Sexually Transmitted Infections (STIs)

What are Sexually Transmitted Infections (STI)/Overview

Sexually transmitted infections (STIs), also known as sexually transmitted diseases (STDs), are very common and are usually passed from one person to another during sexual activity including vaginal, anal or oral sex.

Sometimes these infections can be transmitted through non-sexual means, such as blood transfusion or through shared needles (HIV, HBV). They can also be transmitted from mother to child during pregnancy or childbirth (HIV, Syphilis, Chlamydia and Gonorrhea) or through intimate physical contact (skin-to-skin contact, such as Genital herpes, HPV, Syphilis).

STIs can be caused by bacteria, parasites or viruses and can affect more than one part of the body.

STIs are serious illnesses that require treatment, but are also preventable. That is why getting tested for STIs is important in preventing complications.

Laboratory tests can identify the cause, detect coinfections and they may involve a urine sample, blood test and swab or fluid tests from open sores of the affected areas of the body.

Although, CDC does not suggest a general STI routine test if you do not experience any symptoms, they do recommend an annual Chlamydia and Gonorrhea test for sexually active women under 25 years of age and at least one HIV test for everyone between 13 and 64 years of age. An STI general test is also recommended for people who have unprotected sex and/or many sex partners and for men having sex with men.

Which populations are at risk/ Who should be tested?

The CDC recommends that the following groups should be tested for STIs:

- All young people between the ages of 15 and 24
- All sexually active women younger than 25 years and women 25 years and older with risk factors, such as new or multiple sex partners or a sex partner who has an STD.
- All pregnant women should be tested for STDs starting early in pregnancy.
- All sexually active gay and bisexual men. Those who have multiple or anonymous partners should be tested more frequently for STDs, especially HIV (e.g., every 3 to 6 months).
- Anyone who has unsafe/unprotected sex or shares injection drug equipment.
- Anyone forced to have sexual intercourse or sexual activity.
- People immunosuppressed, people with HIV and/or people who have a history of STIs
- People with use of recreational drugs or misuse of alcohol
- People who have a new partner and/or have sexual contact with multiple partners
Possible complications include:

- Pregnancy complications: premature birth or low birth weight of the baby (Trichomoniasis)
- Eye inflammation/conjunctivitis (Chlamydia)
- Arthritis (Gonococcal Arthritis)
- Pelvic pain and Pelvic Inflammatory Disease/PID (Chlamydia, Gonorrhea)
- Infertility (Chlamydia, Gonorrhea)
- Heart disease (Gonorrhea, Syphilis)
- Certain cancers, such as liver cancer (Hepatitis B), HPV-associated cervical and rectal cancers
- Widespread infection to other parts of the body, such as cystitis (Chlamydia), meningitis and encephalitis (Genital Herpes, HIV), pneumonia, pneumonitis (HIV)
- Organ damage, such as liver disease or cirrhosis (Hepatitis B), blindness (Genital Herpes, Syphilis), paralysis, numbness, dementia (Syphilis)
According to WHO and CDC, the greatest incidence of STIs is linked to the following pathogens. Four of them are currently curable: Syphilis, Gonorrhea, Chlamydia and Trichomoniasis. The other four are viral infections that are incurable, but the symptoms can be reduced or modified through treatment: Hepatitis B, Herpes Simplex Virus (HSV or Herpes), HIV and Human Papillomavirus (HPV).

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<tr>
<th>Common STIs/Cause</th>
<th>Treatment</th>
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<tr>
<td><strong>Chlamydia</strong> caused by a Bacteria Chlamydia Trachomatis</td>
<td><strong>Antibiotics</strong> (often in a single dose). The sooner treatment starts, the more effective it is. It is also necessary to follow through the antibiotic treatment as prescribed by your health provider.</td>
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<td><strong>Gonorrhea</strong> caused by a Bacteria Neisseria Gonorrhea</td>
<td><strong>Syphilis</strong> can be cured with the right antibiotics prescribed by your physician: the most appropriate treatment is penicillin G. However, treatment might not undo any damage that the infection has already done to the body.</td>
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<tr>
<td><strong>Syphilis</strong> is caused by a bacterium Treponema Pallidum.</td>
<td><strong>Hepatitis B</strong> (HBV-Viral Hepatitis) <strong>Genital Herpes</strong> caused by 2 viruses called Herpes simplex HSV-1 and Herpes simplex virus HSV-2 <strong>Acquired Immune Deficiency Syndrome (AIDS)</strong> caused by a Retrovirus called Human Immunodeficiency Virus (HIV) <strong>Human papillomavirus (HPV) Infection/ Genital Wart</strong> caused by Human Papilloma Virus (HPV)</td>
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<tr>
<td><strong>Trichomoniasis</strong> is caused by a parasite called Trichomonas Vaginialis</td>
<td><strong>For Acute Hepatitis</strong>: No specific therapy is available and treatment is supportive: Rest, adequate fluid intake and nutrition, abstinence from alcohol and frequent medical follow ups. <strong>For Chronic Hepatitis</strong>: Antiviral medication, including interфероне and liver transplantation. Hepatitis B prevention is recommended with: Hepatitis B immune globulin (HBIG) for post exposure prophylaxis (PEP) and <strong>Hepatitis B vaccine</strong>. <strong>No cure and no vaccination are available yet.</strong> <strong>Antiviral medications</strong> (often daily suppressive therapy) can prevent or shorten the outbreaks during the administration period. <strong>Currently, there is no cure for HIV/AIDS.</strong> <strong>To control HIV and prevent complications:</strong> <strong>Antiretroviral therapy (ART)</strong> is recommended, including HIV prevention medicines for pre-exposure prophylaxis (PrEP) and post-exposure prophylaxis (PEP). <strong>No cure for the virus is available yet.</strong> <strong>For Genital warts</strong>: Treatments vary, ranging from self applied creams to surgical and other procedures, such as cryotherapy, electrocautery and laser therapy. <strong>For Cervical Dysplasia</strong>: Depending on the extent of the lesion, the Pap test and the biopsy classification, treatment options may include freezing (cryosurgery), laser or surgical removal. Prevention treatment through <strong>HPV vaccination</strong> is recommended for preteens ages 11 or 12 and for everyone through age 26 years, if not vaccinated already.</td>
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What can I do to prevent getting an STI/Prevention

