Chapter 18
Sexually transmitted infections

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What are sexually transmitted infections?

Sexually transmitted infections (STIs) are infections that are passed from one person to another during sex. Men, women, and children can all be affected by STIs. Some common STIs are gonorrhea, chlamydia, trichomonas, syphilis, chancroid, herpes, hepatitis B, and HIV.

If a person has any of these signs, he or she may have an STI:

- bad-smelling discharge
- itching genitals
- painful genitals
- sores or blisters on the genitals
- pain in the pelvis or pain during sex

It is also very common to have an STI and have no signs at all. Many women and men have STIs but do not know it.

Untreated STIs can lead to very serious health problems, so anyone with an STI needs treatment as soon as possible. A woman with an untreated STI can develop a tubal pregnancy (see page 113), cancer of the cervix, or can become infertile (see page 30). An untreated STI in a pregnant woman can cause a baby to be born too early, too small, blind, sick, or dead. A person who has one STI can more easily get another — including HIV.

This chapter lists the different STIs a woman can have by describing the signs of each infection, then explains how to treat and prevent them. It also describes some other infections of the genitals that are common but are not transmitted sexually.
How STIs are passed

To get an STI, a person must have close contact with someone who is already infected. The contact can be sexual intercourse (sex with the man’s penis inside the woman’s vagina), anal sex (penis in anus), or less often, oral sex (mouth on genitals or anus). STIs can sometimes pass from just rubbing an infected penis or vagina against another person’s genitals. Many people get STIs from people who have no signs of being infected.

STIs can be prevented by not having sex with anyone who has an infection. Many STIs can be prevented by using condoms. To learn about preventing STIs, see pages 334 and 336.

Babies can also be infected with an STI through the mother’s blood during pregnancy or during birth when they pass through the vagina.

Treating STIs

Most STIs will get better or go away if the person with the STI gets treated right away. But many women do not get treatment. A woman may not be able to afford treatment. She may feel embarrassed or ashamed. She may be afraid that her husband will think she had sex with someone else.

For these reasons, the way you care for a woman who may have an STI is very important. If a woman comes to you for help, do not tell anyone else what she told you. She may not come to you for help again. Do not criticize her. Answer her questions honestly, and as best as you can. If you cannot treat her infection, help her find low-cost care nearby.

Remember:

- Treat STIs as soon as possible. Early treatment for STIs costs less and is more effective than later treatment.
- Treat partners too. Treating a woman for an STI will not help if her partner is still infected.
- Make sure the woman takes all the medicine she is given. Even if the signs of infection go away, a person must take all the medicine to cure the infection completely.
- **Note:** All the medicines listed in this chapter are safe to take during pregnancy or while breastfeeding unless we include a warning that says they are not safe. Women who are not pregnant or breastfeeding may be able to take other, more effective drugs. See the book *Where Women Have No Doctor* or talk to a pharmacist to find out about other drugs.
Discharge from the vagina

It is normal for women to have some discharge (wetness) from the vagina. This discharge is the way the vagina cleans itself. The discharge changes during the days of the monthly cycle and also during pregnancy.

But a major change in the amount, color, or smell of the vaginal discharge can mean there is an infection of the genitals. This infection could be an STI, or could be another type of infection.

STIs that might cause discharge from the vagina are chlamydia, gonorrhea, trichomonas, or a vaginal infection that is not sexually transmitted, such as PID, yeast or BV.

Chlamydia and gonorrhea (clap, the drip, gono, VD)

Chlamydia and gonorrhea are both serious illnesses. But they are easy to cure if they are treated early. If they are not treated, they can lead to severe infection or infertility in women and men.

Signs in a woman

Signs can start weeks or months after having sex with an infected person.

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

Both men and women can have chlamydia or gonorrhea with no signs. And even a person with no signs can pass chlamydia or gonorrhea to another person.

Signs in a man

Signs usually start 2 to 5 days after a man has sex with an infected person.

- discharge from the penis
- pain or burning while urinating
- pain or swelling in the testicles (balls)
- or no signs at all
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Treatment

If possible, every pregnant woman should be tested for chlamydia and gonorrhea. If the test shows she has one or both of these infections, she and her partner should be treated. But if it is not possible for her to be tested, and she or her partner have signs of the infection, they should be treated anyway. It is better to treat someone who might be infected — even if you do not know for sure.

