

## Glossary

**Antiviral drugs:** Keep the growth of a virus from spreading.

**Bacteria:** An organism that causes infection. Some bacteria are harmless, others may cause disease or death if left untreated.

**Diaphragm:** A dome-shaped rubber disk that is inserted into the vagina and covers the cervix. It prevents pregnancy by blocking sperm from reaching the uterus/fallopian tubes.

**Ectopic pregnancy:** When implantation of a fertilized egg occurs outside the uterus (as in the fallopian tubes).

**Female condom:** A lubricated polyurethane sheath with a ring on each end that is inserted into the vagina used to prevent pregnancy.

**Infertility:** Inability to become pregnant.

**Monogamous:** Having only one sexual partner for a period of time.

**Mucosal:** Tissue that lines body passages.

**Opportunistic infections:** Infections caused by microorganisms that normally do not cause serious disease in healthy people, but cause mild to severe disease in individuals whose immune system is weakened.

**Pelvic Inflammatory Disease:** Inflammation of the female reproductive tract, especially the fallopian tubes. Leading cause of female sterility.

**Protozoa:** A microscopic one-cell organism.

**Spirochete:** Spiral-shaped bacteria. One type causes syphilis.

**Sterility:** Incapable of getting pregnant or getting someone pregnant.

**Tertiary:** Last stage of untreated syphilis.

**Vaginal contraceptive sponge:** A disposable, disc-shaped polyurethane foam device which covers the cervix. The sponge is designed to prevent pregnancy by absorbing and trapping sperm.

**Vaginal spermicides:** Substance inserted in the vagina to prevent pregnancy by killing sperm.

**Virus:** Tiny infective agents that cause disease.

Funded by a grant from the March of Dimes.



This material is for information purposes only and does not constitute medical advice. The opinions expressed in this material are those of the authors and do not necessarily reflect the views of the March of Dimes.

Brochure developed by:



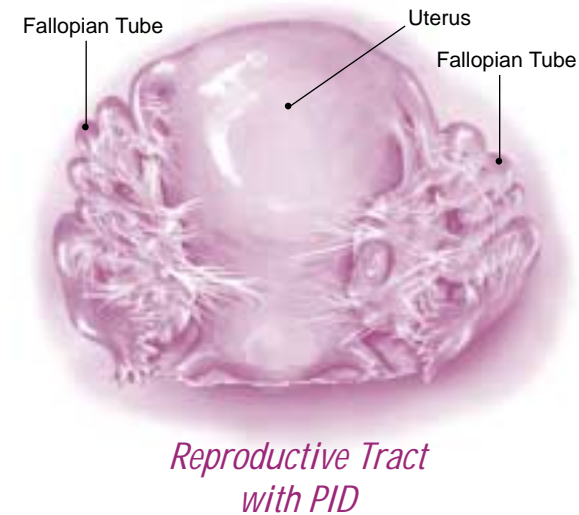
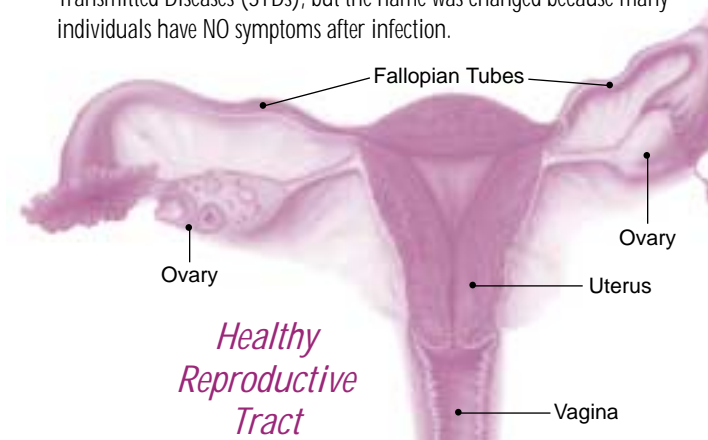
# Sexually Transmitted Infections

# STIs

## What Everyone Should Know



SEXUALLY TRANSMITTED INFECTIONS (STIs) used to be called Sexually Transmitted Diseases (STDs), but the name was changed because many individuals have NO symptoms after infection.



