinic anywhere in the country – you don't have to go to a local one – and you don't have to be referred by your GP. (Non-NHS sexual health clinics may not always offer the full range of services which are available at NHS sexual health clinics.)

- A hospital Accident and Emergency department.
- If you are in the UK, go to www.playingsafely.co.uk to find details of STI clinics.
- If you are in the USA, go to www.unspeakable.com/locator/index.jsp
- Your own GP.

The tests for hepatitis A

- Your GP or doctor at an NHS sexual health (GUM) clinic can diagnose hepatitis A by carrying out blood tests. You will be asked questions to try to discover the source of the infection.

What does a positive test result mean?

It could show:

Past infection. This means that you have been in contact with the hepatitis A virus and your body has cleared it. You now have a natural protection against future infection with the hepatitis A virus.

Current infection. By the time most people have developed symptoms of hepatitis A they will be less infectious to others, but in the weeks before this there will have been a risk of passing on the infection. Your doctor will ask you questions to find out if others have been at risk of hepatitis A. Those who have been in contact with the virus and have become infected may be given an injection to reduce the severity of the symptoms.

Most of the symptoms of hepatitis A settle after a few weeks, although some people can feel tired for a number of months after infection. There is little likelihood of chronic liver damage and no chronic carrier state (where a person remains chronically infected).

What does a negative test result mean?

This result means that you have never been in contact with hepatitis A and have no natural protection against it. If you are thought to be at risk of hepatitis A infection, the doctor may advise you to be immunised.

Diagnosis and treatment

Infection with hepatitis A is usually mild, but occasionally causes severe inflammation of the liver, requiring admission to hospital.

Immunisation

For hepatitis A you are given a single injection in the arm which gives you protection for a year. A second booster injection at 6 to 12 months gives you protection for up to 10 years. Most hepatitis A immunisations are given to people who are travelling to parts of the world with a high incidence of hepatitis A.

These injections are available from your GP.

You can also get immunised to prevent hepatitis A developing, if you have recently come into contact with it. Immunisation is also recommended for those whose sexual practices are likely to put them at risk.

Follow-up

If you are infected with hepatitis A, you should limit the amount of alcohol you drink. The doctor may also offer you dietary advice.

Your doctor will advise you about any precautions necessary to ensure that you avoid infecting others with the virus.

Hepatitis B

Hepatitis is inflammation of the liver. This can be caused by alcohol and some drugs, but usually it is the result of a viral infection. There are many types of virus which can cause hepatitis. Each of these viruses acts differently.

How it's spread

The hepatitis B virus (HBV) is very common worldwide. It is very infectious.

The virus can be spread in the following ways:

- by unprotected (without a condom) penetrative sex (when the penis enters the anus, vagina or mouth) with someone who is infected. Also by sex which draws blood with someone who is infected
- by sharing contaminated needles or other drug-injecting equipment
- by using non-sterilised equipment for tattooing, acupuncture or body piercing
- from an infected mother to her baby, mainly during delivery. Immunisation of the baby at birth prevents the transmission of hepatitis B
- through a blood transfusion in a country where blood is not tested for the hepatitis B virus. All blood for transfusion in the UK is tested.

Signs and symptoms

People may have no symptoms at all, but they can still pass on the virus to others. Symptoms may include:

- a short, mild, flu-like illness
- nausea and vomiting
- diarrhoea
- loss of appetite
- weight loss
- jaundice (yellow skin and whites of eyes, darker yellow urine and pale faeces)
- itchy skin.

Some people may need to be admitted to hospital.

Most adults infected with the hepatitis B virus fully recover and develop life-long immunity. Between 2% and 10% of individuals infected as adults will become chronic carriers, which means they will be infectious to others and can develop chronic liver damage. Infected children, especially new-born babies, are much more likely to become chronic carriers.

If a person continues to be infected over a number of years with the hepatitis B virus, they could develop the following complications:

- chronic hepatitis
- liver cirrhosis
- liver cancer

Where to go for help

- Your local NHS sexual health (GUM) clinic.

You can find details of your nearest NHS sexual health clinic in the phone book under genito-urinary medicine (GUM), sexually transmitted diseases (STD) or venereal diseases (VD). Or phone your local hospital and ask for the 'special' or GUM clinic. If you look in our Links section, you will find websites that list where to find your nearest clinic.

