

STDs, HIV & U

Phoenix College, Spring 2012

The goals of this presentation are:

- 1) To convince you that as a past, present and/or future sexually active human being, you are at risk (no matter how invulnerable you may *feel*) for contracting one or more sexually transmitted diseases (STDs), including HIV.
- 2) To get you to practice Safer Sex, thereby reducing your chance of contracting one or more STDs, including HIV.

What is meant by "Safer Sex"?

- Romantic and sexual relationships with reduced risk of STDs.
- Romantic and sexual relationships with reduced fear of contracting and spreading STDs.
- Romantic and sexual relationships which are more enjoyable because of reduced medical, emotional, and social risks.

RISK ASSESSMENT FOR STDs, INCLUDING HIV

Are you at risk? Most likely, YES.

- **If you *have ever* had or *will ever* have vaginal or anal sex without a condom, you are at risk for STD infection.** Even if you have always had sexual intercourse with a condom, you may still be at risk since condoms are not 100% effective, especially with herpes and HPV.
- People have said STD infection does not apply to them if they and their partner have each tested negative for HIV or if they and their partner have never had sex with anyone else. However, **most people have had sex with more than one person**, even if they don't admit it.
- **Few people confess to high-risk behavior.** What are the chances that someone will confess past high-risk behavior to you if they want to have sex with you?
- **Sexual experimentation rates are high among young people**, especially among males. Gay, bisexual or straight, most people won't discuss with you what they're doing sexually with their friends or with strangers.
- **People under the age of 25** are far more likely to be infected with STDs than older people for several reasons. Young people are less likely to use condoms, more likely to engage in sexual risk taking, and more likely to have multiple partners. Young women, in particular, are more biologically susceptible to STDs than older women. Their bodies are smaller, and they may be more likely to experience tearing during intercourse. Their cervixes also aren't fully developed, and are more susceptible to STD infection.
- **People who trade sex for money or drugs** are unlikely to be sufficiently empowered to negotiate that the sex be safer sex. Furthermore, partners acquired in this manner are far more likely to be infected with STDs than people in the general population.
- **People who already have an STD** are at higher risk for contracting an additional STD, including HIV.
- There is an excellent HIV and other STDs **risk assessment survey** that you can take on the web. To see your level of risk for contracting an STD, including HIV, go to <http://www.thebody.com/surveys/sexsurvey.html>

SAFER SEX PITFALLS: "excuses, excuses, excuses"

I don't practice safer sex because I know and trust my partner. Unfortunately knowing your partner is a nice person and trusting them not to cheat on you does not tell you anything about whether or not he or she was infected with an STD, before you met. Remember, a person could have been infected with HIV 10 years earlier or more and not know it because they have no obvious health problems. Also, many STDs have no symptoms. You could be having sex with an infected person who doesn't even know he or she is infected.

We have a monogamous relationship, so we don't have to practice safer sex. This would make sense if neither of you had ever had sex with anyone else. Most people practice "serial monogamy." They are monogamous with one person for a few weeks, months, or years, and then when that relationship ends they are monogamous with someone else. Since most people you encounter have had sexual intercourse before, it's possible that you could be monogamous with an infected partner.

Alcohol and/or drug use sometimes makes me forget about safer sex. This is a big problem for a lot of us. When we've been drinking or using other drugs, we often do sexual things we didn't expect to do. We are usually much less likely to protect ourselves sexually when we are under the influence. Stay in charge of yourself. Protect yourself and your partner(s).

I'm afraid of rejection. Some people fear rejection if they ask their partner to use condoms. Women sometimes think their partner will think they sleep around if they ask their partner to practice safer sex. But many women who only have monogamous relationships insist on practicing safer sex. Men sometimes think that if they have a condom their partner will think they had planned to have sex all along. But some men and women always carry condoms, just to be sure. Most people use a condom or practice other types of safer sex when asked by their partner to do so. If your partner refuses the request, use all your emotional and physical willpower to refuse their advances for unprotected sex. Find a partner who respects your requests – there are plenty of them out there.

CAN I STILL HAVE ROMANTIC & SEXUAL RELATIONSHIPS WITHOUT HAVING TO WORRY SO MUCH ABOUT STDs?