STIs can be devastating. Some STIs, like chlamydia and gonorrhea do not show symptoms, yet can damage the reproductive system. Pelvic Inflammatory Disease (PID) is one of the most serious outcomes from untreated chlamydia or gonorrhea. Women suffer more frequent and serious problems from STIs.

STIs can also have devastating effects on a fetus or newborn. Some STIs cause babies to be born too soon and too small. These babies may have life-long problems. STIs can also affect a fetus' nervous system, brain, and other organs and can cause blindness, birth defects, and even death.

*Face of an Infant with Gonorrhea of the Eye*



*Penis infected with Genital Herpes*

## TALK TO YOUR HEALTH CARE PROVIDER!

If you're pregnant, or thinking of becoming pregnant, make sure you speak with your provider about getting tested for STIs. Even if you're not pregnant, but you're sexually active, GET TESTED! STIs can affect your ability to become pregnant in the future. This is true for both women and men.

# STIs Can Be Prevented!

The most reliable way to avoid transmission of sexually transmitted infections (STIs) is to abstain from sexual intercourse (anal, oral, or vaginal) or to be in a long-term, mutually monogamous\* relationship with an uninfected partner. Some contraceptives (birth control) can also help protect you from infection.

## MALE CONDOMS

When used correctly and consistently, latex condoms are effective in preventing the sexual transmission of HIV and can reduce the risk of other STIs.

Because condoms do not cover all exposed areas, they are likely to be more effective in preventing infections transmitted by fluids (chlamydia, gonorrhea, trichomoniasis, and HIV) than in preventing those transmitted by skin-to-skin contact (genital warts, herpes, and syphilis).

Non-latex condoms (made from polyurethane or other synthetic material) can be used by people with latex allergy.

Use a new condom with each act of sexual intercourse (anal, oral, and vaginal).

Put the condom on **AFTER** the penis is erect and **BEFORE** any genital contact with a partner.

Hold the condom firmly against the base of the penis during withdrawal, and withdraw while the penis is still erect to prevent slippage.

Use only water-based lubricants (AquaLube, Astroglide, glycerin, and K-Y Jelly) with latex condoms. Oil-based lubricants (petroleum jelly, shortening, mineral oil, massage oils, body lotions, and cooking oil) can weaken latex.

## FEMALE CONDOMS

The female condom\* is an effective barrier to viruses, including HIV.

## VAGINAL SPERMICIDES, SPONGES, & DIAPHRAGMS

Vaginal spermicides\* containing nonoxynol-9 are NOT considered effective in preventing gonorrhea, chlamydia, or HIV infection. Thus, spermicides alone are not recommended for STI/HIV prevention.

The vaginal contraceptive sponge\* protects against gonorrhea and chlamydia.

The diaphragm\* has been shown to protect against gonorrhea, chlamydia, and trichomoniasis.

Neither vaginal sponges nor diaphragms should be relied on to protect women against HIV infection. The role of spermicides, sponges, and diaphragms for preventing transmission of HIV to men has not been studied.



