

Chapter 16

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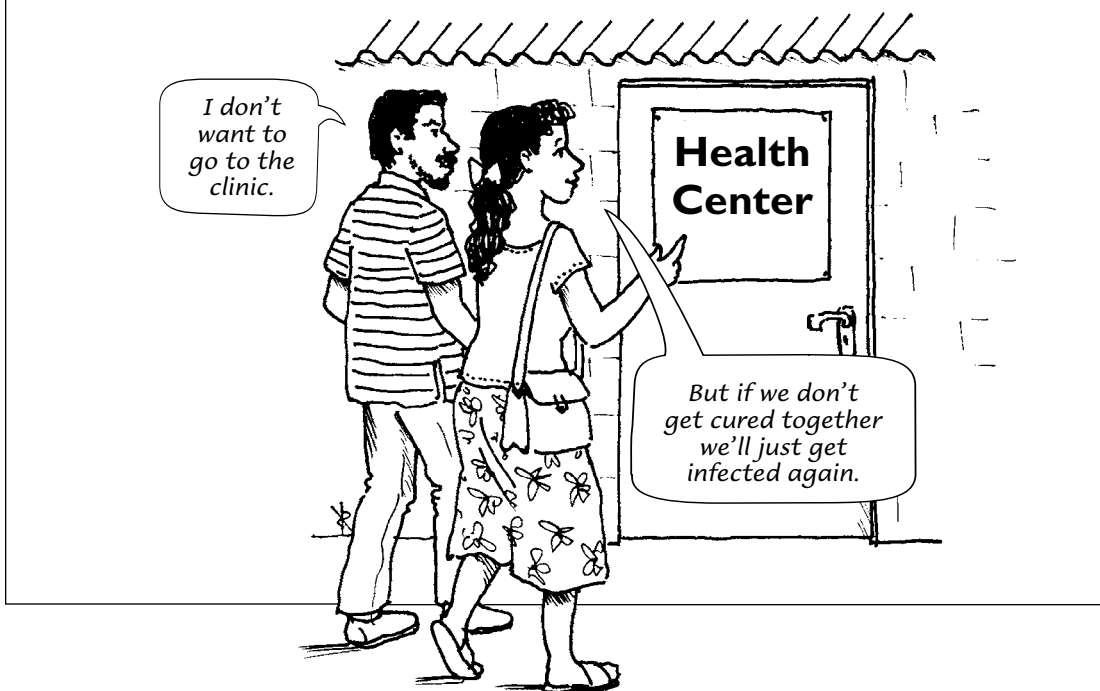
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How to use this chapter:

This chapter describes some of the most common STIs, and explains how to treat and prevent them. It also describes some other infections of the genitals that are common, but are not sexually transmitted.

This chapter also suggests many different medicines that treat STIs. Before you take any medicine, read about how to use medicines safely in the chapter called “Use of Medicines in Women’s Health” (see page 469). There is also information you should know about each medicine listed in the “Green Pages” (see page 485).

Sexually Transmitted Infections and Other Infections of the Genitals



Sexually transmitted infections, or STIs, are *infections* passed from one person to another during sex. Any type of sex can cause an STI. It can be *penis to vagina* sex, or *penis to anus* sex, or *oral sex* (mouth to penis, mouth to vagina). Sometimes STIs can happen from just rubbing an infected penis or vagina against another person's *genitals*. STIs can be passed from a pregnant woman to her baby before it is born, or during childbirth. STIs increase the risk of getting or giving HIV.

Unless they are treated early, STIs can cause:

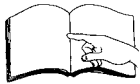
- *infertility* in both men and women.
- babies born too early, too small, blind, sick, or dead.
- pregnancy in the tube (outside the womb).
- death from severe infection.
- lasting pain in the lower *abdomen*.
- *cancer* of the *cervix*.

► *Early treatment of STIs in both partners can prevent many serious problems.*

► *This chapter will also help you treat some problems of the genitals that are not sexually transmitted.*

Why STIs Are a Serious Problem for Women

► *Most women, and many men, who are infected with an STI do not have any signs.*



sexual health, 181
talking about
safer sex, 192

Men and women can both get STIs. **But a woman gets infected from a man more easily than a man gets infected from a woman.** This is because a man's penis goes into some part of a woman's body—such as her vagina, mouth, or anus—during sex. Without a condom, the man's semen, which may carry infection, stays inside her body. This gives her a greater chance of getting an infection in the womb, tubes, and ovaries. When a woman has sores on her genitals or irritation from an infection in the vagina, she can also get HIV more easily.

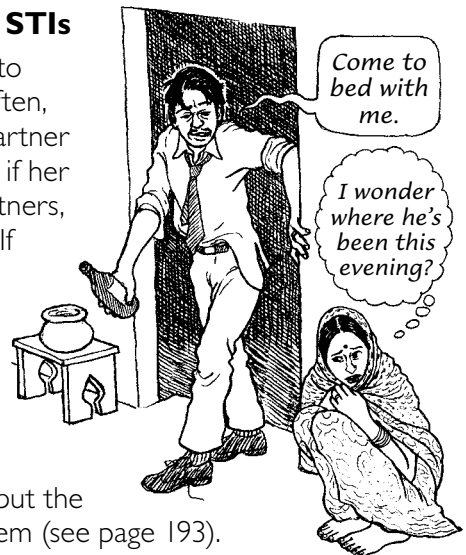
Because most STIs are inside a woman's body, the signs of an STI in a woman are harder to see than in a man. So it is often hard to tell if a woman has an infection in her genitals—much less what kind of infection she has.