You will get free, confidential advice and treatment. You can go to any NHS clinic anywhere in the country – you don't have to go to a local one – and you don't have to be referred by your GP. (Non-NHS sexual health clinics may not always offer the full range of services which are available at NHS sexual health clinics.)

If appropriate, these services may refer you to a hepatologist or specialist gastroenterologist.

- A hospital Accident and Emergency department
- Your own GP
- If you are in the UK, go to www.playingsafely.co.uk to find details of STI clinics.
- If you are in the USA, go to www.unspeakable.com/locator/index.jsp

The tests for hepatitis B

Your GP or doctor at an NHS sexual health (GUM) clinic can diagnose hepatitis B by carrying out blood tests. You will be asked questions to try to discover the source of the infection.

What does a positive test result mean?

It could show:

Past infection. This means that you have been in contact with HBV and your body has rejected it. You now have a natural protection against the virus.

Carrier. This means that you carry HBV and can pass it on to others. You are at risk of chronic liver disease and may be referred to a specialist centre for further assessment.

A positive result can be confirmed by further tests and referral to a specialist. To find out how much hepatitis B may be affecting the liver, and what may be the best treatment for this, a small sample of liver tissue may need to be taken (a liver biopsy).

What does a negative test result mean?

This result means you have never been in contact with HBV and have no natural protection against it.

If there is a chance you have been recently exposed to the virus, your doctor may advise you to have a repeat test and be immunised against hepatitis B.

Diagnosis and treatment

Many people do not require treatment, as the inflammation of the liver may not be severe. If you need treatment for liver inflammation, you will be referred to a specialist centre for a full assessment.

Immunisation

Three injections are given over a period of 3-6 months. A blood test is taken once the course of injections is completed to check that they have worked. Immunity should last for at least 5 years.

The injections are available at your local NHS sexual health (GUM) clinic, or from your GP.

Follow-up

If you are diagnosed as having an active infection with hepatitis B, you will be advised to have regular blood tests and physical check-ups. All carriers should expect to be referred to specialist services.

If you are infected with hepatitis B, you should limit the amount of alcohol you drink. The doctor may also advise you to avoid fatty foods and follow a low-salt diet.

If you have hepatitis B, you should use a condom for penetrative sex to prevent passing on the virus.

Your partner should also be immunised against hepatitis B (if not already infected).

Your doctor will advise you about any precautions necessary to ensure that you avoid infecting others with the virus, such as not sharing toothbrushes or shaving equipment.

Remember, using condoms can reduce your risk of getting or passing on sexually transmitted infections.

Hepatitis C

Hepatitis is inflammation of the liver. This can be caused by alcohol and some drugs, but usually it is the result of a viral infection. There are many types of virus which can cause hepatitis. Each of these viruses acts differently.

How it's spread

The hepatitis C virus (HCV) can be spread in the following ways:

- by sharing contaminated needles or other drug-injecting equipment. If you have ever shared drug-injecting equipment, you may want to be tested for hepatitis C
- by using non-sterilised equipment for tattooing, acupuncture or body piercing
- by unprotected (without a condom) penetrative sex (when the penis enters the anus or vagina) with someone who is infected. Also by sex which draws blood with someone who is infected. This is not a common way of becoming infected with hepatitis C
- on rare occasions, from an infected mother to her baby, mainly during delivery. The risk may be greater if the mother is also infected with HIV
- through a blood transfusion in a country where blood is not tested for the hepatitis C virus. All blood for transfusion in the UK is tested.

Signs and symptoms

People may have no symptoms at all, but they can still pass on the virus to others. Symptoms, though not common, may include:

- a short, mild, flu-like illness
- nausea and vomiting
- diarrhoea
- loss of appetite
- weight loss
- jaundice (yellow skin and whites of eyes, darker yellow urine and pale faeces)
- itchy skin.

Some people may need to be admitted to hospital.

Current evidence suggests that only about 20% of individuals who have been infected with the hepatitis C virus appear to clear the virus from the blood, whilst about 80% will remain infected and can pass on the virus to others. If a person continues to be infected over a number of years with the hepatitis C virus, they could develop the following complications:

- chronic hepatitis
- liver cirrhosis
- liver cancer.

