

Sexually transmitted infections

The stigma around STIs means many people are afraid to talk about them. But with a bit of knowledge, STIs don't have to be a problem.

Sexually transmitted infections (STIs) are infections that can be spread by sex. Anyone can catch an STI, whatever their sexual orientation. Safer sex practices, such as using condoms and limiting your number of sexual partners, decreases your risk, but there's one thing for sure – even if you have unsafe sex just once, you're at risk of catching an STI.

You can't tell by looking at a potential sexual partner if they have an STI. A strong and healthy person may still be infected. Some people may not even know they are infected. You risk getting an STI from any partner who has had, or is having, unsafe sex with another person.



Understanding STIs

Stigmas around STIs still persist – that they supposedly only happen to promiscuous people or, simply, other people. That's not the case.

Many women find it difficult to discuss STIs with their partners or doctors, or worry they may be judged for asking their doctor for an STI test. However, sexual health is a vital part of a woman's wellbeing, so it's important to talk about STIs – to understand them, know how they are spread, treated and, most importantly, how to avoid them.

Types of STIs

There are many kinds of STIs, including viral and bacterial. Many have different symptoms and treatments. Some are easily cured, some are not – but the good news is that all of them can be treated and managed.

Here are some of the main STIs:

Chlamydia: a bacterial infection that is easy to cure, but tricky to notice. In most

5 THINGS TO KNOW

1. The rates of STIs in older women are increasing
2. You cannot tell if someone has an STI just by looking
3. You can still catch STIs during oral sex
4. Some people can have an STI, yet never show a symptom
5. All STIs are either curable or manageable with medication

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cases it shows no symptoms in women or men, but in men can cause urethritis and in women symptoms of vaginal discharge, pain during sex, bleeding between periods and pelvic pain.

Gonorrhoea: a curable bacterial infection of the genital tract that can be transmitted through vaginal, anal or oral sex. Symptoms include throat and/or anal infection and joint pain, though sometimes women can have no symptoms.

Herpes I and II: the herpes simplex virus (HSV) has two main types, herpes I and II. Also known as oral herpes, HSV1 causes cold sores, while HSV2 is commonly associated with genital herpes, which also causes blisters and ulcers. However, HSV1 can spread to the genitals through oral sex.

There is no cure for the virus, but it can be well managed with medications.

Some people with HSV never show any symptoms, so may not even know they have it and go on to unknowingly infect other people.

Genital warts: one of the most common STIs in men and women, caused by the human papillomavirus (HPV). Four out of five women will be exposed to HPV at some stage. Spread

by skin-to-skin contact during vaginal or anal sex, warts may appear within weeks or months after sex with an infected person, or not appear at all. It's diagnosed more often in women, as HPV causes cell changes on the cervix detected by a Pap smear or a cervical screening test.

Syphilis: a curable bacterial infection that can be transmitted by a syphilis sore or rash.

Human immunodeficiency virus (HIV): the virus that causes AIDS. It is not curable, but is no longer the potential death sentence it once was; it can now be well managed with medication.

The invisible visitor

Most women in Australia have a very low risk of contracting gonorrhoea, syphilis or HIV. These STIs tend to more so affect people in socially disadvantaged groups and men who have sex with men, according to the Kirby Institute in Sydney, which collects and analyses data on STI diagnoses from all over Australia.

Women need to be especially aware of chlamydia, however, as it's the most commonly transmitted bacterial STI in Australia. Four out of five cases of chlamydia are asymptomatic, which means there are no visible symptoms. Untreated, chlamydia can cause pelvic inflammatory disease, chronic pelvic pain, ectopic pregnancy and infertility.

In 2015 there were more

than 66,000 recorded cases of chlamydia in Australia, and most in women. Dr Terri Foran of Sydney's Royal Hospital for Women calls those confirmed diagnoses "the tip of the iceberg".

"There's a large group of people out there at any particular time who simply don't know they have [chlamydia] and therefore spread it to their sexual partners very quickly and easily," she says.

The Kirby Institute reported an increase in the numbers of diagnosed chlamydia cases over the 10 years from 2006-2015. Younger women were the exception: the rates of infections in women aged 15-24 dropped. But in women aged 25 and over, the numbers all increased. In women over 40, the numbers doubled.

The evidence suggests that safer sex messages may have skipped a generation. "I do find women over the age of 40 are significantly less well informed about chlamydia and STIs generally. Postmenopausal women are perhaps even less well-informed," says Dr Foran.

Safer sex practices

The best way to reduce the risk of STIs is to practise safer sex. That means always using condoms and dental dams (a piece of latex that can be placed over the labia or anus during oral sex) to avoid contact with your partner's body fluids.

Some STIs, such as genital herpes and genital warts, may still be spread even if a condom is used, as they are spread by skin-to-skin contact, not saliva. Condoms don't offer 100% protection.

If you're unsure if you have an STI, see a trusted doctor. Don't worry – they're used to seeing people of all ages and life stages. Depending on the symptoms, they might collect body fluid or take a blood or urine sample.

"Don't be scared of raising the issue with your GP. It's about women protecting themselves and knowing where to turn," says Associate Professor Deborah Bateson, medical director of Family Planning NSW.

"It's all about having the discussion with your partner, about using condoms and getting tested'," she says.

What can a person expect if they come to Dr Foran for an STI check? "The last thing they should expect is a lecture," says Dr Foran. "The first thing they can expect is 'congratulations for coming along, that's very proactive and sensible of you'."

So remember, when it comes to avoiding STIs, you're in control, and safer sex is in your hands.

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OLDER WOMEN AND STIS

In 2009, Dr Deborah Bateson of Family Planning NSW launched an online survey around online dating and safer sex practices. 'When Online Becomes Offline' was completed by more than 1800 women aged between 18 and 70, with two out of three respondents aged over 40.

The study's main finding was a surprise that gained global interest: while women over 40 were more likely than younger women to raise the issue of safer sex with a new partner, they were less likely to actually follow through with practising safe sex.

Dr Bateson believes there are many reasons for this finding – a combination of being new to dating, not being exposed to safe-sex messages for a long time, concerns around erectile dysfunction in older partners and, in many cases, "not having the language to negotiate condoms, perhaps not carrying condoms themselves".

It is perhaps then not surprising that there has been a marked rise in the numbers of women aged over 40 being diagnosed with STIs in Australia, as reported by the Kirby Institute (see main story).

Education is key to addressing this trend, says Dr Bateson. "We need to make sure we support GPs with good information about STI risk in older people, because it's easy to just forget it really; people can just assume that there's no risk because you're older, which is not the case."



Find more information about safer sex and STIs