Abstinence from sexual activity—not to have sex—is the most reliable way to avoid an STI.

However, this is not a popular notion among young people, who tend to be the more vulnerable population. CDC estimates that young people between ages 15-24 correspond to half of the 20 million new STIs that occur in the United States every year.

You can still protect yourself through the following practices:

✔ Practice mutual monogamy with your partner: it is one of the most effective ways to reduce your risk for STIs.

✔ Take Control and Communicate: know the facts and learn about STIs to protect yourself and, before any sexual contact, talk with your partner about practicing safer sex and the use of condoms.

✔ Get Vaccinated: vaccines are recommended ways to prevent certain types of STIs, such as Hepatitis B and HPV, if they are done early, before sexual exposure.

✔ Get tested: talk with your health provider open and honestly about your sexual history and STI testing, ask whether you should be checked for STIs and ask what tests they think you need to do.

✔ Use protection/Condoms: Use male latex condoms consistently and correctly, regardless of the type of the sexual contact. Avoid using oil-based lubricants with condoms, as they can cause the latex to break down. Use water soluble lubricants instead. Condoms are the only effective form of protection in reducing STI transmission. Nonbarrier forms of contraception, such as pills (oral contraceptives), intrauterine devices (IUDs), implants etc. do not protect against STIs.

✔ Reduce the number of Sex Partners: it can decrease the risk of STI transmission, as indicated in the Sexual Exposure Chart (the more sexual partners you have, the more people you are sexually exposed to).

✔ Avoid engaging in activities that might elicit risky sexual behaviors such as alcohol or drugs abuse.
Helplines In Athens
Get more information on testing and a variety of FAQs regarding STIs by contacting the following numbers:

**EODY**, 56 3rd September Str.
- 210 7239945 - Counseling Center and Hot Line for HIV/AIDS, ‘Andreas Sygros’ Hospital (by appointment only, Monday–Friday, 09:00-15:00)
- 210 7222222 - HIV/AIDS Helpline (operating daily from 09:00 to 21:00)

**LAIS HELPLINE** (for all STIs), 210 3303306 (operating from 10:00 to 18:00)

**PRAKSI** *(Email: info@praxis.gr, 210 197)*

**ATH CHECKPOINT** (offering counseling and free, rapid & anonymous saliva tests for HIV, Tuesday to Saturday from 12:00 to 20:00, by appointment), 4 Pittaki Str., Monastiraki, Athens, 210 3310400, app for mobile (mycheckpoint.gr)

**THESS CHECKPOINT** (offering counseling and free, rapid & anonymous saliva tests for HIV, Tuesday to Saturday from 12:00 to 20:00, by appointment), 95 Egnatia Str., Thessaloniki, 2310 282284

**HIVAIDS.gr**, the Greek Clinical site for HIV/ AIDS

**National Reference Centers for STIs & HIV/AIDS:**
- «Evaggelismos» General Hospital, 45-47 Ypsilantou Str., 210 7200001
- «Andreas Sygros» Dermatological and Venereal Diseases Hospital, 5 I. Dragoumi Str. Ilisia, 210 7243579

**Department of Hygiene and Epidemiology, Medical School, University of Athens**, 75 Mikras Asias Str, Goudi, 210 7462090

**NGOs:**
- **The Center for Life (Κέντρο Ζωής)**, 42 Iera Odos Str., Kerameikos, 210 7257617 & 210 7233848
- **Positive Voice (Θετική Φωνή)**, 13 Agion Anargyron Str., 10554 Athens, 210 8627572 (operating Monday to Friday from 09:00 to 17:00)
- **ACT UP**, 8-10 Nikitara Str., 10670 Athens, 210 3305500 (actupathens.blogspot.gr)
- **Synthesis, Social Awareness / Research Center for HIV/AIDS**, Website: http://www.hiv.gr, email: info@10percent.gr, 210 8619852 & 210 8811144

**Sources**
- https://www.cdc.gov/std/prevention/screeningreccs.htm
- https://www.nhs.uk/conditions/sexually-transmitted-infections-stis/
- https://www.who.int/news-room/fact-sheets/detail/sexually-transmitted-infections-(stis),
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**Know the Facts**

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