Where to go for help

- Your local NHS sexual health (GUM) clinic

You can find details of your nearest NHS sexual health clinic in the phone book under genito-urinary medicine (GUM), sexually transmitted diseases (STD) or venereal diseases (VD). Or phone your local hospital and ask for the 'special' or GUM clinic. If you look in our Links section, you will find websites that list where to find your nearest clinic.

You will get free, confidential advice and treatment. You can go to any NHS clinic anywhere in the country – you don't have to go to a local one – and you don't have to be referred by your GP. (Non-NHS sexual health clinics do not always offer the full range of services which are available at NHS sexual health clinics.)

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The tests for hepatitis C

Tests for the hepatitis C virus (HCV) have only been available since 1989.

Your GP or doctor at your local NHS sexual health (GUM) clinic can diagnose hepatitis C by carrying out blood tests. You will be asked questions to try to discover the source of the infection.

What does a positive test result mean?

It means that you may be a carrier of the hepatitis C virus and can pass it on to others.

The first test given will be a test for antibodies to the hepatitis C virus (anti-HCV). If this test is positive, it means that you have been exposed to the hepatitis C virus and that your body has responded by producing antibodies. This test does not indicate whether or not you are infected. You will normally be referred on to a specialist for a further test to try to find out if this is the case.

The specialist will carry out another blood test to look for the hepatitis C virus (HCV-RNA). Although some people do clear hepatitis C, most people remain chronically infected and are therefore infectious to others. To find out how much hepatitis C may be affecting the liver, the specialist will also perform liver function tests (LFT) and may also take a small sample of liver tissue (a liver biopsy). The results of the LFT and/or liver biopsy help the specialist decide whether you would benefit from treatment or not.

Clearing the virus does not mean you are immune to reinfection.

What does a negative test result mean?

This result probably means that you have never been in contact with the hepatitis C virus.

However, as the tests rely on the detection of antibodies to HCV, and the antibodies can take some months to develop, your doctor may advise you to have a repeat test if there is a chance you have been recently exposed to the virus.

At present there is no vaccine available to protect against hepatitis C.

Follow-up

If you are diagnosed as having an active infection with hepatitis C, you will be advised to have regular blood tests and physical check-ups. All carriers should expect to be referred to specialist services.

If you are infected with hepatitis C, you should limit the amount of alcohol you drink. The doctor may also advise you to avoid fatty foods and follow a low-salt diet.

Transmission of the hepatitis C virus by penetrative sex does occur, although it is not common. If you are infected it is advisable to use a condom for penetrative sex to ensure that you do not pass on the virus to your partner(s).

Your doctor will advise you about any precautions necessary to ensure that you avoid infecting others with the virus, such as not sharing toothbrushes or shaving equipment.

Remember, using a condom can reduce your risk of getting or passing on sexually transmitted infections.

Genital Herpes

Genital herpes is caused by the herpes simplex virus. The virus can affect the mouth, the genital area, the skin around the anus and the fingers. Once the first outbreak of herpes is over, the virus hides away in the nerve fibres, where it remains totally undetected and causes no symptoms.

However, in some people, it may come back (recur) on the skin surface, at or near the place where it was caught. This may be when the person is ill or run down. Some people never get another outbreak.

Types of the virus

There are two types of the herpes virus. Either type is infectious, but:

- Type I infects the mouth or nose. It is more likely to recur than if Type II infects this area.
- Type II infects the genital and anal area, it is more likely to recur than if Type I infects this area.

Genital and anal infections used to always be caused by Type II, but Type I is becoming more common in these areas, because more people are having oral sex.

Signs and symptoms

Both men and women may have one or more symptoms, including:

- an itching or tingling sensation in the genital or anal area
- small fluid-filled blisters. These burst and leave small sores which can be very painful. In time they dry out, scab over and heal. With the first infection they can take between 2 and 4 weeks to heal properly
- pain when passing urine, if it passes over any of the open sores
- a flu-like illness, backache, headache, swollen glands or fever

At this time the virus is highly infectious.