Why so many women get STIs

It can be hard for a woman to protect herself from an STI. Often, she must have sex when her partner demands it. She may not know if her partner has sex with other partners, or if he is infected with an STI. If he has another partner who is infected, he may infect his wife.

A woman may not be able to persuade her partner to use condoms.

Latex condoms are the best way to protect both partners, but the man has to be willing to use them (see page 193).



You may have an STI if you have one or more of these signs:

- an unusual or bad-smelling vaginal discharge
- itching genitals
- painful genitals
- sores or blisters on the genitals
- pain in your lower abdomen or pain during sex



STIs hurt men, too

When they are not treated, STIs can cause a man to:

- become infertile.
- have lasting pain.
- get infected with HIV.

HOW TO KNOW IF YOU ARE AT RISK FOR AN STI

Even if you do not have any signs, you may be at risk (more likely to have an STI) if:



- your partner has signs of an STI. He has probably passed the STI to you, even if you have no signs.
- you have more than one partner. The more partners you have, the greater the chance that one of them has passed an STI to you.
- you have had a new partner in the last 3 months. He may have had another partner just before you who had an STI.
- you think your partner might have other partners (for example, he lives away from home). This means he is more likely to become infected with an STI and infect you.

WHAT TO DO IF YOU HAVE SIGNS OF AN STI OR ARE AT RISK FOR AN STI

If you have signs of an STI or think you are at risk for an STI, you should start treatment right away. Unfortunately, tests for STIs are not available in many places, may be expensive, and are not always accurate.

- **Treat the infection right away.** If you have signs described in this chapter, follow the treatments given.
- **Do not wait until you are very ill.** Treatment will protect you from more serious problems later on and will prevent the spread of STIs to others.
- **Get tested if testing is available.** You could be infected with another STI and have no signs.
- **Help your partner get treated at the same time.** If he does not get treated, he will infect you again if you have sex.
- **Practice safer sex.** You may get another STI or HIV if you do not protect yourself (see page 189).
- **Try to get tested for HIV.** STIs and HIV infection often occur together (see page 286).
- **Buy and take all the medicine as recommended.** Even if your signs go away, you will not be cured until all the medicine has time to work.

If the signs do not go away after taking the medicines, see a health worker. Pain or vaginal discharge could also be caused by another problem like cancer.

► *The lack of low-cost, accurate testing for STIs is a major problem for women. It may lead to women taking medicines they do not need, cannot afford, and that cause side effects.*



Taking Medicines to Treat STIs

► Warnings are given in this chapter if pregnant or breastfeeding women should not take a medicine. If a medicine does not have a warning, it is safe to take.

► Before you take any medicine, you can read about it in the “Green Pages.” There you will find more information you should know.

► If you are not sure which medicine will work best for a problem, try to check with a health worker or pharmacist who will know which medicines are best where you live.

In this chapter we recommend medicines that treat different STIs. Remember that most people have more than one STI or other infection of the genitals at the same time, so it is often necessary to take more than one medicine. Whichever medicines you choose, be sure to take them correctly.

Different kinds of medicines are sold in different parts of the world, and the prices may vary. Because of this, some medicines may not be available where you live, or there may be a different medicine that is more effective and less costly.



You may also need to take a different medicine if:

- you are pregnant or breastfeeding and the medicine is not safe to take during those times.
- the STI you are trying to treat has become *resistant* to the medicine.
- you have an allergy to the medicine. Some people are allergic to medicines like penicillin or sulfa antibiotics. See page 480 for how to substitute antibiotics.

DRUG RESISTANCE AND STI MEDICINES

When using medicines for treating STIs and other diseases, it is very important to take all the medicine. If a person does not take enough of the right kind of medicine—or stops taking the medicine before the treatment is finished—the germs causing the infection are not all killed. The strongest germs survive and create stronger forms of the disease. Then a medicine that once worked against that disease is no longer able to cure it. This is called resistance.

For this reason, in many places gonorrhea has become resistant to the drugs usually used to treat it. Talk with a health worker to find out if there is drug resistance where you live, and what are the best, locally-available medicines to treat STIs.

Be sure to take medicines correctly

Remember, when treating STIs, always:

- make sure your partner gets treated too.
- take all the medicine.
- stop having sex or use condoms during sex until your signs have gone away AND you and your partner have finished all the medicine.
- see a health worker if you do not get better by the end of your treatment.
- practice safer sex when you do have sex again.



It is normal to have a small amount of discharge or wetness that comes from the vagina. This is the way the vagina cleans itself. The amount of discharge changes during the days of your monthly cycle. During your fertile time, your discharge is more wet and slippery, and clear in color. If you are pregnant, you may have more discharge.

A change in the amount, color, or smell of the discharge from your vagina sometimes means you have an infection, but it can be difficult to tell from your discharge what kind of infection you have.

