

# Sexually Transmitted Infections & the Chinese community in Canada

**In Canada**, there is very little information about the prevalence of STIs and STI co-infections in the Chinese population.

The following statistics related to STIs have been reported in China:

- In 2013, the Chinese government estimated that China had 99,659 cases of gonorrhea and 406,772 cases of syphilis.
- WHO data from 2006 found syphilis prevalance levels at around 14% among some groups of sex workers and men having sex with men (MSM).
- Estimated incidence of chlamydia in the general population was 2.6%; the highest chlamydia prevalence was in men aged 25-34 years and in women aged 35-44 years.
- Incidence of human papillomavirus (HPV) infection was 12.4% compared with 11.2% globally. Some subtypes of HPV (HPV 16 and 18) can cause cervical cancer in women.
- Around 30,000 women die in China every year of cervical cancer; there are an estimated 130,000 new cervical cancer cases each year, accounting for 28% of the global total.
- Cervical cancer is the 8th most frequent cancer among women in China and 2nd most frequent cancer in women between 15 and 44 years of age.

#### STI/HIV Co-infection

- A 2005 study in Hong Kong showed that 5.1% of sexually active people attending an HIV clinic had either gonorrhea or chlamydia infections.
- A study in an HIV clinic in Hong Kong in 2001 showed the rate of syphilis among people with HIV was 11% compared to an average of less than 0.5% in the general population.
- Most syphilis cases are in regions of China that have a large number of sexually transmitted HIV infections, showing the importance of implementing effective syphilis control.
- A high prevalence of HIV and anal HPV coinfection was found among MSM in China. Use of HPV vaccine might reduce HIV infections.

# Control Strategy for STIs in China

There are three major government initiatives. First, the government has prioritized interventions to control the epidemic among injection drug users, sex workers, MSM, and plasma donors. Second, routine HIV testing is being implemented in populations at high risk of infection. Third, the government is providing treatment for infected individuals.

The Global Fund Program launched in 2010 is a six-year program which aims to improve HIV/AIDS prevention, treatment, and care in China to achieve universal access for high risk populations and people living with HIV.

The new STIs Management Method developed to strengthen control, prevention, and treatment of STIs went into effect in 2013.



STIs are infections passed from one person to another through sexual contact, such as vaginal, anal, and oral sex.

#### What are the most common STIs?

Among the most common STIs are the human papillomavirus (HPV), human immunodeficiency virus (HIV), syphilis, gonorrhea, and chlamydia.

## What are the symptoms of STIs?

The majority of STIs have no symptoms. Some symptoms that may occur are: unusual discharge and bleeding from genital organs, genital ulcers, and abdominal pain.

# How are STIs passed from one person to another?

STIs are passed from one person to another:

- Through unprotected sexual contact. This means:
  - vaginal, anal, or oral sex without a condom or dental dam
  - sharing sex toys without using protection.
- By sharing drug use equipment.
- From mother to infant.

## What are the tests for STIs?

- Visual inspection
- Blood test
- Urine test
- Swab test

#### Is there a treatment for STIs?

STIs caused by bacteria (syphilis, gonorrhea, and chlamydia) can be treated and cured. STIs caused by viruses (HIV and HPV) usually cannot be cured, but these can be treated and managed.

# Are STIs preventable diseases?

Yes. The ways to prevent passing STIs from one person to another are as follows:

- Practice safer sex.
- Always use a condom even when sharing sex toys.
- Use new needle and syringe every time.
- Avoid sharing other drug use equipment.
- Get tested regularly.
- Abstinence is the ONLY sure way to prevent getting most of the STIs.

## What are STI co-infections?

*Co-infection is when a person has more than one infection at a time.* 

- Having an STI can increase the risk of getting another STI.
- Some STIs increase the risk of getting HIV and transmitting it to their partner(s) by approximately three times.
- Having an STI has been shown to increase the risk of transmission of hepatitis C virus.
- STI co-infections can be treated and treatment options should be discussed with a doctor.

## Where is more information available?

Information on STIs can be obtained from healthcare providers, public health departments, healthcare clinics in communities, and websites of the following organizations: World Health Organization, Public Health Agency of Canada, Canadian Federation for Sexual Health, Canadian AIDS Treatment Information Exchange, and Sexuality Education Resource Centre MB.

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# Sexually Transmitted Infections & the Vietnamese community in Canada

**In Canada**, there is very little information about the prevalence of STIs and STI co-infections in the Vietnamese population.