Recurrent infections are usually milder. The sores are fewer, smaller, less painful and heal more quickly, and there are no flu-like symptoms.

How herpes is passed on

Herpes is passed on through skin contact with an infected person. The virus affects the areas where it enters the body. This can be by:

- kissing (mouth to mouth)
- penetrative sex (when the penis enters the vagina, mouth or anus)
- oral sex (from the mouth to the genitals).

At this time the virus is highly infectious.

Where to go for help

- Your local sexual health (GUM) clinic

You can find details of your nearest NHS sexual health clinic in the phone book under genito-urinary medicine (GUM), sexually transmitted diseases (STD) or venereal diseases (VD). Or phone your local hospital and ask for the 'special' or GUM clinic. If you look in our Links section, you will find websites that list where to find your nearest clinic.

You will get free, confidential advice and treatment. You can go to any clinic anywhere in the country – you don't have to go to a local one – and you don't have to be referred by your GP. (Non-NHS sexual health clinics may not always offer the full range of services which are available at NHS sexual health clinics.)

- Your own GP.
- The Herpes Viruses Association – for information and support for people who have herpes – tel. 020 7609 9061.
- The American National Herpes Hotline, tel: (919) 361-8488.
- If you are in the UK, go to www.playingsafely.co.uk to find details of STI clinics.
- If you are in the USA, go to www.unspeakable.com/locator/index.jsp

The tests for genital herpes

- A clinical examination of your genital area is carried out by a doctor or a nurse.
- A sample is taken, using a cotton-wool or spongy swab, from any visible sores.
- Women may be given an internal pelvic examination.
- A sample of urine is taken.

As with any suspected sexually transmitted infection, it is possible to have more than one infection at the same time, so it is advisable to have a full check-up.

You can have a test as soon as you have signs or symptoms for the doctor or nurse to look at. Laboratory tests will confirm their opinion.

NHS sexual health (GUM) clinics routinely test for a number of sexually transmitted infections.

Diagnosis and treatment

Samples taken during your examination are sent to a laboratory for testing, and the result is available usually within 2 weeks.

Treatment is not essential, as genital herpes will clear up by itself. Tablets are available which reduce the severity of genital herpes infection. These are only effective when taken within 72 hours of the start of the symptoms. Recurrent infections often do not require treatment.

If you have been told you have herpes you may be asked to see a health adviser who will explain about the infection and answer your questions. The health adviser will also ask you about your sexual partner(s).

Help during an outbreak

When you are suffering from herpes, there are several things you can do to help you feel better.

- Take pain-killers (aspirin/paracetamol) if you have any pain.
- Gently bathing the sore areas with a salt solution (half a teaspoon of salt to half a pint of warm water) twice a day may help: it is soothing and helps the sores to dry out.
- Wear loose clothing so that the air can get to the sore areas.
- Place an ice-pack wrapped in a clean cloth or towel on the affected area.
- If passing urine is painful, try urinating in a bath of water. Or try pouring water over your self as you pass water.
- Drink plenty of fluids, such as mineral water and soft drinks, to help neutralise the urine. It is important not to hold back from passing urine as this can cause further problems.
- Avoid sunbathing and using sunbeds.
- Get plenty of rest.

Taking care of yourself and your partner

During an episode of herpes, the blisters and sores are highly infectious and the virus can be passed on to others by direct contact. To prevent this from happening you should avoid:

- kissing when you or your partner have cold sores around the mouth
- having oral sex when you or your partner have mouth or genital sores
- having any genital or anal contact, even with a condom or dental dam, when you or your partner have genital sores
- using saliva to wet contact lenses if you have sores around your mouth

Remember – wash your hands with soap before and after touching the sores.

Between outbreaks of herpes rashes, the chance of passing on the infection is much reduced, although it may occasionally occur. However herpes does not mean the end of your sex life. Ask the advice of the clinic health adviser.

Remember, a condom will only protect against herpes infection if it covers all the blisters. Herpes can also be transmitted by non-penetrative sex.

Complications

Cervical cancer and genital herpes

There is no link between genital herpes and cancer of the cervix. However, it is still advisable for every woman to have regular smear tests.

Pregnancy and genital herpes

Having herpes does not affect a woman's ability to become pregnant.

