

ORIGINAL ARTICLE

PATTERN OF SEXUALLY TRANSMITTED DISEASES IN PATIENTS PRESENTING AT AYUB TEACHING HOSPITAL, ABBOTTABAD

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Background Sexually transmitted diseases are present in all societies across the globe. Different cultures and societies show a different spectrum of these diseases. The last study conducted in Hazara division was back in 1995. We have conducted this study to see the recent trends and patterns of sexually transmitted diseases in the region. **Methods:** This cross-sectional study was conducted in Ayub Teaching Hospital, Abbottabad and included patients over a five year period from January 2010 till December 2014. Case sheets of 512 presenting with sexually transmitted diseases whose diagnosis was confirmed by related lab investigation were analysed retrospectively. Patients of all ages and both sexes were included. **Results** Out of these 512 patients only 47 were females and 465 were males. The age varied from 15–66 years. Gonorrhoea was the commonest disease with 231 cases. Genital warts were diagnosed in 60 cases. Non-gonococcal urethritis was seen in 57 patients. Genital *Molluscum contagiosum* was seen in 45 patients. Syphilis was diagnosed in 41 patients. Thirty-one cases of herpes genitalis, 25 cases of Chancroid, 13 cases of *Lymphogranuloma venereum*, were also seen. Five patients were found positive for HIV. Overwhelming majority of the patients were between the age of 19–35 years. 61% of the patients were married. The source of infection in male patients was mainly prostitutes (70%) but also included homosexual boys (21 %), married women (7.5%) and eunuchs (1.5%). The main source of infection in females was from husbands. **Conclusion** The number of STD patients presenting in the region has increased significantly. The main factor is obviously the rise in population but also signifies the change in cultural and moral values.

Keywords: Sexually transmitted diseases, recent trends, social values

J Ayub Med Coll Abbottabad 2014;26(4):582–3

INTRODUCTION

Sexually transmitted diseases are present in all societies across the globe. Different cultures and societies show a different spectrum of these diseases. The different patterns in different societies are attributable to the difference in the social, cultural and religious values of the societies. It also depicts the awareness, literacy and the sexual habits of different people.¹ Sexually transmitted diseases are mainly transmitted through sexual intercourse but can also be transmitted by infected needles and blood transfusion. Children can be infected from infected mothers during pregnancy and delivery.²

There are many factors which pose a hindrance in not only the diagnosis and treatment of these diseases but also establishing their true incidence. This includes the factor that the patients go to Hakeems, Pirs, dispensers and fake doctors. Our social factors and ignorance of the patients is also important in preventing the patients to talk openly about these problems.³

The prevalence and patterns of sexually transmitted diseases are different in Europe and USA. This is mainly due to different sexual practices like homosexuality and oral sex.⁴ Moreover the socioeconomic structure of the society and the

medical environment also leads to a different spectrum of these diseases.⁵

A similar study was conducted by Imranullah *et al* in the region in 1995.⁶ This study was conducted to reassess the current patterns of sexually transmitted diseases in this region

MATERIAL AND METHODS

Case sheets of 512 presenting with sexually transmitted diseases January 2010–December 2014 whose diagnosis was confirmed by related lab investigation were analysed retrospectively. Patients of all ages and both sexes were included. The parameters analysed included male to female ratio, mode of transmission, age groups and marital status.

RESULTS

Out of the 512 patients 231 (45.1 %) patients had Gonorrhoea. The second commonest disease was genital warts. 60 patients (11.7 %) were diagnosed with genital warts. Non-gonococcal urethritis was seen in 57 patients (11.1%). Genital *Molluscum contagiosum* was seen in 45 patients (8.7%). Syphilis was diagnosed in 41 patients (8%). 31 cases of *Herpes genitalis* (6%) and 25 cases of Chancroid (4.9%) were diagnosed. 13 cases of *Lymphogranuloma venereum* (2.4 %) were also seen.