COMMON CAUSES OF ABNORMAL DISCHARGE

Abnormal discharge can be a sign of a yeast infection or bacterial vaginosis, which are not sexually transmitted, or a sign of trichomonas, gonorrhea, and chlamydia, all of which are sexually transmitted. For other signs of these infections and how to treat them, see pages 266 to 268.

IMPORTANT *If you have discharge from the vagina with pain in the lower abdomen, you could have a serious pelvic infection. Get treatment immediately! See page 274.*

Yeast (candida, white discharge, thrush)

Yeast is not sexually transmitted. It does not cause complications, but it can be very uncomfortable. You are most likely to have a yeast infection when you are pregnant, taking antibiotics, or have some other illness like diabetes or HIV infection.

Signs:

- white, lumpy discharge, like milk curd or yogurt
- bright red skin outside and inside your vagina that may bleed
- you feel very itchy inside or outside your vagina
- a burning feeling when you pass urine
- a smell like mold or baking bread

Abnormal Discharge

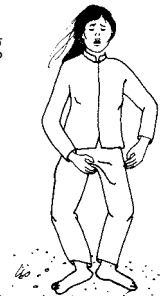


A change in the smell or color of your discharge can mean you have an infection.

Itching of the genitals

Itching of the genitals can have many causes. Itching around the opening of the vagina could be yeast or trichomonas. Itching in the hair of the genitals or close to the genitals could be caused by scabies or lice. Scabies or lice can be treated with local remedies, or with medicines found in most pharmacies. For more information, see **Where There Is No Doctor**, or another general medical book.

Some itching is caused by soaps or deodorants that have perfume in them. It can also be caused by plants and herbs that are used for douching or washing out the vagina. Wash with plain water to see if the itching goes away.



Treatment:

Yeast is not dangerous, and it can often be cured using natural remedies. It is best to treat a pregnant woman before the birth, or the baby can get thrush (see page 117).

One natural treatment is to mix 3 tablespoons of vinegar with 1 liter (quart) of boiled and cooled water. Soak a piece of clean cotton in the mixture and insert it into the vagina every night for 3 nights. Remove the cotton each morning.



Medicines for Yeast Infection

Soak a clean piece of cotton in gentian violet 1%. Insert the cotton into the vagina, every night for 3 nights. Remove the cotton each morning. **Or** use any of the following medicines.

Medicine	How much to take	When and how to take
miconazole.....	put one 200 mg insert.....	high in the vagina, each night for 3 nights
or nystatin	put one 100,000 Units insert	high in the vagina, each night for 14 nights
or clotrimazole.....	put two 100 mg inserts.....	in the vagina, each night for 3 nights

Prevention:

Wearing loose clothing and underclothes made of cotton, rather than polyester or nylon, lets air around the genitals. This helps prevent yeast. Wash or change the underclothes often. Do not put soap in the vagina when bathing. Do not douche.

Bacterial vaginosis

Bacterial vaginosis is not sexually transmitted. If you are pregnant, it can cause your baby to be born too soon.

Signs:

- more discharge than usual
- fishy smell from the vagina, especially after sex
- mild itching

If you are NOT AT RISK for an STI

Medicines for Discharge: to treat Bacterial Vaginosis

To decide if you are not at risk for an STI, see page 263.

Medicine	How much to take	When and how to take
metronidazole	400 to 500 mg.....	by mouth, 2 times a day for 7 days
or metronidazole.....	2 grams (2000 mg).....	by mouth, in a single dose
<i>(avoid metronidazole in the first 3 months of pregnancy)</i>		
or clindamycin.....	300 mg.....	by mouth, 2 times a day for 7 days
or clindamycin.....	5 grams of 2% cream.....	high inside the vagina at bedtime for 7 days
<i>(one full applicator)</i>		

Also treat the woman's partner with 2 grams of metronidazole by mouth, one time only.

IMPORTANT Do not drink alcohol during the time you are taking metronidazole.

Trichomonas

Trichomonas is a very uncomfortable and itchy STI. Men usually do not have any signs, but they can carry it in the penis and pass it to a woman during sex.

Signs:

- gray or yellow, bubbly discharge
- bad-smelling discharge
- red and itchy genital area and vagina
- pain or burning when you pass urine

Gonorrhea and chlamydia

Gonorrhea and chlamydia are both serious STIs, but they are easy to cure if treated early. If not, they can cause severe infection and infertility in both women and men. In a man, the signs usually begin 2 to 5 days after he had sex with an infected person. But a man can have no signs and still be infected. In a woman, the signs may not begin for weeks or even months. Even if you do not have any signs, you can still pass gonorrhea and chlamydia to another person.

► *Gonorrhea and chlamydia have the same signs, so get treated for both.*

Signs in a woman:

- yellow or green discharge from the vagina or anus
- pain or burning when passing urine
- fever
- pain in the lower belly
- pain or bleeding during sex
- or no signs at all



Signs in a man:

- discharge from his penis
- pain or burning when he passes urine
- pain or swelling of the testicles
- or no signs at all



If you think you are AT RISK for an STI

Medicines for Discharge: to treat Gonorrhea, Chlamydia, Trichomonas

Also treats Bacterial Vaginosis

To decide if you are at risk for an STI, see page 263.