If herpes first occurs in the first 3 months of your pregnancy there is a small risk of a miscarriage. Catching herpes towards the end of pregnancy may cause the baby to be born early. However, most women who have several episodes of genital herpes during pregnancy have a normal delivery.

Genital Warts

Genital warts are small fleshy growths which may appear anywhere on a man or woman's genital area. They are caused by a virus called human papilloma virus (HPV).

There are more than 60 different types of HPV. Some types cause warts to grow on the genitals, others cause warts to grow on different parts of the body, such as the hands.

Signs and symptoms

After you have been infected with the wart virus it usually takes between 1 and 3 months for warts to appear on your genitals.

You or your partner may notice pinkish/white small lumps or larger cauliflower-shaped lumps on the genital area. Warts can appear around the vulva, the penis, the scrotum or the anus. They may occur singly or in groups. They may itch, but are usually painless. Often there are no other symptoms, and the warts may be difficult to see. In women warts can develop inside the vagina and on the cervix. If a woman has warts on her cervix, this may cause slight bleeding or, very rarely, an unusual coloured vaginal discharge.

Not everyone who comes into contact with the virus will develop warts.

How genital warts are passed on

Warts are spread through skin-to-skin contact. If you have sex or genital contact with someone who has genital warts you may develop them too.

They can be passed on during vaginal or anal sex.

(It is possible for warts to spread to the area around the anus without having anal sex.)

Where to go for help

- Your local NHS sexual health (GUM) clinic

You can find details of your nearest NHS sexual health clinic in the phone book under genito-urinary medicine (GUM), sexually transmitted diseases (STD) or venereal diseases (VD). Or phone your local hospital and ask for the 'special' or GUM clinic. If you look in our Links section, you will find websites that list where to find your nearest clinic.

You will get free, confidential advice and treatment. You can go to any clinic anywhere in the country – you don't have to go to a local one – and you don't have to be referred by your GP. (Non-NHS sexual health clinics may not always offer the full range of services which are available at NHS sexual health clinics.)

- Your own GP.
- If you are in the UK, go to www.playingsafely.co.uk to find details of STI clinics.
- If you are in the USA, go to www.unspeakable.com/locator/index.jsp

The tests for genital warts

A doctor or nurse can usually tell whether you have genital warts just by looking. If warts are suspected but not obvious, the doctor may apply a weak vinegar-like solution to the outside of the genital area. This turns any warts white.

To check for any hidden warts, the doctor may carry out an internal examination of the vagina or anus.

You can be checked as soon as you think you may have been in contact with the virus. Some people diagnosed with the virus won't develop visible warts straight away, and you may be asked to come back for another examination.

Diagnosis and treatment

As genital warts are caused by a virus and not a bacteria, antibiotics will not get rid of them.

A common treatment is a brown liquid (podophyllin) which is painted on to the wart(s) and must be washed off 4 hours later (or sooner, if the area is irritated). The clinic may prescribe podophylotoxin for use at home. Another common treatment is freezing the warts or laser treatment. Often more than one kind of treatment is necessary before the warts are gone.

These treatments may be uncomfortable, but they should not be painful. If your treatment hurts, tell the doctor.

You should get individual advice about having sex during treatment from your doctor, nurse or health adviser.

Never try to treat genital warts by yourself. Always seek medical advice.

If you're pregnant, or trying to become pregnant, it is important that you tell your doctor, as podophyllin treatment could harm the developing baby and another treatment will be used.

Taking care of yourself and your partner

If you have genital warts:

- Keep your genitals clean and dry
- Don't use scented soaps and bath oils or vaginal deodorants, as these may irritate the warts
- Use condoms when having sex. Remember, condoms will only protect against the wart virus if they cover the affected areas
- Make sure that your partner has a check-up too, as they may have warts which they haven't noticed.

Follow-up

It is important to return regularly for treatment until your warts have gone so that the doctor or nurse can check progress and make any necessary changes in your treatment. Sometimes treatment can take a long time.

The majority of people whose warts initially disappear will get a recurrence.

Warts and the cervix

Some types of the wart virus may be linked to changes in cervical cells which can lead to cancer. Although there is no direct link between genital warts and cancer of the cervix, it is important that all women over 20 years of age have a regular cervical smear test.

