



**Your trouble shooters guide
to sexually transmitted
infections and infections
of the reproductive system.**

LOVE BUGS



**MARIE STOPES
INTERNATIONAL**

| | BACTERIAL VAGINOSIS | BALANITIS | CHLAMYDIA | CYSTITIS | GENITAL WARTS | GONORRHOEA | HEPATITIS A | HEPATITIS B | HEPATITIS C | HERPES | HIV | NON-SPECIFIC URETHRITIS | PELVIC INFLAMMATORY DISEASE (PID) | PUBIC LICE/ CRABS | SCABIES | SYPHILIS | THRUSH/ CANDIDA | TRICHOMONIASIS |
|--|---|---|---|--|---|---|--|--|---|---|---|--|---|---|--|--|---|---|
| Sexually Transmitted Infections/ infections of the reproductive system | Women only. Sometimes called BV or gardnerella. | Men only. Inflammation of the head of the penis (caused from an overgrowth of organisms which are normally present on the skin of the head of the penis). | Caused by a bacteria which can affect the penis, cervix, urethra, fallopian tubes, anus, rectum and less commonly the throat and eyes. | A bacterial infection causing inflammation of the bladder lining. It can spread to the kidneys and cause damage to the kidney function. Most common in women. | Caused by the Human Papiloma Virus (HPV). | A bacterial infection of the genitals, throat or rectum. | A viral infection that affects the liver. | A viral infection that affects the liver. | A viral infection that affects the liver. | Caused by the herpes simplex virus (HSV). There are two types of HSV: Type 1 is usually found around the lips and is commonly known as a cold sore. Type 2 is usually found around the genital or anal areas. | HIV (human immunodeficiency virus) is a virus which damages the immune system and can lead to serious infections. AIDS (acquired immune deficiency syndrome) is a late form of infection with HIV. | Men only. An infection that causes an inflammation of the male urethra contracted by a bacteria or virus. | Women only. Caused by the spread of infection into the upper part of a woman's reproductive system (the cervix, uterus, and fallopian tubes). | Tiny parasitic insects found in the genital areas as well as in other parts of the body. They live in pubic and body hair. | Small mites that burrow into the skin. | Caused by a bacterial infection. If left untreated can result in very serious complications (including damage to the heart, brain and spinal cord). | Caused by an overgrowth of candida yeast that irritates the mucous membrane of the genitals or throat. | A protozoal infection often referred to as "trike". |
| How is it transmitted? | Not sexually transmitted. Caused by changes in the balance of bacteria in the vagina such as from new sex partners or increased sexual activity, but can also occur in women who are not sexually active. | Not always sexually transmitted. Usually occurs in uncircumcised men (as the environment under the foreskin is warm and moist which favours the growth of organisms). More likely to occur if you have not washed for a couple of days. | Sexually transmitted or transmitted via fingers from genitals to the eyes. Symptoms appear 2-3 weeks after contact but might not show for years. | Not sexually transmitted but can occur after sex. Caused from bacteria getting from the anus into the urethra and bladder or by not emptying the bladder properly. | Transmitted via close skin contact usually during unprotected sex. Sometimes there is no identified source of transmission of the virus. Symptoms can recur. | Sexually transmitted. If left untreated may lead to pelvic inflammatory disease (PID) in women or even infertility in both men and women. Symptoms appear 3-5 days after contact with infection. | Can be sexually transmitted but more commonly through contaminated food or water, not washing hands after the toilet or before touching food. | Sexually transmitted. Symptoms appear 4 weeks to 6 months after transmission. Very common in Africa, Asia, South America. | Transmitted via infected blood (sharing needles, syringes, etc) and rarely through sexual contact. | Transmitted via close skin contact including unprotected sex. Sometimes contracted even when people have no symptoms of the virus. Can be transmitted from mouth to genitals during oral sex. Symptoms appear 3-10 days after contact. | Sexually transmitted and can also be transmitted via blood i.e. transfusions, needles. | Usually sexually transmitted. Symptoms appear 2 weeks after contact. | Can be a result of earlier STI (such as Chlamydia or Gonorrhoea) but not everyone who has had these STIs will get PID. Occasionally develops after termination of pregnancy or other surgical procedures. | Close body contact usually during sex. Can also be transmitted via sharing bedding or clothing with an infected person. Symptoms and signs can usually be expected after several weeks. | Not always sexually transmitted. Skin to skin contact. Can also be transmitted via sharing bedding or clothing with an infected person. Symptoms will appear around 4 weeks after infestation. | Sexually transmitted. | Not sexually transmitted. The overgrowth can happen as a result of antibiotics, when your immunity is low, as a result of diabetes, during pregnancy, following sex and/or a change in weather/diet. | Sexually transmitted Symptoms appear 1-4 weeks after contact. |
| Symptoms (Symptoms may vary from person to person) | Unpleasant odour (worse after sex or after periods) and/or greyish/yellow/green discharge. Can have no symptoms. | Spots, rash, itching, discharge, pain during sex, difficulty urinating, swelling and/or inflammation of foreskin. | In many cases it has no symptoms. Women: Unusual vaginal discharge, pain during sex and urinating, bleeding after sex, abdominal pain. Men: Discharge from tip of penis, pain when urinating and/or pain/swelling of testicles if left untreated. | Burning/pain when urinating, urinating more frequently, blood in urine, lower back or abdominal pain and/or fever. | Visible warts/cauliflower-like clusters (can be single or multiple) in genital area (vagina/penis) and/or anus. May be itchy. | Women: Yellow or green vaginal discharge, pain during sex, abdominal pain, burning when urinating. 50% of women have no symptoms. Men: Yellow discharge from penis, irritation/discharge from anus, pain in the testicles or when urinating. Most men have symptoms. | Dark urine, mild flu like symptoms, vomiting, abdominal pain, yellowing of the skin and whites of eyes. Often no symptoms. | Flu-like symptoms, fever, dark urine, pale bowel movements, loss of appetite, night sweats, whites of eyes and skin may go yellow indicating jaundice. Can have no symptoms. | Mild flu-like symptoms, tiredness, nausea, abdominal pain, dark urine, yellowing of the skin and whites of eyes. Often no symptoms. | Blisters on the genitals which usually burst leaving sore ulcers, painful urinating, swelling of glands, soreness/irritation. The first attack may be the worst. Recurrent episodes are usually less severe and of shorter duration. | Most people develop a glandular fever like illness (fever, sweats, diarrhoea, rash, mouth ulcers) between one and six weeks after becoming infected with HIV. This may last a few days to a few weeks. Many have no symptoms for several years. | Milky pus-like discharge from the penis, burning when urinating, painful ejaculations, itching, tingling, irritation inside the penis, pelvic pain and/or sore testicles. Some men have no symptoms. | Symptoms are not always obvious. Low abdominal pain, pain during sex, smelly vaginal discharge, irregular bleeding and/or high fever. | Inflammation, irritation and/or intense itchiness in and around the pubic area. | Itchiness, especially at night on any part of body (except head and central back). A rash. | Single, painless clear ulcer usually on the genitals, enlargement of glands in groin, rash on body, flu-like illness, hair loss. There may be no symptoms. | Women: Vulva and vaginal itchiness, soreness and stinging, superficial pain when urinating, a thick whitish/yellow discharge, redness and swelling and/or pain during sex. Men: (rare) irritation of the glans and discharge from penis. | Women: Yellow, frothy, smelly discharge, itchiness and soreness of vagina/vulva, pain during sex, burning when urinating. Men: Usually no symptoms – occasional pain when urinating, discharge from penis. |
| Treatment | Antibiotic tablets or vaginal creams. | Anti-fungal cream; saline baths; washing with soap and warm water; good skin care. | Antibiotics. If left untreated in women it may lead to pelvic inflammatory disease (PID), potentially causing chronic pain and an increased risk of ectopic pregnancy or even infertility. | Drink plenty of water: use cystitis powder (i.e. Ural®); antibiotics. | Small warts can be removed with nitrogen (freezing), diathermy (heat) or a chemical paint. Usually a few treatments are needed as there is a risk of warts coming back. | Antibiotics. | No known cure – long term medical supervision required. Bed rest and adequate fluids. Alcohol and some other drugs should be avoided. Can be immunised for prevention. | Drug treatment may be effective for some carriers. Long term medical supervision is required for people with chronic Hepatitis B. Alcohol and some other drugs should be avoided. Can be immunised for prevention. | No known cure – long term medical supervision required. Rest, exercise and a well balanced diet avoiding alcohol and drugs. There is no vaccine for Hepatitis C. Some antiviral treatments are now available. | Medication cream for mild cases i.e. cold sores. Antiviral tablets, saline baths for pain relief. No known cure so can recur. Sexual contact should be avoided from the first indication of an infection until the skin has returned to normal. | There is still no known cure. The most effective form of treatment is a combination of antiviral therapy, which attacks HIV directly. | Antibiotics. | Antibiotics. | Special lotions/ shampoos applied to affected area. Clothing and bedding should be washed. | Special lotions applied to whole body and cream to relieve itching. Clothing and bedding should be washed. | Antibiotic injections. | Anti-fungal treatment such as creams, pessaries (inserted into the vagina) and/or saline baths. Oral antifungal tablets (such as Diflucan®) may be given if cases are severe. | Antibiotics. |