To treat chlamydia

- give 1 gram azithromycin by mouth, 1 time only
- give 500 mg erythromycin by mouth, 3 times a day for 7 days
- give 500 mg amoxicillin by mouth, 3 times a day for 7 days

To treat gonorrhea

- inject 250 mg ceftriaxone in the muscle, 1 time only
- give 400 mg cefixime by mouth, 1 time only

It is very common to have chlamydia and gonorrhea at the same time. If you are not sure whether the woman has chlamydia or gonorrhea, or both, treat her and her partner for both infections.

Note: In the past, penicillin was used to cure gonorrhea. Now, in many places, penicillin will not kill gonorrhea anymore because of drug resistance (see page 468). Find out which drugs work best in your area.

Problems in babies from chlamydia and gonorrhea

Women who have chlamydia or gonorrhea when they give birth can pass these infections on to their newborn babies. This can cause eye infection leading to blindness, or serious lung problems. A chlamydia or gonorrhea infection in the eyes usually causes a thick yellow discharge from the eyes within the first month. To prevent eye infection in babies, put antibiotic ointment into each baby’s eyes after birth (see page 260).

If a baby has a chlamydia infection

- give 30 mg erythromycin syrup by mouth, 3 times a day for 14 days

If a baby has a gonorrhea infection

- inject 125 mg ceftriaxone in the thigh muscle, 1 time only if the baby is less than 7 days old
- * inject 225 mg ceftriaxone in the thigh muscle, 1 time each day for 7 to 10 days

If you cannot test to find out which disease is causing the infection, give medicines for both.
Pelvic infection (pelvic inflammatory disease, or PID)
Pelvic inflammatory disease is a serious infection of a woman’s womb, tubes, or ovaries.

A pelvic infection can happen when a woman has an STI, usually chlamydia or gonorrhea, that is not treated. It can also happen to a woman after an abortion or after a birth, when germs get into the woman’s womb, tubes, or ovaries and cause infection.

If a pelvic infection is not treated, it can cause long-term pain for the woman. Women who have had pelvic infections have a greater chance of having a tubal pregnancy or of becoming infertile. Pelvic infection can even lead to death.

Signs of pelvic infection
• pain in the lower belly
• high fever (more than 38°C or 100.4°F)
• feeling very ill or weak
• bad-smelling green or yellow discharge from the vagina
• pain or bleeding during sex

To treat pelvic infections
A woman with a pelvic infection should take 3 medicines at once. One medicine to treat chlamydia, one to treat gonorrhea, and another antibiotic — metronidazole:

For chlamydia
• give 1 gram azithromycin...........................................by mouth, 1 time, and then again after 7 days
  or
• give 500 mg erythromycin...........................................by mouth, 4 times a day for 14 days
  or
• give 500 mg amoxicillin ...........................................by mouth, 3 times a day for 14 days

AND for gonorrhea
• inject 250 mg ceftriaxone...........................................in the muscle, 1 time only
  or
• give 400 mg cefixime...........................................by mouth, 1 time only

AND to kill any other germs that cause pelvic infection
• give 400 to 500 mg metronidazole...........................................by mouth, 3 times a day for 14 days

Do not take metronidazole in the first 3 months of pregnancy.
Do not drink alcohol during the time you are taking metronidazole.

If the woman is not better after 2 days and 2 nights (48 hours), or if she has high fever or vomiting, she should go to a medical center right away. She needs strong IV medicines (in the vein).
Trichomonas (trich)

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

Trichomonas is not dangerous, but it can irritate the vagina, which can make it easier for a woman to get other STIs including HIV.

**Signs of trichomonas**
- bubbly gray or yellow discharge
- bad-smelling discharge
- red and itchy genitals and vagina
- pain or burning while urinating

To help the woman feel better, she can take a **sitz bath**. She should sit in a pan of clean, warm water for 15 minutes as often as possible. This is soothing to the genitals and will speed healing. She should not have sex until she and her partner are finished with treatment and all the signs are gone.