“Yes!”

- There are many kinds of romantic and sexual activities that do not involve sexual intercourse yet are very enjoyable and are relatively safe, even without condoms. These include massage, mutual masturbation, and other physically intimate activities that do not involve inserting the penis in the vagina, mouth or anus (sexual intercourse).
- Get tested together. If you find out you are both free from STDs, including HIV, you can proceed with sexual relations as you see fit. Of course, you still want to use a condom every time you have sex because you can't ensure your partner's monogamy. If you find out that one or both of you have an STD, you can learn about what you need to do and can discuss precautions, treatments and how to proceed sexually from there.

CONDOMS: USE THEM EVERY TIME YOU HAVE SEX

Use good “condom sense”

- The **correct use of good quality latex or polyurethane condoms** dramatically reduces the risk of HIV and other STD infection if you engage in vaginal or anal intercourse, or oral sex. Never use animal skin (or natural membrane) condoms!
- **Consistent use** means using a new latex or polyurethane condom from start to finish with each act of intercourse.
- **Correct male condom use** includes the following steps:
 - 1) Use a new latex or polyurethane condom for each act of intercourse.
 - 2) Check the expiration date. Never use condoms that are past their expiration date.
 - 3) Check the condom package for leaks by gently squeezing it.
 - 4) Put on the condom as soon as erection occurs and before any sexual contact (vaginal, anal or oral). This does not mean starting to have intercourse without a condom, and then stopping and putting on a condom part way though before the male partner ejaculates.
 - 5) Hold the tip of the condom and unroll it onto the erect penis, leaving space at the tip of the condom for semen, yet ensuring that no air is trapped in the condom's tip. A good measure is about ½ inch, or the width of a finger.
 - 6) Adequate lubrication is important, but use only water-based lubricants, such as glycerine or lubricating jellies (easily purchased at the drugstore). Oil-based lubricants such as petroleum jelly, cold cream, hand lotion or baby oil can weaken or destroy the condom.
 - 7) Withdraw from the receptive partner immediately after ejaculation, holding the condom firmly at the base of the insertive partner's penis to keep it from slipping off.
 - 8) Have the insertive partner turn away from the receptive partner and then remove the condom.
- **Female condoms** are available and some women insist on using them.

- **Use a condom no matter what you hear from your partner.** Most people are honest but others can't always be counted on to be honest about their STD status, especially because they may not even know they have one. *Always* use a condom to protect yourself and your partner.
- Some people complain that condoms are not comfortable. “**Making Condoms Comfortable**” is an excellent, honest short video. Find it on YouTube by typing in “making condoms comfortable.” The video is carried on several websites, including PeopleJam and SexHealthGuru.
- Myths about condoms:
 - Myth #1 – Condoms don't work. Condoms work very well when they are **used properly and consistently**. Condoms don't work when they are used improperly, inconsistently or not at all.
 - Myth #2 – STDs, including HIV, can pass through a condom. This may be true for natural membrane (or animal skin) condoms but it is NOT true for latex or polyurethane condoms. Laboratory studies show that latex or polyurethane condoms provide a continuous barrier to microorganisms, including sperm. Condoms are highly effective against chlamydia, syphilis, gonorrhea and HIV. They are also effective against herpes and HPV but these STDs can be passed through body parts not covered by a condom.
 - Myth #3 – Condoms frequently break. Condoms made in the United States are regulated by the FDA. Every quality condom made in the United States is tested for defects before it is packaged. Most condom breakage is due to incorrect use rather than poor condom quality. Additionally, exposure to heat or sunlight or age can weaken a condom. Condoms can also be torn by teeth or fingernails.

PROTECT YOURSELF – IT'S YOUR (SEX) LIFE!