\*Detailed explanation in Glossary

NAME	SCIENTIFIC CAUSE	POSSIBLE SYMPTOMS	EFFECTS ON YOUR HEALTH	EFFECTS ON FETUS/BABY	TREATMENT	CURABLE
Chlamydia	<i>Chlamydia trachomatis</i> BACTERIA*	75% of women will not have any symptoms; 50% of men will not have any symptoms. Symptoms occur between 1 to 3 weeks after transmission. Chlamydia can be transmitted even if there are no symptoms. Women: Vaginal discharge; burning while urinating. Men: Thick, yellow-green discharge from penis; burning while urinating.	Women: Pelvic Inflammatory Disease (PID)*; ectopic pregnancy* (due to scarring on fallopian tubes). Men: urethral infection; swollen and tender testicles; infertility*.	Neonatal conjunctivitis; pneumonia; increased risk of miscarriage and preterm delivery.	Antibiotics	Yes
Genital Warts (HPV)	<i>Human Papillomaviruses</i> VIRUS*	Warts (which may appear small or large, flat or raised, single or multiple) in the genital area. Sometimes they itch or burn.	Women: 90% of cervical cancer caused by HPV; sterility*; difficult delivery if warts grow very large. Men: Sterility.	Rarely, baby can develop warts on vocal chords if infected during delivery. Warts can increase in size and in number during pregnancy.	Warts removed by freezing, burning, laser surgery, or managed by antiviral drugs.	No Person carries the virus for life.
Gonorrhea	<i>Neisseria gonorrhoeae</i> BACTERIA	75% of women will not have any symptoms; 50% of men will not have any symptoms. Symptoms occur between 2 days to 3 weeks after transmission. Gonorrhea can be transmitted even if there are no symptoms. Women: Vaginal discharge (yellow or bloody); pain or burning during urination; cramps and abdominal pain. Men: Yellow-white discharge; pain or burning during urination; swollen and/or painful testicles.	Women: PID; Increased risk of premature labor; miscarriage. Men: urethral infection; swollen and tender testicles; infertility.	Serious eye infections; joint infection; and rarely, a life-threatening blood infection.	Antibiotics	Yes
Hepatitis B	<i>Hepatitis B</i> VIRUS	Symptoms occur between 6 weeks to 6 months. Possibly no symptoms. Both Women and Men: Yellowing of skin and whites of eyes; fever; fatigue; loss of appetite; abdominal pain; diarrhea.	Can result in acute liver failure and death.	Baby can become infected at birth or through breastfeeding.	Vaccine is available for Hepatitis A & B. If infected, antiviral drugs are available.	Depends on treatment and body's response.
Herpes	<i>Herpes Simplex Virus 1 &amp; 2</i>	Symptoms may occur 2-3 weeks after infection. When the infection is in the mouth, its called oral herpes (cold sores, fever blisters). Infection near the sex organs is called genital herpes. Both Women and Men: Cluster of painful sores that may take several weeks to go away.	Herpes recur in half the people who have it (an outbreak of sores occurs). Symptoms are more painful and last longer in women and men with weakened immune systems.	Cold sores are very harmful to a newborn; contact with the herpes sores during delivery can lead to severe damage of the nervous system or death of the infant.	Antiviral drugs	No In most cases, outbreaks become fewer and weaker over the course of 5-6 years.
HIV/AIDS	<i>Human Immunodeficiency</i> VIRUS	Most adults and adolescents remain symptom-free for a long period of time. HIV: Flu-like symptoms; fever; fatigue; diarrhea; cough. AIDS: Opportunistic infections*	Even without any symptoms, HIV is weakening the immune system, which makes it hard for the body to fight off infections.	Baby can become infected during pregnancy, at birth or through breastfeeding. Early diagnosis and treatment can reduce the risk of exposing the baby to HIV.	HIV antibodies are detectable within 3 months after infection. Antiviral drugs and other types of medication for opportunistic infections are available.	No Person carries the virus for life and remains contagious.
Syphilis	<i>Treponema pallidum</i> SPIROCHETE*	Symptoms occur 3 weeks to 90 days after infection. Primary: painless sore at infection site; Secondary: rash on palms of hands & feet.	Tertiary*: Damage to the nervous system; brain and heart infections; death.	Congenital syphilis: birth defects; stillbirth, death.	Antibiotics	Yes
Trichomoniasis	Trichomonas Vaginalis PROTOZOA*	It takes 3-28 days for symptoms to develop. Women: Yellow-green vaginal discharge, genital irritation. Men: Usually no symptoms.	Swelling in the groin; pain during sex.	Premature labor and delivery; low birthweight.	Antibiotics	Yes