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**To treat trichomonas**

If the woman is pregnant:

She should wait until after the end of the third month for treatment. This drug is not safe in the first 3 months of pregnancy. After the third month:

- give 400 to 500 mg metronidazole................. by mouth, 2 times a day for 7 days

Also treat the woman’s partner with 2 g metronidazole by mouth, 1 time only.

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Yeast (candida, white discharge, fungus)

Yeast is not usually sexually transmitted, but it is a very common vaginal infection. It is especially common in pregnant women or women who are taking antibiotics or birth control pills. Men can also get yeast infections.

**Signs of yeast**
- itchy genitals
- white, lumpy, sticky discharge
- bright red skin outside and inside the vagina that sometimes bleeds
- a burning feeling when urinating
- a smell like mold or bread dough from the vagina
Treatment
Yeast is not dangerous, but it is best to treat yeast in a pregnant woman before the birth, or the baby can get thrush (see page 290). Yeast can often be cured using natural remedies.

Natural remedies for yeast infection
Mix vinegar or yogurt in a pan of clean warm water. The woman should sit in this liquid 2 times a day until she feels better.

or she can also try making this mix:
Mix 3 tablespoons of vinegar with 1 liter (quart) of boiled cool water.

If natural remedies do not work, try one of these medicines:

To treat yeast infection
soak a clean piece of cotton in gentian violet 1%:
• insert the cotton into the vagina, every night for 7 nights. Remove the cotton each morning.

or
• put one 200 mg miconazole insert or cream high in the vagina, each night for 7 nights

or
• put one 100,000 Units nystatin insert or cream high in the vagina, each night for 7 nights

or
• put two 100 mg clotrimazole inserts or cream into the vagina, each night for 7 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.
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Bacterial vaginosis (BV, gardnerella)
Bacterial vaginosis is not sexually transmitted. It is not usually dangerous, but it can cause pregnant women to have their babies too soon or get an infection after the birth.

**Signs of bacterial vaginosis**
- more discharge than usual
- a bad, fishy smell from the vagina, especially after sex
- mild itching

**To treat bacterial vaginosis**
*If the woman is pregnant:*
She should wait until after the end of the third month. This drug is not safe in the first 3 months of pregnancy. After the third month:
- put one 500 mg metronidazole insert ...................... high in the vagina, every night for 7 nights
- or
  - give 400 to 500 mg metronidazole............................ by mouth, 2 times a day for 7 days

Also give the same treatment to the woman's partner.

**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 and see if the itching goes away.
Sores on the genitals (genital ulcers)

Most sores on the genitals are sexually transmitted. (There can be other causes of sores on the genitals — like boils or injuries.)

Sores on the genitals should be kept clean. Wash them with soap and water. Dry them carefully. Wash any cloth that you dry them with before you use it again.

**WARNING!** Other infections, especially HIV, can easily pass through these sores on the genitals during sex. The best way to prevent passing infections from one person to another is to not have sex until your or your partner’s sores have healed.

Syphilis

Syphilis is a serious STI that affects the whole body. It can last for many years, getting worse and worse. Syphilis can be cured if it is treated early.

**Signs of syphilis**

1. The first sign is a sore that may look like a pimple, a blister, or an open sore. It appears 2 to 5 weeks after sexual contact with a person who has syphilis. This sore is full of germs, which are easily passed on to another person. The sore does not hurt, and if it is inside the vagina, a woman may not know she has it. But she can still infect anyone she has sex with. The sore lasts for only a few days or weeks and then goes away. But the infection is still there and continues to spread throughout the body.

2. Weeks or months later, the infected person may get a sore throat, mild fever, mouth sores, swollen joints, or a rash — especially on the hands, feet, belly, and sides. During this time the person can pass the disease to others by simple physical contact like kissing or touching, because the syphilis germs are on the skin.

3. All of these signs usually go away by themselves, but the disease continues. If a person with syphilis does not get treatment early, the syphilis germs can cause heart disease, paralysis, mental illness, and death.
Syphilis and pregnancy
If a woman has syphilis when she is pregnant, her baby can be born too early, deformed, or dead. If possible, every pregnant woman should get a blood test to check for syphilis — especially if she has ever had sores on her genitals.