Medicine	How much to take	When and how to take
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ceftriaxone.....	250 mg.....	inject into muscle as a single dose
or spectinomycin.....	2 grams (2000 mg).....	inject into muscle as a single dose

AND

azithromycin.....	1 gram (1000 mg).....	by mouth as a single dose
or doxycycline.....	100 mg.....	by mouth, 2 times a day for 7 days
<i>(do not use doxycycline if you are pregnant and avoid using it if you are breastfeeding)</i>		
or erythromycin.....	500 mg.....	by mouth, 4 times a day for 7 days
or tetracycline.....	500 mg.....	by mouth, 4 times a day for 7 days
<i>(do not use tetracycline if you are pregnant or breastfeeding)</i>		
or amoxicillin.....	500 mg.....	by mouth, 3 times a day for 7 days
<i>(amoxicillin can be used if you are pregnant and azithromycin and erythromycin are not available)</i>		

AND

metronidazole.....	400 to 500 mg.....	by mouth, 2 times a day for 7 days
	or 2 grams (2000 mg).....	by mouth, in a single dose
<i>(avoid metronidazole in the first 3 months of pregnancy)</i>		

OR

tinidazole.....	2 grams (2000 mg).....	by mouth in a single dose
or , if you are pregnant less than 3 months,	500 mg.....	by mouth, 2 times a day for 5 days

Also treat the woman's partner with the same medicines.

IMPORTANT Do not drink alcohol during the time you are taking metronidazole or tinidazole.

Warts are caused by a *virus*. Warts on the genitals look like warts on other parts of the body. It is possible to have genital warts and not know it, especially when they are inside the vagina or inside the tip of the penis. Warts may go away without treatment, but it can take a long time. Usually they continue to get worse and should be treated.

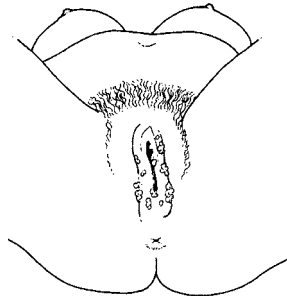
Signs:

- itching
- small, painless, whitish or brownish bumps that have a rough surface.

In men, they usually grow on the penis, (or just inside it) and on the *scrotum*, or the anus.



In women, these bumps usually grow on the folds of the *vulva*, inside the vagina, and around the anus.



IMPORTANT *Large, flat, wet growths that look like warts may be a sign of syphilis (see the next page). Try to get a test for syphilis, and DO NOT use the following treatment.*

Treatment:

1. Put some petroleum gel or other greasy ointment on the skin around each wart to protect the healthy skin.
2. With a small stick or tooth pick, carefully put on a very small amount of trichloroacetic acid (TCA) until the wart turns white. You can also use bichloroacetic acid (BCA).

OR

Apply 20% podophyllin solution in the same way until the wart turns brown. **Podophyllin must be washed off 6 hours later.** Do not use podophyllin while you are pregnant.

If the treatment is working, it will cause a painful sore where the wart used to be. Keep the sores clean and dry. Try not to have sex until they are gone, but if you must have sex, your partner should use a condom. The sores should heal within a week or two. Watch them to make sure they do not get infected.

Several treatments are usually necessary to get rid of all the warts (it does not matter which solution you use). You can repeat the treatment after one week. Try not to get acid on a sore where a wart used to be. If there is too much irritation, wait longer before the next treatment.

Growth (Warts) on the Genitals

► Your partner should use condoms during sex until you both have no more warts.

► Warts grow faster during pregnancy. If you have a lot of them, this can cause problems with childbirth. Talk with a health worker about this.

Sores on the Genitals (Genital Ulcers)

► If you have ever had an open sore on your genitals that was not treated, try to get a blood test for syphilis. Some countries have free testing programs.

► If you are pregnant, try to get a blood test for syphilis.

COMMON CAUSES OF SORES ON THE GENITALS

Most sores or *ulcers* on the genitals are sexually transmitted. It is difficult to know which disease is causing the sores because the ones caused by both syphilis and chancroid often look alike. For this reason, it is best to give medicines that cure both of these STIs when treating genital sores (see box on page 271).

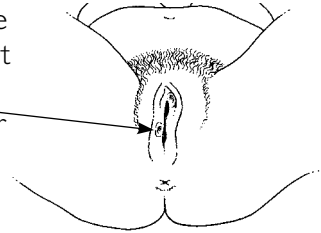
IMPORTANT *HIV, the virus that causes AIDS, can easily pass through a sore on the genitals during sex. To help prevent the spread of HIV, do not have sex when you have a sore, or when your partner has one.*

Syphilis

Syphilis is a serious STI that has effects throughout the body and can last for many years. It is caused by *bacteria* and can be cured with medicine if treated early.

Signs:

- The first sign is a small, **painless** sore that can look like a *pimple*, a flat, wet wart, or an open sore. The sore lasts for only a few days or weeks and then goes away by itself. But the disease continues to spread throughout the body.