Remember: If you have an STI, all current and past sexual partners should be tested and treated.

The most common way sexually transmitted infections (STIs) are transmitted is through vaginal, anal or oral sex without a condom. If you have unprotected sex a simple test is all you need to ensure you are in the clear.

Some STIs (like Chlamydia for example), don't always show symptoms. Some can even lie dormant for years and, if left unchecked, can cause pelvic inflammatory disease which in turn can lead to infertility. So even if you don't have any obvious signs, never assume you're off the hook. On the other hand, just because you've got an itch it doesn't necessarily mean you have an STI.

To make sure your sexual health gets the stamp of approval, it's worth checking it out at either your Marie Stopes International centre, local family planning clinic or by visiting your doctor, as symptoms may vary from person to person.

Remember:

- It is very important that both/all current partners receive the same treatment at the same time; otherwise you may continue to pass on the infection back and forth between you. All of your previous sexual partners whom you feel may be at risk should also be checked and treated.
- Only condoms offer dual protection against both STIs and unplanned pregnancy.
- Women: Don't forget your regular breast checks and be sure to have a pap smear every two years.
- Men: Don't forget your regular testicular checks.

With centres located in the ACT, QLD, NSW, VIC and WA, Marie Stopes International provides a range of specialist sexual and reproductive healthcare services including:

- **Abortion and aftercare**
- **Vasectomy including initial consultation, 10-15 min nonscalpel technique, semen testing and aftercare**
- **Contraceptive advice and insertion including IUD, Implanon®, NuvaRing® and Depo Provera®**
- **STI check-ups**
- **Counselling**
- **Colposcopy (selected centres)**

Marie Stopes International ensures every client receives immediate help and support in a non-judgmental, personalised and confidential manner. With no waiting lists, flexible consultation times and Medicare rebates available, our centres combine a comfortable, non-hospitalised environment together with the highest clinical standards.

For more information on the services offered at a centre near you, or to make an appointment, please contact our National Support Centre on

Freecall 1800 003 707 (open 24 hours)

or visit our website at

www.mariestopes.com.au



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