To treat syphilis
- inject 2.4 million Units benzathine benzylpenicillin...in the muscle, 1 time only

or

if the person is allergic to penicillin:
- give 500 mg erythromycin................................................by mouth, 4 times a day for 14 days

(Erythromycin is not always effective against syphilis. You may need to treat the woman with tetracycline after she finishes breastfeeding.)

If the person has had syphilis for 2 years or more, get medical help. She needs different medicines. Also give the same medicines to the woman’s partner.

WARNING! It is very hard to tell the difference between syphilis and chancroid (see page 331). If you are not sure whether the woman has syphilis or chancroid, or both, you should treat for both. Also treat for both if both are common in your area.
Chancroid

Chancroid is an STI that causes sores on the genitals. It is easily confused with syphilis.

**Signs of chancroid**

- one or more soft, painful sores on the genitals or anus that bleed easily
- enlarged, painful glands (buboes) in the groin
- slight fever

**To treat chancroid**

- give 500 mg erythromycin by mouth, 4 times a day for 7 days
- or
- inject 250 mg ceftriaxone in the muscle, 1 time only

Genital herpes

Genital herpes is a virus that causes painful blisters which burst and turn into sores on the skin. Herpes is spread when the sore on one person touches another person’s skin — usually during sexual intercourse. Genital herpes usually affects the genitals or anus. Rarely, the sores may spread to the mouth during oral sex.

- **Note:** Some sores on the mouth — called cold sores — are caused by another type of herpes. These sores may be passed from the mouth to the genitals during oral sex.

**Signs of herpes**

- tingling, itching, or pain on the genitals
- small blisters that burst and form painful open sores on the genitals

Once a person has the virus, he or she can get sores many times. The first time a person has herpes sores, they can last 3 weeks or more. The person may also have fever, headaches, body aches, chills, and swollen lymph nodes near the genitals. The next infections are usually not as bad as the first one.

To stop the spread of herpes, people should not have sex when they have a sore. Condoms may prevent the spread of herpes, if the condom is covering the sore. Condoms for women may work even better because they cover more of the genitals.
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Treatment

To make the sores feel a little better:

- Put ice on the sore as soon as you feel it. This may stop the sore from getting worse.
- Soak a cloth in cooled black tea or tea made of cloves. Hold the wet cloth on the sores.
- Sit in a pan or bath of clean cool water.
- Mix water and baking soda or cornstarch into a paste and put it on the sore area.
- Apply witch hazel or a local plant that makes the skin dry.

There is no cure for herpes but these medicines may lessen the length and pain of outbreaks.

For a first herpes outbreak

- give 400 mg acyclovir ............................................ by mouth, 3 times a day for 7 days

For continuing herpes outbreaks

- give 400 mg acyclovir ............................................ by mouth, 3 times a day for 5 days

For a woman with more than 6 herpes outbreaks a year

- give 400 mg acyclovir ............................................ by mouth, 2 times every day for 1 year.
  Then stop and see if the medicine is still needed.

For a pregnant woman who has had herpes outbreaks in the past,

- give 400 mg acyclovir ............................................ by mouth, 2 times every day during the last month of pregnancy.

To help with pain

- give 500 to 1000 mg paracetamol.............. by mouth, every 4 hours

A person with a lot of stress or other health problems is likely to get sores more often. So if possible, people with herpes should get plenty of rest and eat healthy food.

WARNING! Herpes is very dangerous for the eyes and can cause blindness. After touching a herpes sore, always wash your hands with soap and water.

Herpes and pregnancy

It is possible for herpes to be passed from mother to baby. This usually happens during delivery if the mother has herpes sores on the vagina at the time of birth. A first-time infection during pregnancy is even more likely to pass to the baby. For this reason, a woman in labor with an active herpes sore should give birth in a hospital, usually by caesarean surgery. The risk of passing herpes during delivery can be reduced or prevented by treating a first-time herpes outbreak immediately with acyclovir, whenever during pregnancy it occurs. A woman who already has had herpes can use acyclovir daily during the last month of pregnancy.
**HPV (genital warts)**

HPV is a virus that can cause warts to grow on the genitals or anus. It is also possible to have warts and not know it, especially if they are growing inside the vagina or inside the tip of the penis. The warts are not dangerous, but they can be uncomfortable.