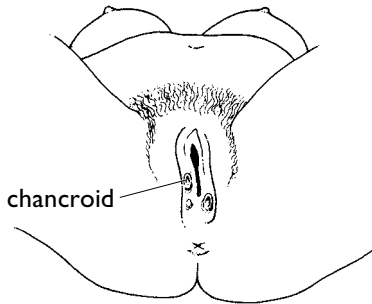
- Weeks or months later, you may have a sore throat, fever, rash (especially on the palms of the hands and soles of the feet), mouth sores, or swollen *joints*.

All of these signs go away by themselves, but the disease continues. Even if you have no signs, you can still pass syphilis to others. Without treatment, syphilis can cause heart disease, *paralysis*, mental illness, and even death.

Pregnancy and syphilis. A pregnant woman can pass syphilis to her unborn baby, which can cause it to be born too early, deformed, or dead. You can prevent this by getting a blood test and treatment during pregnancy. If a pregnant woman and her partner have blood tests that show they have syphilis, they should both be treated with benzathine penicillin, 2.4 million Units, by injection (IM), once a week for 3 weeks.

Chancroid

Chancroid is an STI caused by bacteria. It can be cured with medicine if it is treated early.

**Signs:**

- one or more soft, **painful** sores on the genitals or anus that bleed easily
- enlarged, painful glands (*lymph nodes, bubos*) may develop in the *groin*
- slight fever

Medicines for Genital Sores

These medicines will treat both syphilis and chancroid. You need to choose one of the medicines listed in the top box for syphilis AND one of the medicines listed in the bottom for chancroid. Avoid giving erythromycin and azithromycin together for genital sores.

Medicine**How much to take****When and how to take**

benzathine penicillin.....	2.4 million Units	inject into muscle, one time only
or doxycycline.....	100 mg.....	by mouth, 2 times a day for 14 days
<i>(do not use if pregnant and avoid using it if breastfeeding)</i>		
or tetracycline.....	500 mg.....	by mouth, 4 times a day for 14 days
<i>(do not use if pregnant or breastfeeding)</i>		
or erythromycin.....	500 mg.....	by mouth, 4 times a day for 15 days
<i>(only use this if you are pregnant or breastfeeding and allergic to penicillin)</i>		

AND

azithromycin.....	1 gram.....	by mouth, one time only
or ciprofloxacin.....	500 mg.....	by mouth, 2 times a day for 3 days
<i>(do not use if pregnant or breastfeeding or under age 16)</i>		
or erythromycin.....	500 mg.....	by mouth, 4 times a day for 7 days
or ceftriaxone.....	250 mg.....	inject into muscle, one time only

Sores on the genitals should be kept clean. Wash them every day with soap and water, and dry carefully. Do not share the cloth you use to dry yourself with anyone else.

► A person with HIV can get herpes infections all over the body that take much longer to go away.

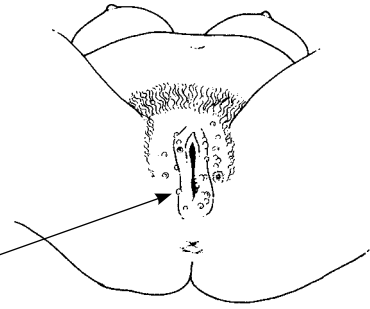
Genital herpes

Genital herpes is an STI caused by a virus. It produces sores on the genitals or in the mouth that come and go for months or years. There is no cure for herpes, but there is treatment to make you feel better.

Not all herpes sores on the mouth are spread by sex. Children and adults often get sores on their mouths caused by a different herpes virus when they have a cold or fever.

Signs:

- a tingling, itching, or hurting feeling of the skin in the genital area or thighs
- small blisters that burst and form painful, open sores on the genitals



The first time you get herpes sores, they can last for 3 weeks or more. You can have fever, headache, body ache, chills, and swollen lymph nodes in the groin. The next infection will be milder.



Pregnancy and herpes. A pregnant woman who is infected with herpes for the first time and has sores at the time of the birth can pass the disease on to her baby. This can cause dangerous problems for the baby. Try to give birth in a hospital. They may be able to do an operation to get the baby out, or give the baby special medicines when it is born.

To help you feel better:

- Wrap a piece of ice in a clean cloth. Put it directly on the sore for 20 minutes as soon as you feel the sore.
- Make a *compress* by soaking some cloth in clean water that has black tea in it and put it on the sore.
- Sit in a pan or bath of clean, cool water.



A compress can make genital sores feel better.

- Mix water and baking soda or corn starch into a paste and put it on the sore area.
- You can also try the suggestions on page 278.

Treatment for herpes

For a first-time infection, take 200 mg acyclovir, by mouth, 5 times a day for 7 days, **or** 400 mg, 3 times a day for 7 days.

If you have had a herpes infection before, start taking the same medicine as soon as you notice any signs of tingling, burning, or sores, but for only 5 days.

If you have had more than 6 herpes outbreaks in 1 year, take 400 mg acyclovir by mouth, 2 times a day every day for 1 year. Then stop to see if the medicine is still needed.

Although acyclovir cannot cure herpes, it makes the infection milder, less painful and shorter.

► *Wash your hands with soap and water after touching the sores.*



► *Be careful not to touch your eyes or your children's eyes.*

A herpes infection in the eyes is very serious.