The following statistics related to STIs have been reported in Vietnam:

- The National Institute of STIs of the Vietnamese Ministry of Health recorded 202,856 new cases of STIs in Vietnam in 2006. However, the actual number of cases is likely to be higher as many patients went to private doctors and pharmacists who do not report to the Ministry of Health.
- In 2001, out of a population of 82,662,800, those infected with syphilis were 21,273, gonorrhea 243,125, and chlamydia 1,215,629.

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- In 2006 the estimated prevalence of STIs among sex workers in two cities were: Ha Noi gonorrhea 17.5%, chlamydia 1.8%, and syphilis 1.1%; Ho Chi Minh City - gonorrhea 0.3%, chlamydia 6.4%, and syphilis 9.1%.
- In 2002, Ho Chi Minh City had 6,224 new cases of human papillomavirus (HPV) infection and 3,334 patients died from HPV-related infections.
- Vietnam has a high prevalence of infection with HPV 16 or 18 that can cause cervical cancer in women; cervical cancer is the most frequently diagnosed cancer among women in southern Vietnam, which has the highest incidence observed in the world.
- The few diagnostic tests available in Vietnam for treatable STIs are often expensive and geographically inaccessible. Therefore, STI treatment is usually based on symptoms which are not reliable; repeat infections after treatment are common.

## STI/HIV Co-infection

A study published by the Vietnamese Ministry of Health concluded that:

- Individuals with STIs seem to get HIV infection easily, especially if they have ulcers.
- HIV is more easily transmitted if one or both persons have an STI. The rate of infection increases by 2 to 9 times in these cases.
- Cases of STIs without skin lesions also occur more frequently and more attention should be paid to these cases when checking for co-infections.

# Control Strategy for STIs in Vietnam

Descriptions of causes, incubation periods, symptoms, personal and public preventative measures, and treatment methods for STIs are published by the Ho Chi Minh City Public Health Institute.

The Preventative Medical Association of Vietnam website in 2012, disseminated information on HPV, chlamydia, and other STIs and the harmful effects of these diseases. It also presented the goals of preventative programs.

Many efforts have been made to promote condom use among sex workers. The WHO's "100% condom use" program has been implemented in Vietnam and activities are currently being increased to improve STI services and evaluate results.



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# Sexually Transmitted Infections & the Egyptian community in Canada

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The following statistics related to STIs have been reported in Egypt:

- The actual incidence of STIs in Egypt is not known. Little work has been done to evaluate this problem in Egypt.
- A 1996 study identified the most prevalent STIs in patients at an STI clinic, so these findings cannot be applied to the general population. Of the patients tested, gonorrhea was detected in 36.8%, syphilis was detected in 30.9%, and HIV was detected in 14.7%.
- 383 new cases of HIV were detected in 2013; the increase in the reported incidence rate from 2000 to 2013 was 5.16%.
- Although human papillomaviruses (HPV) are common throughout the world, data are not available on the HPV burden in the general population of Egypt.
- However, in Northern Africa, where Egypt is located, about 3% of women in the general population are estimated to hold HPV 16 or 18 at any time; these HPV subtypes can cause cervical cancer in women.
- Egypt has approximately 28 million women aged 15 years and older who are at risk of developing cervical cancer.
- Cervical cancer is the 13th most frequent cancer among women in Egypt.

#### STI/HIV Co-infection

- Among patients attending an STI clinic in a Cairo Hospital, STIs were detected in 26% of those with viral hepatitis.
- The prevalence of HIV in HCV-infected patients was 0.64%, predominately among males.
- A 2011 study reported that the transmission of HCV from HIV/HCV co-infected mothers to infants had increased compared to that which occurred when mothers were infected only with HCV.

# Control Strategy for STIs in Egypt

Egypt faces several challenges in maintaining a low prevalence of HIV/AIDS. There is a general reluctance by government and civil society to discuss issues related to marginalized groups such as men having sex with men, female sex workers, and injection drug users.

In addition, fear and stigma related to HIV/AIDS persist, and effective STI/HIV/AIDS education programs and other preventive measures (peer education, outreach, and behaviour change communication) are lacking among at-risk groups.

The Global Fund is a major source for financing in Egypt. The Global Fund is a partnership among governments, civil society, private sector, and people affected by AIDS, TB, and malaria.