**Signs of HPV**

- Itching.
- Small, dry, white or brown bumps on the genitals or anus. The bumps have a rough surface and do not hurt.

**To test for HPV:** touch the warts with a mixture of plain vinegar and water. The warts will turn a whitish color if they are caused by HPV.

**WARNING!** Large, flat, wet growths that look like warts are not usually HPV. They may be caused by syphilis. Anyone with these growths should be tested for syphilis and not use the following treatment.

**Treatment**

1. To protect the healthy skin, put petroleum gel (*Vaseline*) or another greasy ointment on the skin around each wart.

2. With a small stick, put a little trichloroacetic acid (TCA) 80% to 90% solution or bichloroacetic acid (BCA) on the wart. Leave the acid on until the wart turns white. Be careful not to spill the acid on the healthy skin. Wash the acid off after 30 minutes or if the burning feeling is very painful.

   The acid should burn the wart off and leave a painful sore where the wart used to be.

   Usually, you must repeat the treatment once a week for a few weeks before the wart goes away completely. Keep the sore clean and dry until it heals. The woman should also not have sex until the sore heals.

   The types of HPV that cause cancer in a woman’s cervix are not the same types of HPV that cause warts. See page 380 to learn how to test a woman’s cervix for HPV.

   A vaccine called Gardasil is now available which protects against the most dangerous types of HPV, as well as the HPV viruses that cause most genital warts. The vaccine is a series of 3 injections that can be given to young women and men between the ages of 9 and 26. It should not be given during pregnancy, and cannot be used to treat a woman who already has HPV.
STIs that affect the whole body

HIV infection and AIDS

HIV is a virus that attacks the immune system. This is the part of our bodies that fights disease. HIV infection makes it more difficult for our bodies to fight off illness, which we are usually doing all the time. People with HIV can become sick very easily with infections such as colds, flu, diarrhea, pneumonia, malaria, and tuberculosis. Cancers and malnutrition are also worse for people with HIV. HIV cannot be cured, but it can be controlled with medicines. A person who gets treatment, eats well, and cares for her body, mind, and spirit can live a long and healthy life.

HIV spreads when the infected blood, breast milk, wetness from the vagina, or semen of someone who has HIV gets into another person’s body. This happens mainly through:

- sex with someone who has HIV.
- pregnancy or birth, if the mother has HIV.
- dirty needles, instruments or cutting tools.

In places where blood has not been tested for HIV, people can also get HIV from a blood transfusion. Sometimes when mothers have HIV, it can spread to their babies through breast milk (see page 293).

Signs of HIV and AIDS

People with HIV may not have any signs for a long time, up to 10 years. The only sure way to know if someone has HIV is with an HIV test. This is important because even without signs of illness, people can still spread HIV to others.

AIDS is the last stage of untreated HIV infection. Someone with AIDS has lost her ability to fight infections so much that she is often ill and unable to get well, and may have illnesses no one usually gets without HIV, such as Kaposi’s Sarcoma (a cancer).

To prevent the spread of HIV, men and women should:

- be tested for HIV, and if HIV positive, start treatment.
- get other infections treated.
- use condoms with any sex partner who has HIV or whose HIV status they do not know.
- not use syringes, needles, or other tools that could be dirty. Only cut skin with sterilized tools (see page 59). This includes the tools used for piercings, acupuncture, tattoos, scarring, or circumcision.
Staying healthy with HIV

When a woman’s immune system is weakened by HIV, it is very important for her to prevent and treat other infections.

- The most important thing is to begin taking ART – medicines that control HIV.
- If she has any signs of other STIs, like itching, a rash, a strange discharge or sores around the genitals, she should see a health worker.
- She needs to eat more food than a person without HIV, and have a healthy diet (see page 33). Taking a multivitamin pill may also help her.
- She needs to protect herself from tuberculosis (TB). People with HIV die more from TB than any other illness. A woman with HIV should stay away from people with active TB, and if she develops signs of TB, she should see a health worker right away. Signs of TB are coughing, night sweats, fever, or losing a lot of weight.
- If she does not have safe water, she should boil or disinfect her drinking water to avoid diarrhea and other problems.

Women with HIV also need emotional support. Encourage them to seek support from people they trust. They can learn a lot from others who are living with HIV.