Protect your partner, too

- **Know your own body.** Know what is "normal" for you so that you can tell when something is different.
- **See a medical professional for anything out of the ordinary.** Sores on the genitals; unusual discharge or discomfort when urinating; or pain during sex are good reasons to go see a health care professional. There's no need to be embarrassed when talking to them. They have seen everything(!) and are trained to be non-judgmental.
- **It's important to be able to talk about sex.** It can be uncomfortable to have direct conversations about sex, but it does get easier if you are confident about your facts. Approaching it from a biological perspective (these pathogens want to get in us to reproduce, let's keep them out) can also help. Bottom line: When it comes to sex, good communication is important. Talk freely with health care providers, and most importantly, your sexual partner(s).
- **How to have that talk.**
 - Choose a relaxed time and comfortable place before you get intimate. That means before you take your clothes off.
 - Be sure to arm yourself with facts so you can answer any questions your partner may have. This packet is filled with up-to-date information. Read it together. There are also many valuable websites you can go to (listed on last page of this packet).
- **When you're ready to have sex.**
 - Turn on the lights – at least at first. It may be more romantic to “do it in the dark,” but turning on the lights helps you see if your partner has any visible symptoms. Remember, many STDs have no visible symptoms, so you still want to wear a condom even if you don't see anything out of the ordinary. Checking each other out can be a fun part of foreplay.

- Have that condom ready. Be sure to put it on before there's any contact with the penis to the vagina or anus.
- **Exchange contact info.** Symptoms from many STDs don't show up right away. Get in the habit of exchanging contact info with anyone you have sex with. If either of you find out you have an STD, you can contact the other person to let them know they should get tested. Do your part to keep our whole community as healthy as can be.
- **Negotiating some tricky situations:**
 - Scenario #1: You're thinking about having sex but you're just not comfortable talking about it with your partner.
 - Solution: Maybe one of you thinks that talking about sex kills the mood or that sex should just happen naturally when the moment is right. Wrong. Talking about sex is one of the best ways to reduce your anxiety and risk. That's because talking about sex can help build trust and respect between you and your partner. Most importantly, it helps you plan ahead so that if you do decide to have sex, you can establish your sexual boundaries together and you can decide how you are going to protect yourselves against STDs.
 - Scenario #2: Your partner does not want to use a condom.
 - Solution: Some people use a variety of lame excuses to weasel out of using condoms so you should be armed with a response.

EXCUSE	ANSWER
Don't you trust me?	Trust isn't the point, you or I could have infections without realizing it.
It takes away the romance.	So could getting an STD.
I can't feel a thing (or as much) when I wear a condom.	I'll feel more relaxed, If I am more relaxed, I can make it feel better for you. (Or...)You'll feel even less if you don't use one because we won't be having sex.
I don't stay hard when I put on a condom.	I'll help you put it on, that will help you keep it hard.
I don't have a condom with me.	I do.
I'm clean. I won't give you any diseases.	It's nothing personal but I want to make sure both of us stay healthy.
Putting it on interrupts everything.	Not if I help put it on.
I guess you don't really love me.	I am sure not risking my future to prove it.
I'll pull out in time.	I could still get STDs (or pregnant) from pre-ejaculate.
But I love you.	Then you'll help us to protect ourselves.
Just this once.	Once is all it takes.

*It's more than OK to say, "NO CONDOM, NO SEX."
Many people do.*

SPECIAL STD CONCERNS FOR WOMEN WHO HAVE SEX WITH WOMEN (WSW)

- For many women, health care revolves around the need for contraception. **Women who don't need contraception**, either because of age, sexual orientation, or other lifestyle issues, are less likely to take advantage of recommended preventative care.
- Even if lesbians and other WSW do use traditional health care, they may feel uncomfortable **disclosing their sexuality to doctors**. Lack of ability to discuss sexual health, however, may impact other areas of a woman's life. When you shut the door on talking about something as essential as sexuality, you also lose the

opportunity to talk about many other health issues. Remember that most medical professionals are trained to be non-judgmental.

- Many women who identify as lesbians have had **sex with a man** at least once in their lives. For many reasons, women who identify as lesbians are less likely to use protection during sexual encounters with men.
- Lesbians who have **never slept with a man** are also at risk of sexually transmitted diseases. A higher number of female partners has been associated with increased risk of herpes, bacterial vaginosis, and HPV. This risk is compounded by the fact that many lesbians and other WSW consider sex between women to be a low-risk activity and therefore do not practice safer sex.
- There are ways to improve the **safety** of most, if not all, sexual activity that takes place between women. The mechanics of many safer sex acts for women are the same as those for many other types of couples and include:
 - Using barriers, such as dental dams, saran wrap, or slit open condoms, for oral-vaginal and oral-anal contact.
 - Using gloves when inserting fingers into the vagina or rectum.
 - Putting condoms on insertable sex toys and changing the condom for each partner. Condoms should also be changed when moving a toy from the vagina to the rectum or vice versa.

