

Sexual wellbeing and Travel

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STI outbreaks due to travel

- Quinolone resistant gonorrhoea
- LGV - 2004 Netherlands
- Syphilis
- HIV

Key facts of STIs:

- Most common reported infection worldwide
- Travel- 3 fold increased risk of catching an STI, 50% UPSI
- >1 million acquire a STI /day.
- Asymptomatic.
- ↑HIV acquisition >3x
- Serious consequences
- 35 million living with HIV
- 250 million chronically infected with Hep B virus

Evidence of STIs in international travellers:

- Prevalence travel sex 5.6 - 62.9%
- Pooled prevalence 20.4%
- UPSI 50-75%
- 3 x more likely to get STI
- Seroprevalence of HIV 2.2%-27.6%
- Prevalence symptomatic STI 0.9% - 5.7%
- 26% men had sex with sex worker

Why does travel increase risk of STI?

- Sex with high risk groups
- Unprotected sex
- Alcohol/recreational drug use
- Sex tourism

High risk groups - No single profile

- Young male lone travellers
- Group travellers
- Multiple sexual partners
 - History of STIs
 - History of GUM OPD
- Men who have sex with men (MSM)
- Migrants VFR
- Expatriates
- Sex tourism
- Business travellers
- Alcohol
- Drug use
- Military personnel
- Long distance lorry drivers
- Long duration of travel
- Repeat visits to the same location

Who is having sex with who?

- Fellow travellers
 - Travel reps
 - Expatriates
 - Local population
 - Sex workers
- Travelling to country with high STI prevalence:
SW in developed vs promiscuous teenager in Magaluf

Travel apps:

- As recommended by Condé Nast Traveler
 - Endorsed by Lily Allen – “Tinder Tourist”
 - GPS enabled, chat/hook up.
 - Completely anonymous.
 - Strong £ and newly capped roaming charges
 - Opportunities for health promotion ‘pop ups’
- Tinder for travellers
“superior modern equivalent to hanging around bars”
“What goes on tour stays on tour”
“Sample the local flavour”
“I’ve had hook ups with 50% locals and 50% tourists”

Sex tourism

- Sex workers and “business hospitality”
- Sex with minors and child pornography are ALWAYS criminal activities and can be PROSECUTED in UK courts even when offence conducted abroad.
- ‘Mamading’ in Magaluf
- ECPAT
- World Responsible Tourism Awards

What are they catching? HIV

- 100,000 people living with HIV in UK 2012.
- Of the 45% of newly acquired heterosexual HIV transmissions 50% were acquired abroad
- Prevalence in UK 0.3%
- Prevalence in South Africa 25%
- Prevalence in travellers 2.2-25%
- Coexistent STI increase risk of acquisition
- Post exposure prophylaxis

Hepatitis B

- 50% heterosexual sex
- 30-50% of those infected become clinically unwell with fever, jaundice
- 5-10% infectious asymp chronic carriers
- 20-25% chronic active hepatitis with cirrhosis and risk of HCC
- Safe and effective vaccine

Consequences of STIs

- Ulcers/urethritis/cervicitis/proctitis
- PID/infertility/ectopic pregnancy
- Hepatitis, cirrhosis, HCC
- Cervical dysplasia → CIN
- HIV and onward HIV transmission
- Emotional consequences; fear of transmitting/trust/guilt/broken relationships
- Unwanted pregnancy

Preventative strategies - Confidential sexual risk assessment

- Non judgmental approach, patient focused care, emphasis on confidential
- "I am now going to ask you some questions of a sensitive nature. I ask everyone these questions in the clinic so please do not be offended by them"
- "How many sexual partners have you had in the past 3 months?"
- "Where they male/female, regular/casual?"
- "How often do you use condoms?" Most/occasionally/never
- "What are you using for contraception?"
- "Have you ever had an STI screen or been diagnosed with an infection?"
- "Is there any possibility you might meet a new sexual partner whilst you are away?"

Health Promotion strategies

- Posters in clinic
- FREE Condoms –BSI/CE kite mark
- Emergency contraception/regular
- Advice on candida vulvovaginitis
- Hepatitis B vaccination/HAV/HPV
- PEP - 3 ARVs starter pack under specialist guidance <72hrs
- GUM clinic - prompt diagnosis
- Leaflets to take away

Female genital mutilation

- 100-140 million women worldwide
- 66,000 women in UK
- Partial/total excision of ext female genitalia for non medical reasons.
- Illegal, carries 14 yrs prison sentence.
- Severe form of violence against children & women.
- On girls <15 yrs it is a form of child abuse with long term complications.
- Prevalence >90% Djibouti, Egypt, Guinea, Sierra Leone, Somalia & Sudan. 80% Eritrea and Mali.

If YOU suspect that a girl may be at risk of FGM

- Family belongs to community that practices FGM
- Attending for vaccinations to visit country that practices FGM
- Taking time off school
- "special procedure taking place"

- ACT -Safeguard at risk patients

www.forwarduk.org.uk
www.equalitynow.org
www.bma.org.uk/ethics
www.rcn.org.uk
www.rcog.org.uk

Suggested reading

Dr Caroline Turner: Travel and Sexual Health; Leaflets for patients
Emporiatrics Spring/Summer 2012
www.janechiodini.co.uk

Sexual assault abroad: www.fco.gov.uk/en/travel-and-living-abroad/when-things-go-wrong/rape

www.forwarduk.org.uk

www.tht.org.uk

<http://mariestopes.org/where-in-the-world>

Vivancos et al. Foreign travel, casual sex and STIs; systematic review and meta-analysis. Int.J.Inf.Dis 14 (2010) 842-851