

*PUBLIC HEALTH PAPERS*

65

# **SOCIAL AND HEALTH ASPECTS OF SEXUALLY TRANSMITTED DISEASES**

**Principles of Control Measures**



**WORLD HEALTH ORGANIZATION  
GENEVA**

# SOCIAL AND HEALTH ASPECTS OF SEXUALLY TRANSMITTED DISEASES

## Principles of control measures

Study based on the Technical Discussions held during the Twenty-eighth  
World Health Assembly, 1975

### *Contributors*

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## INTRODUCTION

The WHO Executive Board decided (Resolution EB 52.R14<sup>1</sup>) that the subject of the technical discussions during the Twenty-eighth World Health Assembly in 1975 would be "Social and health aspects of sexually transmitted diseases: need for a better approach". This decision reflects the general concern over the recrudescence of these diseases — particularly syphilis and gonorrhoea — and the financial burden they represent for the community. This concern is shared both by governmental services and by non-governmental organizations, including the International Union against the Venereal Diseases and the Treponematoses.<sup>2</sup>

The choice of this subject provides an opportunity to review the problems that arise, to exchange experiences and to endeavour to define a better approach.

## DEFINITION OF SEXUALLY TRANSMITTED DISEASES (STD)

The legal definition of venereal diseases generally covers syphilis, gonorrhoea and, in some countries, soft chancre, lymphogranuloma venereum and granuloma inguinale. There are, however, numerous other infections increasingly acknowledged as being usually or often sexually transmitted, such as non-gonococcal urethritis, trichomoniasis,

<sup>1</sup> Handbook of Resolutions and Decisions of the World Health Assembly and the Executive Board, Volume II, First Edition (1973-1974), Geneva, 1975, page 38.

<sup>2</sup> CANAPERIA, G. A. in: Actes de la Célébration du Cinquantième Anniversaire de la Ligue Nationale Belge Antivénérienne, Brussels, 1973, pp. 9-17.



candidiasis, condyloma acuminata, herpes simplex due to type II herpesvirus, molluscum contagiosum, scabies and pediculosis pubis, while a number of microorganisms other than those that cause these diseases, such as mycoplasma and cytomegalovirus, can be identified in the sex organs of both men and women.

## EXTENT OF THE PROBLEM

### *Statistics*

It is difficult to compare the statistical data from the various countries owing to disparities in the criteria and standards adopted for diagnosis and notification, in the available facilities and in the extent to which treatment is applied by private practitioners, pharmacists or others, including by the patients themselves. Even in those countries where there are numerous clinics providing figures based on acceptable methods of diagnosis, the official statistics sometimes cover only part of the problem caused by these diseases. They usually refer only to public health services, often exclusively to venereal disease clinics, and even sometimes merely to patients who have been admitted to hospital. Since in most countries sexually transmitted diseases are treated mainly by private physicians, countries with reliable or truly national statistics are very rare.

*Improvements to be made.* Statistics must be such as to make it possible to assess in good time the extent of the problems posed by these diseases and, by means of the trend-revealing data, to provide a method of assessing the impact of, or the need for, control programmes.

The general view was that the statistics had to be standardized by international agreement and broken down by stage of development and type of disease, age, sex and incidence, so that the transmission level could be continuously assessed.

It is advisable to use standardized notification methods and forms that are simple, avoid superfluous data and are applied by all the centres. It is also necessary to have suitably trained secretarial staff and to set up data gathering systems (by area or by region). The treatment centres should be obliged to furnish complete statistics on the cases treated. A central service should analyse and tabulate the data, which should then be returned as quickly as possible to each region or locality by the national information system so as to arouse and sustain interest in respect of the importance of the statistics and the resulting control measures.

The statistics cannot be considered reliable until there are improvements in the facilities, particularly the diagnostic services in many coun-