

## SEXUALLY TRANSMITTED INFECTIONS

**Sexually transmitted diseases (STDs), also known as sexually transmitted infections (STIs)** are a heterogeneous group of infections that have 1 factor in common: they can be transmitted through any type of sexual contact with an infected individual. We will describe the most common types that are seen in a gynecologist office. Some STDs such as HIV (AIDS), syphilis, Hepatitis B and C, are likely to present to other health care providers, as their most common complaints are often non gynecological, and won't be discussed here.

Data from the 2003-2004 National Health and Nutrition Examination Survey in the USA shows that 24 percent of female adolescents aged 14 to 19 years had laboratory evidence of at least one of the following STDs:

- *Human papillomavirus* (HPV, 18 percent),
- *Chlamydia trachomatis* (4 percent),
- *Trichomonas vaginalis* (3 percent),
- *Herpes simplex virus type 2* (HSV-2, 2 percent)
- *Neisseria gonorrhoea* (1 percent).

Repeated infections with STDs are common: As many as 40 percent of the annual incidence of chlamydial or gonococcal disease occurs in adolescents previously infected. Repeated acquisition of STDs is a risk factor for subsequent development of human immunodeficiency virus (HIV) infection.

Some risk factors for acquiring an STD include:

- Age less than 25 years
- Multiple partners.
- New partners.
- Partners with multiple other partners.
- Inconsistent use of condoms (not every time)
- Alcohol and other drug consumption

The most common symptoms and presentation at the gynecologist's office are:

1. **Vaginal discharge**, sometimes associated with painful urination are the hallmarks of gonorrhea, chlamydia, trichomoniasis, bacterial vaginosis, and candidiasis. Genital herpes is sometimes associated with this symptoms, but nearly always is associated with other genital lesions. The characteristics of the discharge, such as color (clear, mucoid, yellow, green) are not indicators of the cause of it. Self-medication is not recommended. It is of utmost importance to identify the organism responsible for the discharge.

2. **Genital ulcers**: genital herpes is the most common cause of genital ulcers among adolescents. Symptomatic genital herpes may be caused by herpes simplex virus (HSV) type 1 in addition to the more common HSV type 2, and the proportion of cases caused by the former appears to be increasing. Syphilis can also present with an ulcer,

but it is usually not painful and can go unnoticed. Rare infections include chancroid, lymphogranuloma venereum (LGV), and granuloma inguinale. Of note, genital ulcers are not always due to an STD, but can be associated with other viral illness and medical conditions such as Crohn's disease.

3. **Pelvic Pain** can be caused by pelvic inflammatory disease (PID), usually caused by Chlamydia and Gonorrhea.

4. **Skin conditions.** The most common presentation is genital warts due to HPV. They are often cauliflower type lesions, but other skin conditions can look similar, such as skin tags and VIN (vulvar intraepithelial neoplasia), which is a precancerous condition.

It is important to realize that the majority of women **DO NOT HAVE ANY SYMPTOMS**, especially after a recent acquisition. For most STDs, there is a window of opportunity where the treatment can avoid long term consequences.

#### **Why do we worry about STDs?**

The majority of these infections can lead to other consequences, for example, HPV can lead to cervical and other cancers, Chlamydia and Gonorrhea can cause PID which can then lead to long standing pelvic pain, infertility, ectopic pregnancies and so on. HIV can be life threatening.

It is important to protect against and prevent STDs. But if it happens, early testing and treatment is also appropriate. Be smart, do your best to prevent it, or get tested early!

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