

Study of STD Pattern and its Associated Risk Factors-A Hospital Study

Chetna Arora, Bharat Mishra* and J.S.Malik**

ABSTRACT

This study was conducted to know the STD prevalence and its associated risk factors among patients attending STD clinic of Govt using cross sectional hospital based data collected on 255 patients visited STD clinic during Jan. 2005- Dec.2005.

Results suggested that highest prevalence found was of Herpes genitalis (31.8%), followed by Venereal warts (25.1%), Gonorrhoea (11.0%), Syphilis (10.6%). The most commonly associated risk factor found to be multiple sexual partners followed by factor as visit to prostitutes. Since most diseases are of social nature, IEC activities to improve the awareness in the community about STDs and about risk factors associated with them should bring behaviour related risk taking among people spreading STDs in the community.

Key words : STD pattern, STD risk factors, Herpes, Warts

INTRODUCTION

Sexually Transmitted Diseases (STD) are group of communicable diseases that are transmitted predominantly by sexual contact & caused by wide range of bacterial, viral, protozoal and fungal agents & ectoparasites¹.

Despite the tremendous progress brought about by investments in maternity care, family planning, child immunisation & better nutrition, one crucial element i.e the prevention & treatment of STDs² under maternal & child health (MCH) has not been getting the necessary priority. Historically,

STDs have also been overlooked in the global fight against infectious diseases; as a result they continue to drain the lives of young and old throughout the developing world.

STDs constitute a major public health problem in both developing and developed countries.³ The emergence of human immunodeficiency virus infection (HIV) has demanded measures aimed at control of STDs.⁴ A proper understanding of STDs prevailing in different geographic regions of a country is necessary for proper planning and implementation of STD control strategies. The patients

* Dept. of SPM, Pt.BDS PGIMS,Rohtak drchetnaarora@gmail.com

attending hospital present a wide spectrum of disease and also indicate about the pattern of infections taking place in the community of the catchment's areas. It is therefore important to undertake a study to analyse the patterns of STD among patients attending Government Hospital, Rohtak and the associated behavioural risk factors.

MATERIAL & METHODS

The present study was carried out from Jan 2005 to Dec 2005. A total of 480 cases were screened for STDs and then interviewed using pretested, predesigned proforma followed by clinical examination. Out of these, 255 cases were included in the study. Blood sample and smear was collected. Appropriate investigations were done to confirm the diagnosis. Since an individual can have more than 1 type of STD, multiple responses were recorded.

RESULTS

As is evident from the Table 1, the maximum (31.8%) cases reporting were found to be suffering from Herpes genitalis followed by venereal warts (25.1%), gonorrhoea (11.0%) and syphilis(10.6%). Pelvic inflammatory disease (PID) alone and along with secondary syphilis was found in 7.5% of the total cases followed by Chancroid (5.1%), Trichomoniasis & NGU (3.9%) and genital scabies(1.2%).

In this study, males outnumbered females in a ratio of 3.3:1 as is clear from Table 2. Among males, most commonly found STD was Herpes genitalis (37.2%) followed by Venereal warts (30.1%).

Table 1: Distribution of Sexually Transmitted Diseases

Diagnosis	Percentage
Herpes genitalis	31.8(81)
Venereal warts	25.1(64)
Gonorrhoea	11.0(28)
Syphilis	10.6(27)
PID with/without secondary syphilis	7.5(19)
Chancroid	5.1(13)
Trichomoniasis	3.9(10)
Non-Gonococcal Urethritis (NGU)	3.9(10)
Genital Scabies	1.2(3)
Total	100(255)

Gonorrhoea & Syphilis were next frequently found STDs with 10.7% & 9.7% cases respectively. NGU was reported in 5.1% of patients and 1.0% cases of genital scabies only.

Among females 32.2% had PID with or without secondary syphilis. Next commonly found STD was Trichomoniasis (17.0%) followed by Herpes (15.3%), Syphilis(13.6%) & Gonorrhoea (11.9%). Genital scabies was detected in only 1 patient (1.7%).

Out of 196 male patients, 93.9% (184) reported to have multiple sexual partners, 66.8%(131) cases were visiting prostitutes regularly and 75.5%(148) accepted to have sexual relations out of wedlock. Touring job which is proxy to undisclosed sex related activities was found to be a risk factor in 27%(53) cases and 10.7%(21) reported their spouses to be having any STD.

Table 2: Sexwise Distribution of STDs

Diagnosis*	Females %(n)	Males %(n)
Herpes genitalis	15.3(9)	37.2(73)
Venereal warts	8.5(5)	30.1(59)
Gonorrhoea	11.9(7)	10.7(21)
Syphilis	13.6(8)	9.7(19)
PID with without secondary syphilis	32.2(19)	0
Chancroid	0	6.6(13)
Trichomoniasis	17.0(10)	0
Non-Gonococcal Urethritis	-	5.1(10)
Genital Scabies	1.7(1)	1.0(2)
Total	100(59)	100(196)

*Multiple responses were reported.

Table 3 : Risk Factors for STDs Among Males and Females

Risk factor*	%(Males)	%(Females)
Multiple sexual partners	93.9(184)	35.6(21)
Visit to prostitute	66.8(131)	0
Touring job-undisclosed risk	27.0(53)	0
Spouse having STD	10.7(21)	45.8(27)
Sexual relations out of wedlock	75.5(148)	28.8(17)

*Multiple responses were reported

For females, the major risk factor is observed to be the spouse having STD(45.7%). However, multiple sexual partners were also found in 35.6% and sexual relations out of wedlock were in 28.8% cases. Touring job & contact of their spouse with male prostitutes were not found as significant risk factor (Table 3).

DISCUSSION

The above study was conducted with the objectives to elicit the prevalence of STDs and its associated risk factors in patients

attending a Government hospital in Rohtak. Most commonly reported disease was Herpes genitalis (31.8%), followed by venereal warts (25.1%) then come Gonorrhoea (11%) & Syphilis (10.6%).

Among females, PID was most frequently found (23.7%) followed by Trichomoniasis (17%) closely followed by Herpes genitalis (15.3%) and syphilis (13.6%) & Gonorrhoea (11.9%). In males, maximum cases reported for Herpes genitalis (37.2%) and warts (30.1%).

Major risk factor among males was found to be having multiple sexual partners (93.9%) & in females, main risk factor was seen as spouse having STD (45.8%). Similar findings were seen in the study conducted⁵ elsewhere. However present study finds higher prevalence of Herpes genitalis. This could be explained by the fact that being a very painful condition cases report early & more frequently than other STDs which are relatively less painful and disturbing at initial stages leading to delayed or either non reporting to the STD clinics. Stigma related to the disease may also be playing role in non-reporting of STD cases.

It can be concluded from the study that STDs are an important public health problem in the community as it is more of a social disease than a medical disease. Therefore, STD prevention efforts are critical & should be accorded high priority by health policy makers. Efforts should concentrate to increase the availability of facilities for treatment of STDs at peripheral centres⁶. Emphasis should be given to syndromic approach for management of STDs⁷. IEC activities to improve the awareness in the community about STDs & HIV⁸ and about risk factors associated with them should bring behaviour related risk taking among people spreading sexually transmitted diseases in the community.

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