► *Try not to have sex any time you have herpes sores. You can easily spread herpes to your sex partner.*

Complications of STIs



other causes of pain in the lower belly

► PID does not always cause pain.

► To prevent PID, always treat STIs correctly. Be sure to:

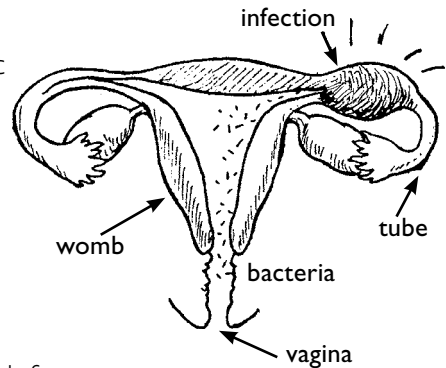
- take all the medicine.
- make sure your partner gets treated.
- stop having sex until you and your partner have finished all the medicine and your signs have gone away.

PELVIC INFLAMMATORY DISEASE (PID)

Pelvic Inflammatory Disease or PID is the name for an infection of any of the reproductive parts in a woman's lower abdomen. It is often called a 'pelvic infection'.

Pelvic infection can happen if you have had an STI that was not cured, especially gonorrhea or chlamydia. It can also happen if you recently gave birth, had a *miscarriage* or abortion, or had an IUD inserted.

The germs that cause pelvic infection travel up from the vagina through the cervix and then into the womb, tubes, and ovaries. If the infection is not treated in time, it can cause *chronic* pain, serious illness, or death. An infection in the tubes can leave *scars* that make you infertile or at risk for a pregnancy outside the womb (tubal or ectopic pregnancy).



Signs (you may have one or more of these):

- pain in the lower belly
- high fever
- you feel very ill and weak
- green or yellow bad-smelling discharge from the vagina
- pain or bleeding during sex



Treat pelvic infection right away.

Treatment:

Start taking the medicines on the next page right away. If you do not feel better after 2 days and 2 nights (48 hours), or if you are very ill with a high fever or vomiting, or if you are pregnant, recently had an abortion or gave birth, **go to a health center or hospital immediately**. You may need strong medicines in the vein (IV).

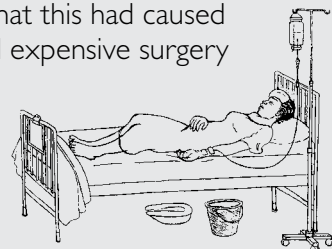
Medicines for Pelvic Infection (PID)

This infection is usually caused by a mix of germs, so more than one medicine must be used to cure it.

Medicine	How much to take	When and how to take
ceftriaxone.....	250 mg.....	inject into muscle as a single dose
or spectinomycin.....	2 grams (2000 mg).....	inject into muscle as a single dose
AND		
doxycycline.....	100 mg.....	by mouth, 2 times a day for 10 days <i>(do not use doxycycline if you are pregnant and avoid using it if you are breastfeeding)</i>
or azithromycin.....	1 gram (1000 mg).....	by mouth as a single dose, <i>(take azithromycin with food, safe during pregnancy)</i> and a second dose 1 week (7 days) later
or erythromycin.....	500 mg.....	by mouth, 4 times a day for 14 days <i>(safe during pregnancy)</i>
or amoxicillin.....	500 mg.....	by mouth, 3 times a day for 14 days <i>(amoxicillin can be used if you are pregnant and azithromycin and erythromycin are not available)</i>
AND		
metronidazole.....	400 to 500 mg.....	by mouth, 3 times a day for 10 days <i>(avoid metronidazole in the first 3 months of pregnancy)</i>
Also treat the woman's partner with the medicines in the box for 'AT RISK for an STI' on page 268.		
IMPORTANT Do not drink alcohol during the time you are taking metronidazole.		

My husband taught school in a town far away from our village and returned home to visit me only a few times a year. After one of his visits, I became very ill with fever and a terrible pain in my abdomen. I did not know what was causing my sickness.... I tried remedies from the local healer, but they did not work. I did not want to leave my village to look for help because I did not want to leave my children, and I did not have much money. I got so sick that my neighbors thought I was going to die. So they took me in a truck to the nearest hospital, 90 miles away.

The doctor at the hospital said I had gonorrhoea, and that this had caused a bad infection inside my abdomen. He said I would need expensive surgery and many days of medicines to cure me. He also said I would probably not be able to have more children. Now, I only wish I had taken the right medicines when I first became sick.



—Central African Republic

► Early treatment of STIs can prevent complications.

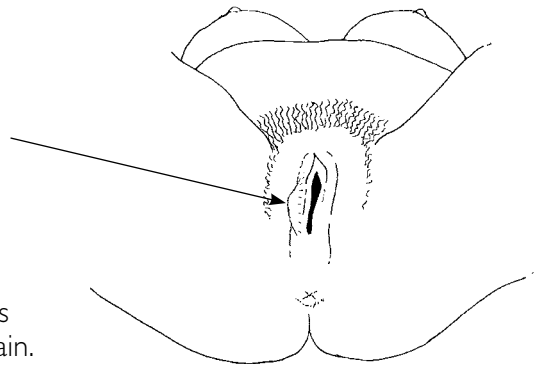
In addition to PID, STIs can cause other problems for a woman. A woman with an STI that is not cured is more likely to have problems with infertility (see page 229) and tubal pregnancies (see page 73). STIs can also cause:

SWOLLEN VAGINA (BARTHOLIN GLAND INFECTION)

Just inside the vagina there are 2 small pockets of skin called 'glands'. They make a liquid that helps to keep the vagina wet. Sometimes germs get inside, and one or both glands become infected.

