Sexually Transmissible Infections (STIs) Transmission, signs and symptoms*, possible complications, treatment/management, and risk reduction



Infection	Main modes of transmission	Signs and symptoms	Possible complications	Treatment and management	Risk reduction
Chlamydia More info	 Unprotected vaginal, anal, or oral sex with someone who has an infection. From fingers and sex toys during sex play. From mother to baby during birth. 	 For people who have a vagina: a change in vaginal discharge crampy pain in the lower abdomen pain / burning sensation when passing urine bleeding / spotting between periods or after sex pain during or after sex. For people who have a penis and/or testicles: a discharge from the penis discomfort or irritation at the tip of the penis pain when peeing swollen and sore testicles. Anus: anal discharge (including blood) and pain/discomfort. 	 Infection in the cervix, uterus and fallopian tubes known as <u>pelvic</u>. <u>inflammatory disease (PID)</u>. PID can cause: chronic pelvic pain infertility complications during pregnancy higher risk of ectopic pregnancy. Inflammation of the testicles resulting in reduced sperm count and subsequent infertility. Babies born to mothers with untreated chlamydia may develop eye or lung infections. 	Curable with oral antibiotics. Even after successful treatment, patients can still become re- infected by unprotected sexual contact with someone who has chlamydia.	 Condom or other barrier method (dental dams). Regular screening.
Gonorrhoea More info	 Unprotected vaginal, anal, or oral sex with someone who has an infection. From fingers and sex toys during sex play. From mother to baby during birth. 	 For people who have a vagina: a change in vaginal discharge crampy pain in the lower abdomen pain / burning sensation when passing urine bleeding / spotting between periods or after sex pain during or after sex enlarged and painful infected glands near the vaginal opening For people who have a penis and/or testicles: a discharge from the penis discomfort or irritation at the tip of the penis pain and burning sensation when passing urine swollen and sore testicles Anus: anal discharge (including blood) and pain/discomfort. 	 PID leading to: chronic pelvic pain infertility complications during pregnancy higher risk of ectopic pregnancy. Inflammation of the testicles resulting in reduced sperm count and subsequent infertility. Babies born to mothers with untreated gonorrhoea may develop eye infection leading to blindness. 	Curable with oral and intramuscular injection of antibiotics. Even after successful treatment, patients can still become re-infected by unprotected sexual contact with someone who has gonorrhoea. NB: There have been a few cases of gonorrhoea detected in Australia that were highly resistant to all the antibiotics routinely used to treat gonorrhoea. Increasing resistance to first-line treatment is being monitored closely.	 Condom or other barrier method (dental dams). Regular screening.
Trichomoniasis More info	 Unprotected vaginal sex. From fingers and sex toys during sex play. 	 For people who have a vagina: a frothy or smelly discharge from the vagina that is yellow, grey or green itch or irritation around the vulva or vagina, or both pain in the vagina, especially during sex discomfort in the lower part of the abdomen burning, stinging, or pain when passing urine needing to pass urine more often than usual. For people who have a penis and/or testicles (often asymptomatic): a discharge from the penis soreness of the foreskin burning, stinging, or pain when passing urine 	 Increased the risk of HIV acquisition. Adverse pregnancy outcomes including premature delivery and low birth weight babies. 	Curable with oral antibiotics.	 Condom or other barrier method (dental dams). Regular screening.

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Transmission, signs and symptoms*, possible complications, treatment/management, and risk reduction



Infection	Main modes of transmission	Signs and symptoms	Possible complications	Treatment and management	Risk reduction
Syphilis More info	 Unprotected vaginal, anal, or oral sex with someone who has an infection. Intimate skin to skin contact of an infected area during sex. From mother to unborn baby via the placenta during pregnancy (congenital syphilis). Occasionally by blood contamination, via sharing any needles, syringes, or other injecting equipment. 	There are four stages of syphilis infection, with each stage presenting different symptoms (click here for more information). All stages of syphilis are infectious, and syphilis can be passed on to sexual partners for up to two years if the person is not treated. If a syphilis infection is not treated, the signs will go away, although some may come and go for up to a year. Regardless, the syphilis infection remains in the body and can still be passed to sexual partners or via pregnancy. Some symptoms may include: • ulcers (chancre) around the mouth, penis, vagina or anus that are often painless, don't bleed and can feel like a hard button on the skin • flu-like symptoms • a red rash on the body, especially the palms of the hands and soles of the feet • swollen glands • wart-like lumps around the moist areas of the body • hair loss.	 Transmission from mother to unborn baby (congenital syphilis) leading to: miscarriage stillbirth pre-tern birth low birth weight organ, brain and nerve damage to baby. The baby born with syphilis may not have any symptoms at birth, but without treatment, will develop serious problems and can die from the infection. Long term untreated (late latent) syphilis in adults can cause problems with nerves, the brain and the large vessels near the heart, including deforming skin lesions (known as 'gummas'). 	Curable with intramuscular injection of antibiotics. Even after successful treatment, patients can still become re-infected by unprotected sexual contact with someone who has infectious syphilis.	 Condom or other barrier method. Regular screening (especially if pregnant). Needle and syringe program and safer injecting.
Genital herpes ^{More info}	 Unprotected vaginal, anal, or oral sex with someone who has an infection. Intimate skin to skin contact of an infected area during sex including skin outside areas of condom coverage. From mother to baby during pregnancy and birth. 	 A mild tingling or itching, which lasts 12 to 24 hours. Small blisters accompanied by irritation, pain and swelling of the affected area. Formation of shallow ulcers, usually a couple of days after the blisters break. Potential swelling and tenderness in the glands around the groin. 	 Pain. Decrease in sexual functioning. The baby is at risk of neonatal herpes if the mother contracts genital herpes close to the time of birth. This can cause eye or throat infections, damage to the central nervous system, and in rare cases the baby can die. 	Not curable, however symptoms can be managed with antiviral medication.	 Condom or other barrier method. Suppressive treatment.
HIV More info	 Unprotected vaginal, anal, or oral sex with someone who has an infection. Sharing any needles, syringes, or other injecting equipment. From mother to child during pregnancy, childbirth, or breastfeeding if the mother is not on treatment. Other blood to blood contact (tattooing, needle stick injuries). Having another sexually transmissible infection (STI) can increase the chances of HIV transmission. 	 People who have been recently exposed to HIV may experience flu-like symptoms, while others will have no symptoms at all. After initial symptoms disappear, HIV may not cause any symptoms for many years. During this time, the virus can still be transmitted to others. 	 If left untreated over time, HIV destroys the body's immune system. When the damage is severe, people can develop other life-threatening illnesses. At this stage of HIV infection, a person is said to have AIDS. 	Not curable, however symptoms can be managed with HIV antiretroviral treatment (ART). People living with HIV who consistently take ART daily as prescribed can achieve and maintain an undetectable HIV viral load. This reduces both the adverse effects of the virus and the risk of onward transmission (U=U).	 Condoms. Regular screening. U=U. PrEP. PEP. Needle and syringe program and safer injecting.

* Most people will have no symptoms for some STIs. Even if a person doesn't experience symptoms, the infection is still in the body, can still be passed onto others through unprotected sexual contact and without treatment can cause health complications later on. Regular testing is the only way to determine if someone has an infection. For people experiencing any of the above symptoms, encourage them to have a sexual health check as soon as possible.