SPECIAL STD CONCERNS FOR MEN WHO HAVE SEX WITH MEN (MSM)

- In the years since the AIDS crisis began in the early 1980s, the gay male population in the U.S. has been the target of aggressive public-health and STD-prevention campaigns. By most accounts, these efforts have been successful in drastically decreasing the number of new HIV diagnoses among many gay men and creating an increased sense of responsibility for one's own health and the health of the community.
- Recently, however, doctors and journalists in the gay press have noticed a **backlash against the stringent rules of safer sex**, including the rise of barebacking, or having anal sex without a condom. Researchers at the Centers for Disease Control and Prevention also note that fewer gay men are going in for STD testing.
- Consequently, many major U.S. cities have noticed a **marked increase** in certain sexually-transmitted diseases, like syphilis and gonorrhea, among gay men and MSM.
- It has been suggested that **alcohol and drug use** (and abuse) may be higher among gay men. Alcohol and drug use can increase the risk for STDs. While under the influence, people tend to have sex more often, are less likely to use condoms, or are less likely to use condoms correctly.
- Some gay men suffer from **depression and low self-esteem** due to societal and family discrimination. When people have low self-esteem, they tend to value their life (and their health) less seriously. They are therefore less likely to protect themselves and others against STDs, including HIV.
- If you are a gay man or a MSM, ask yourself **what *you* personally can do** to make *your* community healthier. Work to keep yourself and other men healthy. Buy condoms, and learn to use them correctly, then teach others to do the same. Reduce your use of alcohol and other drugs and teach others to party responsibly.

SEX TOYS AND STDs

- Couples of all kinds enjoy using sex toys. If you and your partner are among them, know that **they can facilitate the spread of STDs**, so learn how to use them safely.
- Depending on how sex toys are used, they can come in contact with vaginal fluids, blood, or feces. And because each of these things can carry STDs, it's a **bad idea to share sex toys**—that is, to use the same toy

on two different people—without taking proper precautions. In addition, some toys can crack or develop holes over time where bacteria can easily hide out.

- The best way to be safe with sex toys is to **use condoms** and change the condom each time the toy changes partners or moves from one area of the body to another (especially after being used in the anus).
- Also, **clean the sex toy** between uses. Salespeople at sex-toy shops can help you figure out proper cleaning methods. Cleaning often involves soap and water, or even a run through the dishwasher. Submersion in boiling water might also be a good idea, depending on the material the toy is made of and the type of toy it is (such as whether it has moving or electric parts). Sex-toy emporium Babeland offers a comprehensive guide to toy cleaning and care. Find it at www.babeland.com/shoppingadvice/care-and-cleaning

SEXUALLY TRANSMITTED DISEASES (STDs)

- STDs often have **no symptoms**, or if they do they last about a week. Therefore, many people do not know they have them.
- By the age of 24, 1 in 3 sexually active people have contracted an STD.
- 15 million cases of STDs, other than HIV, are diagnosed annually in the U.S. About two-thirds of those are among **people under the age of 25**.
- Because STDs are almost always spread through **high-risk sex**, it's clear that many people are engaging in the sort of high-risk behavior that leaves them open for an STD, including HIV. High-risk behavior includes having vaginal or anal intercourse without a condom.
- Anyone of any age, sex, or sexual orientation who engages in high-risk sex is leaving himself or herself open for acquiring an STD.
- Some STDs are spread to and by body parts not covered by a condom. For example, infectious herpes sores could be active on the buttocks or upper thighs.
- Ask your doctor or medical professional for a full STD screening. Not all of them will do it automatically. Insurance covers many STD tests.
- **STD Screening Recommendations:**
 1. Sexually active males and females under age 25 should be screened at least twice a year.
 2. Patients testing positive for an STD have a 50% chance of a second infection of another STD or a reinfection of the same STD from an untreated partner within 6 months of resuming sexual activity. For these people, more frequent testing may be needed.
 3. High-risk patients (intravenous drug users, any drug users, those who have been in or are in correctional or detention facilities, those with more than 3 partners per year, those with anonymous partners, those having unprotected sex, *and those having sex with partners in any of these categories*) should be tested more frequently.
 4. HIV-infected patients should be screened for curable STDs twice a year and assessed for herpes.
 5. High-risk patients should be considered for treatment of locally prevalent STDs.
 6. The Arizona Department of Health Services recommends that all sexually active people get tested for HIV once per year.
- **How to tell your partner you have an STD.**
 - If you have an STD, telling your partner is the right thing to do. It helps build trust between you.
 - You might want to start the conversation on a positive note, for example, telling your partner that you really care for him or her and that's why you want to discuss something important. You might say that last year you found out you carry HPV, or that you just learned that you have chlamydia. If you have