5 patients/were HIV positive in our study. Other disorders like *Granuloma inguinale* were not seen in our study. *Trichomoniasis*, a common disorder, was only seen in 4 of our patients. The percentage is summarised in table-1

Out of these 512 patients only 47 were females (9.1%) and 465 were males (91.9%). Of the 47 female patients 4 had *trichomoniasis*, 21 had genital warts, 13 had non-gonococcal urethritis and 9 had *Molluscum contagiosum*. The age ranged from 15-66 years with a mean of 37 years. Overwhelming majority of the patients were between the age of 19-35 years. 61% of the male patients were married. Amongst the females all of them were married.

Amongst the 465 males 37 refused any contact outside their marriage. 70% of the remaining patients gave a history of contact with prostitutes, 21% of them had a contact with homosexual boys, 7.5% with married women and 1.5 % with eunuchs. None of the females gave any history of contact outside their marriage.

Table-1: Percentage of sexually transmitted diseases

Diseases	No	Percentage
1. Gonorrhoea	231	45.1
2. Genital Warts	60	11.7
3. Non gonococcal urethritis	57	11.1
4. Molluscum contagiosum	45	8.7
5. Syphilis	41	8
6. herpes genitalis	31	6
7. Chancroid	25	4.9
8. lymphogranuloma venereum	13	2.4
9. HIV	5	.01
10. Trichomoniasis	4	.007

DISCUSSION

As expected gonorrhoea was the commonest sexually transmitted disease. This is the worldwide trend and similar findings were noted by Imranullah *et al.*^{5,6} Gonorrhoea has been endemic in all ages and societies.⁷ The patients with genital warts had the highest number of co-existing other sexual diseases. Forty-five out of 60 of these patients had other diseases. This is not surprising as it was noted in studies conducted in other centres also.⁸

The number and percentage of female patients has increased from the previous study in which only 6 out of the 185 patients were females.

However the overall percentage is still quite low. This could be due to the fact that these patients may well be presenting to female gynaecologists. The other factor could be our social set up and the stigma associated with the sexually transmitted diseases. The finding that the female patients did not give any history of contact attributed can again be attributed to our social environment but it is possible that majority of them could have acquired the disease from their husbands.

Five of our patients were HIV positive. In the study conducted by Imranullah *et al.*⁶, no case was found to be positive for HIV. This clearly depicts the rise in HIV affected patients in Pakistan. It also could signify the increase in awareness among the patients and doctors about the clinical manifestations of the disorder.

The total number of patients with sexually transmitted diseases has increased quite significantly in the last 20 years. The main reason seems to be the sharp rise in population. Other factors include the easy access to the tertiary care hospital and increasing awareness among the patients. The radical change in our social values is also an important factor. However considering the total number of patients in this time period, the percentage of patients in our region is still significantly low as compared to other countries and even other major cities of our own country.

REFERENCES

- Guthe T. The treponematoses as a world problem. *Br J Ven Dis* 1960;36:67-77
- Thin TN, editor. Lecture notes on sexually transmitted diseases. London: Blackwell;1982.
- Shah SA. Pattern of sexually transmitted diseases in Karachi. *J Pak Assoc Dermatol* 1994;2:51-6
- Johnson AM, Gill On. Evidence for recent changes in sexual behaviour in homosexual men in England and Wales. *Phil Trans R Soc Lond B Biol Sci* 1989;325:153-61
- Morton RS, editor. Sexual freedom and venereal disease. London: Blackwell;1971.
- Khan I, Rizvi K, Javed M, Shah SH. Patterns of sexually transmitted disease in hazara division. *J Ayub Med Coll* 1995;7(2):28-9.
- Bannister B. Clinical aspects of meningococcal disease. *J Med Microbiol* 1988;26:161-3.
- Carne CA, Dockerty G. Genital warts: Need to screen for co-infection. *BMJ* 1990;300:459.

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