Signs:

- Swollen, hot, painful vaginal fold that is darker in color. Usually it happens on one side only.
- Sometimes there is swelling with no pain.



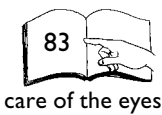
Although not always caused by an STI, this infection often happens when a woman has gonorrhea or chlamydia.

Treatment:

1. Soak a cloth in clean, hot water and place it on the swelling. Do not make it so hot that you burn yourself. Do this as often as you can until the swelling opens and pus comes out, or until the swelling goes down.
2. Also, you and your partner both need to take medicines for gonorrhea and chlamydia. See the medicine chart on page 268.
3. If the area is painful and stays swollen, see a trained health worker who can cut it open and drain out the pus.

PROBLEMS IN NEWBORN BABIES

If a woman has gonorrhea or chlamydia (see page 267), she may pass it to her baby during birth. The infection can get into the baby's eyes and cause blindness. To prevent infection and blindness, put antibiotic ointment in the baby's eyes right after birth. Chlamydia can also cause pneumonia in newborn babies.



care of the eyes



HIV INFECTION

HIV, the virus that causes AIDS, is transmitted most often during unsafe sex. It is spread when semen, fluid from the vagina, or blood of someone already infected with HIV gets into the body of another person. Genital sores make it easy for the virus to pass from one person to another. Semen and discharge from someone with an STI and HIV contain a large amount of HIV (see page 262).

Women can get HIV more easily than men during sex. **You can get HIV from someone who looks completely healthy.**

There is no treatment that can cure HIV, but treatment can lengthen and improve the life of someone with HIV. Practice safer sex to protect yourself and others from spreading HIV. If you think you have had unsafe sex with someone who might have HIV, see page 521.

HEPATITIS B (YELLOW EYES)

Hepatitis B is a dangerous infection caused by a virus that harms the *liver*. Hepatitis B is spread when the blood, saliva (spit), fluid from the vagina, or semen of someone already infected with the virus gets into the body of another person. It spreads very easily from one person to another, especially during sex.

Signs:

- fever
- no appetite
- tired and weak feeling
- yellow eyes and/or skin
- pain in the belly
- dark urine and whitish stools
- no signs at all



Treatment:

There is no medicine that will help. In fact, taking medicine can hurt your liver even more.

Most people get better from hepatitis B. A small number of people may have liver problems that never go away, including cancer. Rest as much as you can, and eat foods that are easy to digest. **Do not drink any alcohol for at least 6 months.**

Pregnancy and hepatitis. If you have any of these signs when you are pregnant, see a health worker. You may be able to get a vaccination to prevent your baby from getting hepatitis B.

Other STIs



HIV and
AIDS

► If your partner has had some of these signs, do not have sex until he is completely well. Ask a health worker if you can get vaccinated.



cancer



vaccine for
hepatitis B

How to Feel Better

To cure yourself of an STI, you must take the medicine described in this chapter. To get relief from the discomfort of an STI:

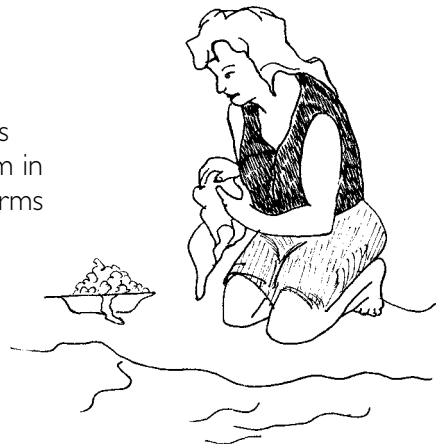
1. If you have sores or itching of the genitals, sit in a pan of clean, warm water for 15 minutes, 2 times a day. Do this until you feel better. If you have a yeast infection, you can add lemon juice, vinegar, yogurt (without sugar), or sour (fermented) milk to the pan of warm water.