genital herpes, you might explain that you sometimes get sores in the genital area. Keep it simple and just give the facts about symptoms, treatment, how the disease is spread, and how you can protect each other. These can be awkward conversations that can stir up a lot of emotions, but try to think of it as simply sharing vital information.

- Then give your partner some time and space to digest the news. Offer to provide more information or an STD hotline number or website. With everything that's been learned in recent years about STDs and their transmission, it's entirely possible for people with an STD to have a satisfying sex life without passing infection to their partners. Lots of people do.
 - It's best to avoid sex if you or your partner is having an outbreak of an STD. Cuddling and spending time with each other are great ways to build your relationship.
- **Beware of promises for “alternative” STD treatments, especially those you find on the web.** Many companies offer enthusiastic testimonials for private and embarrassment-free results through their natural and herbal medications. But these companies can rarely produce *evidence* that their products work. Don't send your money to these e-commerce outfits, no matter what your friends say. See a credible medical professional.

KINDS OF STDs

Planned Parenthood hosts an up-to-date website on the causes, symptoms, treatments, and prevention of a variety of STDs. Go to <http://www.plannedparenthood.org/health-topics/stds-hiv-safer-sex-101.htm>

The Centers for Disease Control and Prevention also have excellent STD fact sheets, filled with helpful info: http://www.cdc.gov/std/healthcomm/fact_sheets.htm

Bacterial infections

Chlamydia

Chlamydia is the most common and most invisible sexually transmitted disease in America. Roughly 75% of women and 50% of men with chlamydia *have no symptoms*. Chlamydia is a bacterium and can be treated successfully.

Gonorrhea

Gonorrhea is a common bacterium that can cause sterility, arthritis, and heart problems. 80% of women and 10% of men will have no symptoms. Gonorrhea can be successfully treated with antibiotics.

Syphilis

Syphilis is caused by a bacterium called *Treponema pallidum*. The infection, if not treated early, moves throughout the body, damaging many organs over time. Syphilis has several phases that may overlap one another. Antibiotics are successful for both partners—but only in the first two stages. Damage caused by the disease in the later phases cannot be undone.

Viral infections

Human Papilloma Virus - Genital Warts

There are more than 40 different sexually transmitted strains of human papilloma viruses (HPVs). Some types of HPV are referred to as “low risk.” These cause warts, and the warts, when found, can be treated. Other HPV types are referred to as “high risk.” These cause other conditions, including penile and anal cancer in men and cervical cancer in women. Finding out you have HPV is not as important as finding out if you have the diseases that it can cause.

Herpes

Herpes simplex virus (HSV) is a virus that remains in the body for life. Symptoms can be relieved but not cured. There are two forms of herpes:

1. Herpes simplex virus-1, also known as sores “above the waist.”
2. Herpes simplex virus-2, also known as sores “below the waist.”

Human Immuno Deficiency Virus

The human immunodeficiency virus (HIV) causes an individual's immune system to weaken and lose its ability to fight off infections and cancers. After developing a number of these infections or reaching a certain blood count level, an HIV-positive person is diagnosed with Acquired Immunodeficiency Syndrome (AIDS).

Other common STDs include:

Chancroid

Chancroid is an especially dangerous sexually transmitted bacterium because the sores it causes increase the chances of getting HIV.