A woman with HIV who is starting to become ill (for example with mouth sores, weight loss, rashes, or many colds), or who lives in an area with a lot of malaria or other serious infections, can take cotrimoxazole every day to protect her from these infections and help her stay healthy longer. See page 481.

Medicines that control HIV

Medicines called antiretroviral therapy, or ART, can make people with HIV much healthier and help them live much longer. These medicines also help prevent HIV infection for a baby during pregnancy and labor.

ART must be taken every day at the same times to keep working well. If a woman stops taking it, her HIV will grow strong enough to make her ill again. If she later restarts taking ART, her HIV may be more difficult to treat.

There are various medicine combinations used as ART. More information on using ART medicines starts on page 496.

Midwives can learn how to support people taking ART, organize to increase access to these medicines, educate men and women to stop the spread of this disease, and fight the stigma of HIV.
Hepatitis B and C

Hepatitis is an infection of the liver caused by several viruses. Two kinds, Hepatitis B and C, can be spread during sex or at other times if the blood or other body fluids from an infected person get into the body of a person who is not infected. Body fluids include blood, spit, wetness from the vagina, and semen. It can also spread from a pregnant woman to her baby.

**Signs of hepatitis (including hepatitis B and C)**

- no appetite
- tired and weak feeling
- yellow eyes and sometimes yellow skin (especially the palms of the hands and soles of the feet)
- pain in the belly or nausea
- brown, cola-colored urine, and stools that look whitish
- or no signs at all

**Treatment**

There are now medicines that can treat hepatitis B and C, and sometimes even can cure hepatitis C. Get tested at a health center and find out what medicines may be available.

People with hepatitis may feel better sooner if they rest, eat vegetable broths, soups and foods that are easy to digest, and do not drink any alcohol. Ginger drinks may help control nausea and vomiting.

**Hepatitis and pregnancy**

If a woman has signs of hepatitis while she is pregnant, seek medical advice. The baby will need vaccinations after birth to prevent infection with Hepatitis B.

**Teaching women how to prevent STIs**

Women should know that any sex partner may have an STI. A man has a much greater chance of having an STI if he has sex with other partners without using condoms.

Testing is the only sure way to know if a person has an STI. Find out if there is affordable STI testing in your area, and see page 379 to learn about testing you can do yourself.

The surest way for a woman to avoid getting an STI is for her to avoid having sex with anyone who might be infected. Or she can use condoms (for men or women) when she does have sex. Condoms protect very well against most STIs, although there is always some chance of getting an STI even with a condom.

Midwives can help protect women from HIV and hepatitis B by sterilizing any syringes or other tools used during birth or invasive procedures. See page 59.
Midwives can teach a woman these ways to protect herself:

- Use a condom every time she has sex.
- Do not have sex with someone who has signs of an STI (although many STIs spread even when the person has no signs).
- Do not douche or use herbs or powders to dry the vagina. When the vagina is dry or irritated by douches, sex can cause tiny cuts in the skin, making the woman more likely to be infected by HIV or other STIs.

If a man will not use a condom, these methods may give a woman a little protection from getting an STI:

- Use a diaphragm.
- Wash the outside of the genitals after sex.
- Urinate right after sex.

A woman and her partner can also have oral sex or other sexual touch instead of intercourse (see page 312).

How to help stop STIs in your community

Here are some ideas to help prevent the spread of STIs in your community:

- Talk to the women you care for about STIs. Some women may feel embarrassed to talk about them, but knowing more may save their lives.
- During prenatal checkups, ask women about unusual discharge or sores on the genitals, or offer to examine them for signs of STIs.
- Organize a group to talk about health topics, including STIs and HIV.
- Support education about sex in your local school. Help parents understand that teaching about STIs, including HIV, helps young people make safer choices later on when they start having sex.
- Talk about condoms with men and help them understand the risks of STIs, including the risks to pregnant women and their babies.
- Find out from your local medical center, hospital, or Ministry of Health what STIs are the most common in your community.
- Find out what medicines to treat STIs work best in your area — and find out what they cost. Learn how to treat STIs, or help women find treatment.
- Start a community pharmacy so that it will be easier for people to get medicines and condoms.