

ABSTRACT

SOCIODEMOGRAPHIC CHARACTERISTICS, SEXUAL BEHAVIOUR AND SEROLOGICAL STATUS OF RE-INFECTED MALES WHO ATTEND THE ST.JAMES SEXUALLY TRANSMITTED DISEASE CLINIC, JAMAICA.

BEVERLEY ELAINE WRIGHT

Sexually transmitted diseases (STDs) are an important local public health problem because of the high prevalence of pelvic inflammatory disease and ectopic pregnancy, the resurgence of congenital Syphilis, the increasing cost of treatment for the 'traditional' STDs and the implications of Human Immunodeficiency Virus (HIV) and Hepatitis B (HBV) infections. Information which identifies the important core groups responsible for their perpetuation within the community is essential to break the chain of transmission.

This study was conducted on an accidental chunk sample of 98 male recidivists aged 20-44 years who attended the St. James STD clinic during January and early February 1991.

No association was found between the number of visits for re-infections and certain socio-demographic variables and sexual practices.

However the results indicate that these patients are an important reservoir for STDs given their high seroprevalence for HIV (10%), Syphilis (25.5%) and HBV

(HBsAg (3.3%), HBc (21.1%)). HIV seropositivity was associated with a positive test for Syphilis and with prostitute contact respectively.

These patients are also a core transmitter group given their early initiation of sexual intercourse, multiple partners, contact with prostitutes and non-use or irregular use of condoms.

The study indicates that there may be a link between STDs and alcohol and illicit drug use locally. Approximately 64% of patients used alcohol, 50% used ganja and 4% used ganja and crack or cocaine shortly before or during the last sexual contact.

The study points to the need to target educational programmes at adolescents and first time STD clinic attendees, to promote mutual fidelity within monogamous relationships and where that is not possible the use of condoms.

Surveillance for HIV, HBV and Syphilis should be targeted at recidivists for more cost effective use of resources. The health beliefs of recidivists should also be further researched and the links between STDs and drug abuse explored in order to effect meaningful behavioural intervention programmes.