Cytomegalovirus (CMV)

CMV is a virus that is transmitted through many bodily fluids. Every year, CMV causes permanent disability, including hearing loss and mental retardation, for 4,000 to 7,000 babies when transferred from the mother.

Hepatitis B (HBV)

Hepatitis B is an infection of the liver. It is spread through semen, vaginal fluids, blood, and urine. About 46,000 American women, men, and children become infected with HBV each year. Most of these infections occur among people who are age 20 to 49.

Molluscum Contagiosum

Hundreds of thousands of cases of the virus, *molluscum contagiosum*, are diagnosed every year. Common symptoms include small, pinkish-white, waxy, round, polyp-like growths in the genital area or on the thighs.

Pelvic Inflammatory Disease (PID)

PID is a progressive infection that harms a woman's reproductive system. PID occurs throughout the pelvic area, in the fallopian tubes, the uterus, the lining of the uterus, and in the ovaries. Treated or untreated, PID can lead to sterility, ectopic pregnancy, and chronic pain.

Pubic Lice

Every year, millions of people treat themselves for pubic lice. These tiny insects are also called "crabs."

Trichomoniasis

"Trich" is a protozoan—a microscopic, one-cell animal. It is a common cause of vaginitis. Up to five million Americans develop trichomoniasis every year.

Urinary Tract Infections

Urinary tract infections (UTIs) are caused by bacteria that have spread from the rectum to the vagina or penis and then to the urethra and bladder. Severe cases, left untreated, may cause kidney infection.

RESOURCES ON THE WEB:

The web is filled with great information. Always check – and then double check – the credibility of the website you’re using. Don’t trust “information” of websites whose real purpose is to sell you something. Find an unbiased governmental, educational, or medical website. Here are just a few:

- **STDs:** www.plannedparenthood.org and www.cdc.gov/std/healthcomm/fact_sheets.htm
- **HIV:** www.thebody.com
- **STD Risk Assessment Survey:** www.thebody.com/surveys/sexsurvey.html
- **Condoms:** Outstanding, honest resource, including pictures and instructions for use, www.avert.org/usecond.htm
- **Lesbian health:** www.womenshealth.gov/faq/lesbian-health.cfm
- **Gay Men’s health:** menshealth.about.com/od/gayhealth/
- **Videos:** www.sex.healthguru.com or www.livestrong.com/stds
- **How to talk to your kids about STDs:** www.kidshhealth.org (follow the path of parents, infections, stds)
- **Q&A on every imaginable sex question:** Go Ask Alice, sponsored by Columbia University’s health services division. Find it at <http://goaskalice.columbia.edu/sexual-and-reproductive-health>
- **Test your smarts on sexual health:** www.avert.org/quizzes.htm
- **Sex Toy cleaning and care:** www.babeland.com/shoppingadvice/care-and-cleaning

GET YOURSELF CHECKED OUT:

- **See a medical professional.** There are many great doctors, nurse practitioners and other medical professionals in our community who are knowledgeable and non-judgmental. Though your friends mean well, they don’t always have the knowledge, skill, or resources you need.
- **Planned Parenthood.** Go to the home page of **Planned Parenthood Arizona** (www.plannedparenthood.org/ppaz). Type in your zip code at the top to find the nearest clinic. Costs and services provided vary depending on location and your income. Planned Parenthood is committed to providing services at the lowest possible cost and to ensuring that financial concerns are not a barrier to necessary health care. Many of their centers offer services on a sliding scale.
- **Maricopa Department of Public Health clinical services – STD screenings**
1645 E. Roosevelt
(602)506-5604 (STD screenings)
(602)506-2934 (HIV testing)
Call for hours and prices
- **Members of this STD committee, the PC Counseling Department and community agency representatives** can answer your questions about STDs and can provide you with emotional and social support. Take advantage of the access to these people and agencies.

BIBLIOGRAPHY

Materials in this packet are adapted or quoted from:

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2012 STD updates provided by Amanda Chapman, Brenton Cheeks, Robin Cotter, Patty Finkenstadt, Liz O’Brien, John Schampel, and Marty Welter

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