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# Sexually Transmitted Infections & the East Indian community in Canada

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The following statistics related to STIs have been reported in India:

- India records about 30 million cases of individuals with STIs annually.
- The prevalence of bacterial STIs (syphilis, gonorrhea, and chlamydia) is decreasing while the prevalence of viral STIs [HIV and human papillomavirus (HPV)] is increasing. Increased access to over-the-counter antibiotics and improved healthcare facilities across the country have resulted in better access to appropriate treatment for people with bacterial STIs.
- A survey conducted in 2004 showed a decline in the prevalence of gonorrhea among STI clinic attendees since 2000. The proportion of male to female cases was 10:1; 80% to 90% of men acquired gonorrhea from sex workers.
- Males outnumbered females (3:1) in contracting syphilis infection.
- In India, the incidence of genital warts caused by HPV has been reported to vary from 2% to 25% among STI clinic attendees.
- Some subtypes of HPV (HPV 16 and 18) can cause cervical cancer in women. Cervical cancer is the second most frequent cancer among all women in India.
- In 2011, the 1,033 government sector STI clinics and 4,500 private sector STI clinics combined, treated approximately 10 million people.

#### STI/HIV Co-infection

- The presence of an STI in an individual facilitates the transmission of HIV. HIV-positive individuals are more likely to be infected with other STIs than those not infected with HIV.
- In 2012, HIV prevalence in pregnant women attending antenatal clinics in India averaged 0.4%.
- Higher percentages were found in female sex workers (2.7%), people attending STI clinics (3.6%), men who have sex with men (4.4%), and injection drug users (7.1%).
- In some Indian states and territories the average HIV prevalence in pregnant women was based on reports from only a small number of clinics.
- Presently in India, there is greater education and awareness about HIV/AIDS leading to more individuals seeking treatment and support.

# Control Strategy for STIs in India

India's main strategy is to effectively manage people with established infections by integrating STI services with the existing healthcare system, particularly at the primary healthcare level.

Since 2000, UN reported a 50% decline in new adult HIV cases in India.

The National AIDS Control Organization (NACO) has recommended a system of case management that oversees diseases with similar causes and symptoms. NACO has targeted high-risk groups and incorporated prevention, support, care, and treatment programs to control the epidemic.



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# Sexually Transmitted Infections & the Filipino community in Canada

**In Canada**, there is very little information about the prevalence of STIs and STI co-infections in the Filipino population.

The following statistics related to STIs have been reported in the Philippines:

- The prevalence rates of STIs have been increasing among high-risk (sex workers) and low-risk (pregnant women) groups in the Philippines.
- In 2009, 1.3% of sex workers had active syphilis.
- In 2010, the rate of active syphilis among men who have sex with men (MSM) was 2.1%.
- In a 2004-05 survey conducted in Manila among 260 MSM, the rate of urethral chlamydial infection was 19.2% and the rectal chlamydia rate was 9.2%.
- Estimates of the prevalence of chlamydial infection among 1,484 female sex workers (FSWs) in the Philippines ranged from 27% to 36%. These estimates suggest that chlamydial infection is common in this high-risk population, yet routine screening is not performed because of financial and technical constraints.
- Reported cases of gonorrhea in 2003 and 2004 were 1,223 and 1,483 respectively.
- A 2005 WHO survey of 357 sex workers in the Philippines showed a 36.7% prevalence of gonorrhea.
- According to a 2014 report, about 2.9% of the general population are estimated to hold cervical human papillomavirus (HPV 16 or 18) infections that can cause cervical cancer in women.
- Cervical cancer is the 2nd most frequent cancer among women in the Philippines.
- Cervical cancer screening programs in the Philippines are available but are not well utilized.
- Preventive HPV vaccination has been approved in the Philippines but no national or government vaccination policy has yet been implemented.

#### STI/HIV Co-infection

- Even though the prevalance of HIV in the Philippines is now low, there is a continuous increase in the reported number of new HIV infections. The government aims to reduce and maintain the level of HIV cases to less than 1%.
- The Department of Health AIDS Registry reported that STIs and HIV co-infections among Filipinos aged 15-24 years increased five-fold from 2007 to 2009.
- Recognizing that STIs are risk factors in HIV infection, the STI program was integrated into the National AIDS Prevention and Control Program in 1993. The integrated program aims to reduce transmission of HIV infection and to prevent development of complications from STIs.

# Control Strategy for STIs in the Philippines

The 2011-2016 WHO Strategy for the Philippines is to help the government to achieve improved health outcomes, sustained health financing, and a responsive health system.

The Philippine government in 2010 increased efforts to identify and treat STIs in pregnant women. Universal screening for syphilis as an entry point to identify other STI infections was established. However, to date no reliable data on syphilis prevalence and incidence among pregnant women in the Philippines are available.

The "100% condom use" initiative of WHO is being actively implemented in the Philippines to reduce sexual transmission of HIV and STIs among sex workers, their clients, and the public at large.



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