If a problem is suspected a colposcopy is done to look at cells on the cervix. A colposcope is a kind of small telescope with a light which is used to view the cervix. The scope magnifies the cells so the doctor can detect any changes. The doctor may take a small sample of cells (called a biopsy), which will be looked at in a laboratory.

The colposcopy may feel uncomfortable. If you have a biopsy taken you may have a dull ache like a mild period pain, with slight bleeding.

If you have genital warts on your cervix or vagina, they'll usually be removed by freezing or by laser treatment under local anaesthetic.

Remember, after treatment, using condoms can reduce your risk of getting or passing on sexually transmitted infections.

NSU (Non-Specific Urethritis)

Non-specific urethritis (NSU) is an inflammation of a man's urethra. This inflammation can be caused by several different types of infection, the most common being chlamydia.

Signs and symptoms

NSU may be experienced months or even in some cases years into a relationship. The symptoms of NSU may include:

- pain or a burning sensation when passing urine
- a white/cloudy fluid from the tip of the penis. This may be more noticeable first thing in the morning
- feeling that you need to pass urine frequently

Often there may be no symptoms, but this does not mean that you cannot pass the infection on to your partner(s).

How NSU develops

NSU is almost always caused through sexual infection. Very rarely it can result from an allergic reaction, such as to bubble baths or washing powders or other chemicals.

Where to go for help

- Your local NHS sexual health (GUM) clinic

You can find details of your nearest NHS sexual health clinic in the phone book under genito-urinary medicine (GUM), sexually transmitted diseases (STD) or venereal diseases (VD). Or phone your local hospital and ask for the 'special' or GUM clinic. If you look in our Links section, you will find websites that list where to find your nearest clinic.

You will get free, confidential advice and treatment. You can go to any clinic anywhere in the country – you don't have to go to a local one – and you don't have to be referred by your GP. (Non-NHS sexual health clinics may not always offer the full range of services which are available at NHS sexual health clinics.)

- Your own GP.

Don't pass urine for at least 2 hours before attending the clinic or doctor's surgery.

The tests for NSU

- A physical examination of your genital area by a doctor or nurse.
- Samples are taken, using a cotton-wool or spongy swab, from the penis or urethra.
- A sample of urine is taken.

None of these tests should be painful, but they may be uncomfortable.

Diagnosis and treatment

Samples taken during the examination are looked at under a microscope to check for infection. In some clinics, the result is available immediately. A second sample is sent to a laboratory for confirmation of the infection. The result is usually available within one week.

Treatment is easy. You will be given antibiotic tablets. If you are allergic to any antibiotics, it is important that you tell your doctor.

It is important that you finish any course of treatment. If treatment is interrupted, it may be necessary to start again from the beginning.

Your partner should also attend the clinic for a check-up.

Follow-up

It is important to return for a check-up after you have completed the treatment to ensure that the infection has gone.

You should not have penetrative sex (when the penis enters the vagina, mouth or anus), not even with a condom, until you have returned to the clinic and been given the all-clear by the doctor.

Complications

- NSU may recur. A recurrence may be triggered by excessive friction during sex or masturbation, or by excessive alcohol consumption. Serious complications are rare. If they do occur you may experience:
- inflammation of the testicles
- reduced fertility
- Reiter's syndrome – which causes inflammation of the eyes, joints and urethra, and sometimes sores on the penis or soles of the feet

Remember, after treatment, using condoms during sex can reduce your risk of getting or passing on sexually transmitted infections.

HIV is a virus that can damage the body's defence system so that it cannot fight off certain infections. If someone with HIV goes on to get certain serious illnesses, this condition is called AIDS. HIV stands for Human Immunodeficiency Virus. AIDS stands for Acquired Immune Deficiency Syndrome.

Signs and Symptoms

There are no 'set' symptoms for HIV infection or AIDS. Most people who become infected with HIV do not notice they have been infected, although some may suffer from a flu-like illness shortly after infection.

