

STDs and HIV

Travellers who engage in unprotected sex abroad run a high risk of acquiring a sexually transmitted disease (STD) such as gonorrhoea, chlamydia and herpes as well as HIV and Hepatitis B or Hepatitis C. Because travellers sometimes feel less inhibited when away from home, they are more likely to engage in risky sexual practices. Risk increases with the number of contacts and with the number of sexual partners. Travellers who are sexually active should limit the number of new partners. Some groups have an increased likelihood of acquiring STDs - young men, long-term travellers, men who have sex with men, individuals travelling alone or with partners other than their families, and business travellers. Additionally, international travellers are more likely to have contact with commercial sex workers who have high rates of STDs.

HIV/AIDS

HIV infection, which leads to AIDS, is now a worldwide problem. The ease of international travel has undoubtedly been a major contributor to the rapid spread of HIV. In 1999 the World Health Organisation estimated that over 30 million adults are HIV positive. Cases have been reported from over 160 countries. The vast majority of these cases have occurred in developing countries where the major route of transmission is now heterosexual contact. 40% of cases now occur in females. In countries where Health Officials screen for HIV the size of the problem is becoming evident. For example:

- Over 60% of prostitutes in Thailand are HIV+ after working for one year.
- 30-60% of Indian prostitutes are HIV+.
- In many other countries such as in Africa screening for HIV is limited but the problem is enormous. Up to 50% of the general population are infected in some African countries.

Travellers are estimated to be over 200 times more likely to contract HIV whilst abroad, than at home.

WHAT CAUSES AIDS?

AIDS is caused by the Human Immunodeficiency Virus (HIV). This virus attacks the body's immune system making it unable to fight some diseases. It can take many years from the time of infection until development of symptoms - consequently just because someone looks healthy does not mean they are not infected with HIV.

HIV has been detected in blood, semen and vaginal fluids. Transmission occurs when the virus leaves a person's body and is transferred to the bloodstream of another.

HIV CANNOT BE TRANSMITTED BY:

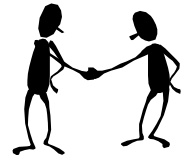
Sitting on toilet seats

Mosquitoes

Coughing or Sneezing

Swimming

Shaking Hands



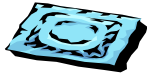
The following list are of the most common STDs:

Disease	Incubation	Symptoms	Diagnosis
Chlamydia	5-7 days	Males: discharge, usually thin & clear and painful urination Females: often none. May have vaginal discharge	Swab or Urine Test
Gonorrhoea	2-7 days	Males: creamy discharge from penis and painful urination Females: often no symptoms. May have a vaginal discharge.	Swab or Urine Test
Hepatitis B or Hepatitis C	2-6 months	Often none or can fulminate in acute hepatitis which may be fatal.	Blood Test
Herpes virus	2-12 days	Painful blisters/ulcers on penis or vagina. Can be transmitted when no ulcers visible.	Swab or Blood Test
HIV/AIDS	3 months	Asymptomatic but may lead to full blown AIDS	Blood Test
Syphilis	10-90 days	Primary; chancre (painless ulcer) on penis or vagina. Secondary: flu like illness with rash. If untreated both can lead to Tertiary syphilis which is fatal.	Blood Test or Swab
Wart Virus	1-20 months	Visible warts or vaginal irritation.	Examination

PREVENTION

HIV, Hepatitis B or C and other STDs are preventable. Abstinence is the only absolute protection from sexually transmitted diseases. Other protective methods include:

- **If you choose to be sexually active, limit the number of contacts with a potentially high risk partner and limit the number of new sexual partners.** Travellers should also avoid sex in situations of high risk, such as those that involve sex for drugs or money in areas with high rates of STDs.
- **Use a new, high quality condom for each act of intercourse** and be aware that condoms do not entirely eliminate the risk of HIV transmission or of other STD's. Latex condoms provide higher protective efficacy. Pack an adequate supply (as well as lubricant) as quality and availability in some areas is unpredictable. Protect condoms from sun or temperature extremes. The Oral Contraceptive Pill does not provide any protection against STDs.
- **Limit consumption of alcohol.** Alcohol is a significant factor in many sexual encounters, so limit your intake of alcohol when travelling, especially when in a situation that might lead to a sexual encounter. Failure to do so may result in infection with an STD.
- **Consider vaccination against Hepatitis B virus.** The only STD for which an effective vaccine is available is Hepatitis B. This vaccine is recommended for non-immune long-term travellers and individuals who plan to have sexual contact with the local population at their destination. Consult the doctors at Travel Medicine Centre Perth in regards to vaccinations.
- **Do not use or allow the use of contaminated, unsterilised syringes or needles for any injections or other skin-piercing procedures,** including acupuncture, use of illicit drugs, steroid or vitamin injections, medical or dental procedures, ear or body piercing or tattooing. If travelling to high risk areas consider taking your own emergency needle and syringe kit. Insulin dependent diabetics, haemophiliacs and people who require routine injections should carry a supply of syringes, needles and alcohol swabs sufficient to last their entire stay abroad.
- **Ensure that you have comprehensive travel insurance that provides worldwide 24 hour access.** Many countries do not have mandatory screening of donated blood for HIV, Hepatitis B or Hepatitis C. If you are injured try to avoid a blood transfusion, blood components or clotting factors unless absolutely necessary. In an emergency, sterile plasma expanding fluids can be substituted for blood in the short term. If a transfusion must be given, make sure the blood is screened.
- **Avoid putting yourself at risk of rape,** particularly if the itinerary includes remote destinations or areas of civil unrest. The risk of acquiring STDs, especially HIV, is higher after rape than after consensual sex.



International travellers should be aware that some countries serologically screen incoming travellers (primarily those planning extended visits, such as for work or study) and deny entry to people with AIDS and those whose test results indicate infection with HIV. People intending to visit a country for a substantial period or to work or study abroad should be informed of the policies and requirements of that particular country. Information is available from consular officials or on the Internet, try <http://travel.state.gov/HIVtestingreqs.html>.

ON YOUR RETURN HOME

If you have had sexual contacts (even if you have no symptoms) whilst travelling please get a complete check up on your return. These are confidential. Your own G.P., Travel Medicine Centre Perth or a specialised STD clinic can perform this. If you feel you may have been exposed make sure you abstain or practice safe sex on your return to Australia. Remember that HIV, Hepatitis B or Hepatitis C and other STDs have long incubation periods and it is possible to spread the disease before a diagnosis is made. Discussing this problem with your partner at home and then taking precautions can be difficult, but is absolutely necessary to prevent spread of disease to them. Persons with negative lab results will need to be rechecked 12 weeks later for Hepatitis B or Hepatitis C and HIV.