2. Do not have sex again until you feel better.

3. Try to wear underclothes made of cotton. This lets air in around your genitals which will help you heal.

4. Wash your underclothes once a day and dry them in the sun. This kills the germs that cause infection.



5. Take a mild pain medicine.

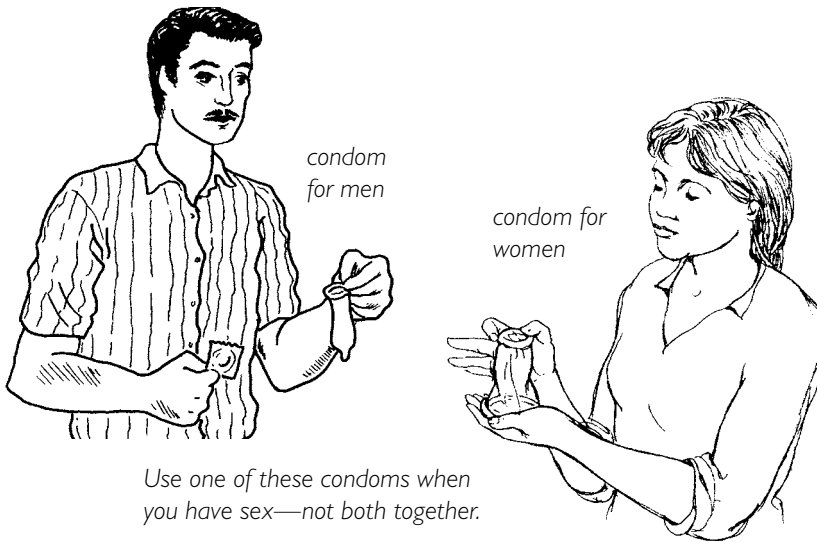


medicines for pain

6. If you have genital ulcers and it is painful to pass urine, pour clean water over your genital area while you urinate. Or sit in a pan of cool water while you urinate.

HOW TO PREVENT STIs

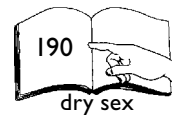
- Practice safer sex (see the chapter on “Sexual Health”).
- Use condoms every time you have sex. To learn how to encourage your partner to use condoms, see page 192.



- If your partner will not use a condom, a diaphragm gives some protection against some STIs, especially gonorrhea and chlamydia (see page 205).
- Wash the outside of your genitals after sex.
- Pass urine after having sex.
- Do not douche, or use herbs or powders to dry out the vagina. Douching (and washing out the vagina with soap) works against the natural wetness the vagina makes to stay healthy. When the vagina is dry, it can become irritated during sex, making it more likely to be infected with HIV and other STIs.
- You and your partner can have oral sex or other sexual touch instead of intercourse.

Working for Change

► Preventing STIs can protect you and your partner from serious illness and infertility.



Female and male condoms will:

- protect you from STIs including HIV.
- protect the health of your partner.
- prevent unwanted pregnancy.

Do not have sex when you or your partner has signs of an STI.

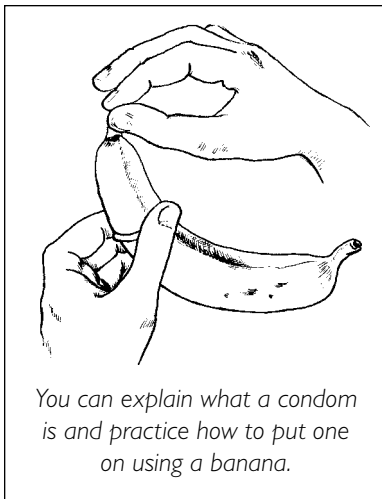
Use
condoms!



WORKING FOR SAFER SEX IN THE COMMUNITY

Sexually transmitted infections are a health problem for the whole community. To help prevent STIs in your community you can:

- teach men and women about the risks to their health and the health of their families from STIs. Find opportunities when women are together in groups, such as at the market or waiting at health centers, to explain how STIs are passed, and how to prevent them.
- work with others to find ways to convince men to wear condoms. Practice in a group what to say to your partner to get him to use a condom.



- make female and male condoms available in your community. Work to make sure that free or cheap condoms are available at local shops, bars, and cafes as well as from health workers and at health centers.
- train men to teach other men in the community about using condoms.
- organize a community group to talk about health problems and include STIs, HIV, and AIDS. Explain how preventing STIs will also prevent the spread of HIV infection and AIDS.
- support education about sex in your local schools. Help parents understand that teaching children about STIs, including HIV, helps the children make safe choices later on when they start having sex.
- encourage teenagers to teach their friends about STIs, including HIV.

After a health worker came to speak with a group of women in our community about STIs and AIDS, we began talking about our lives. Some of the women began by saying they did not have anything to worry about. But the more we talked the more we realized that every woman and every man should worry about STIs and AIDS. We thought about how to get men to use condoms and decided that we needed to educate the entire community about the dangers of



STIs and AIDS and how to prevent them. We organized a play and got people from the community to act in it. We created a special character called “Commander Condom” to come to the rescue with condoms. Everyone came to watch the play. People enjoyed it and they also learned. Now the men make jokes about “Commander Condom,” but they are also more willing to use them.

— *Oaxaca, Mexico*

To the health worker:

- Find out from your local health center, hospital, or Ministry of Health what medicines work best to treat STIs in your community.
- Try to start a community pharmacy so that it will be easier for people to get medicines, both female and male condoms, and spermicides.
- Talk to the people you see who have an STI. Give them good information on how to cure their STI, how to keep from infecting others, and how to keep from getting an STI again. Make sure their partners also get treatment.
- Include information about preventing STIs and HIV in family planning programs.
- Do not judge or blame those who come to you for help with an STI.
- Respect the privacy of those with STIs or other health problems. Never talk about their problems with others.

See the chapter on “Sexual Health,” page 181, for information about:

- sex and *gender roles*
- harmful beliefs about women's sexuality
- how to have safer sex
- feeling pleasure from sex

Also see the chapter on “Sex Workers,” page 340.