People who have HIV may feel and look completely well but their immune systems may nevertheless be damaged. It is important to note that once someone is infected they can pass HIV on, even if they feel well. The more time passes, the more likely damage is to have occurred to the immune system. Once the immune system is compromised, the person may be susceptible to 'opportunistic infections', these are infections that are around us all the time and can normally be fought off by a healthy immune system. Also, some tumours or cancers can occur as a result of a damaged immune system and can cause damage to the brain and nervous system. These 'symptoms' are, however, not caused by HIV but by the opportunistic infections.

How HIV is passed on

There are three main ways in which HIV can be passed on by:

- having vaginal or anal sex without a condom with someone who has HIV. Unprotected oral sex also carries some risk;
- a mother with HIV to her baby during pregnancy, at birth or through breastfeeding; and
- sharing needles, syringes or other drug-injecting equipment that is contaminated with HIV infected blood.

You cannot get HIV through:

- kissing, touching, hugging or shaking hands;
- sharing crockery and cutlery;
- coughing or sneezing;
- contact with toilet seats;
- insect or animal bites;
- swimming pools; or
- eating food prepared by someone with HIV.

Where to go for help

- Your local NHS sexual health (GUM) clinic

In the UK, you can find details of your nearest NHS sexual health clinic in the phone book under genito-urinary medicine (GUM), sexually transmitted diseases (STD) or venereal diseases (VD). Or phone your local hospital and ask for the 'special' or GUM clinic.

You will get free, confidential advice and testing. You can go to any clinic anywhere in the country - you don't have to go to a local one - and you don't have to be referred by your GP. (Non-NHS sexual health clinics may not always offer the full range of services which are available at NHS sexual health clinics.)

- You can get the test from your GP. However, the result will probably be entered in your medical records.
- If you are in the UK, go to www.playingsafely.co.uk to find details of clinics.
- If you are in the USA, go to www.unspeakable.com/locator/index.jsp

Testing for HIV

The HIV test looks for HIV antibodies in a person's blood. If a person has/ develops antibodies to HIV in their blood, it means they have been infected with HIV. For most people it takes 3 months for these antibodies to develop. In rare cases, it can take up to 6 months. It would be extremely uncommon to take longer than 6 months for antibodies to develop.

Getting tested earlier than 3 months may result in an unclear test result, as an infected person may not yet have developed antibodies to HIV. It is therefore important to wait at least 3 months before testing. It is also important that you are not at further risk of getting infected with HIV during this time period. The test is only accurate if there are no other exposures between the time of possible exposure to HIV and testing. The only way to know for sure whether you are infected with HIV is to have an HIV antibody test. It is not possible to tell from any symptoms.

Treatment

At the moment, there is no cure for HIV or AIDS. But there are cures and treatments for many of the illnesses that people with HIV are prone to. There are also combination treatments that most people with HIV benefit from, and many people have definite and major health improvements. The drugs reduce the level of HIV in the blood and delay the development of AIDS. Research shows that most people who are on these treatments live longer and feel better. However, the drugs can have unpleasant side effects and many different drugs have to be taken every day, and some people cannot cope with this. The long-term effects of being on combination therapy are not yet known.

This information is only a brief HIV/AIDS overview. AVERT has a large website at www.avert.org, where you can find much more information on all aspects of HIV/AIDS, including other downloadable resources.

AVERT Resources

Avert produces many more downloadable resources, in the form of booklets, books, quizzes and posters. Our booklets include titles such as 'Sex and Sexual Relationships', 'Young Gay Men Talking', 'HIV and AIDS: Information for Young People' and 'HIV and AIDS Treatment'. All resources can be downloaded for free from www.avert.org/resource.htm. If you encounter any problems downloading our resources, please contact AVERT.

Contact Details

AVERT

4 Brighton Road, Horsham, West Sussex, RH13 5BA, England

Tel. 01403 210202

Website: www.avert.org

Email: info@avert.org

Other Sources of Information

www.playingsafely.co.uk	Information on STDs and where to go for help in the UK
www.shastd.org.uk/clinics/clinics.htm	Where to find Sexual Health Clinics in the UK and USA
www.shastd.org.uk/sti/infectio1.htm	Information about and images of STDs. Please be warned that some of these images are of a sexually explicit nature.
www.goaskalice.columbia.edu	Question and answer website covering sexual health and other issues.
www.thebody.com/safesex/stdbasics.html	STD basics