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Are Sexually Transmitted Infections the neglected orphan in our response to HIV/AIDS, STI and TB (HAST) in South Africa?

Geoffrey Setswe^{1,2}, Sigida S¹, Chauke T¹, Ramaliba T¹, Mohlabane N¹ and Lukhele P¹

¹University of South Africa (UNISA), South Africa

²University of Venda

Introduction: Every day more than 1 million people are newly infected with STIs that can lead to morbidity, mortality, and an increased risk of HIV acquisition. STIs account for a high proportion of incident HIV infections and are also responsible for a high proportion of adverse pregnancy outcomes. The monitoring of STI prevalence is crucial for the evaluation of STI treatment programs, and can also provide an indirect measure of change in sexual behaviour. There is currently no national approach for monitoring the prevalence of STIs except for HIV and HSV-2. This is despite the fact that STIs accounted for approximately 14% of all new HIV infections in South Africa in 2010 with an estimated 4 million people receiving treatment for STI's every year.

Design and Methods: A purposive and targeted search was used to obtain literature from all sources available in the public domain and the grey literature. Information was extracted using an abstraction tool. We conducted a quantitative review of data on STIs.

Findings and Discussion: There is a lack of recent data on the extent of STI as the last national survey on STI in the South African public health sector was conducted in 2003 (SANAC, 2014). Johnson et al (2005) said lack of consistency between sentinel surveys precludes a rigorous analysis of trends in STI prevalence. "The last national survey on the quality of STI treatment in the South African public health sector was conducted in 2003" (SANAC, 2014: 57). The proportion of new HIV infections in adults that were attributable to curable STIs reduced from 39% in 1990 to 14% in 2010, while the proportion of new infections attributable to genital herpes increased*.

Monitoring of syphilis was discontinued in 2011 - this limited the possibility of tracking rapid changes in sexual behaviour for which syphilis is an indicator.

The latest data available on HSV-2 was from the 2012 antenatal survey which found a prevalence of 55.8% among pregnant women in four provinces (KZN, Gauteng, WC and NC). This was the first time HSV-2 prevalence was measured nationally and trend data is therefore not available. Eventhough modelled estimates for females aged 15-49 in 2005 were 54.4%, there were no alarm bells raised for these staggering statistics.

Conclusion and Recommendations: There is a considerable need for more research to more accurately map the variations in STI rates, as well as the risk factors underpinning STI spread. This work would benefit from more accurate population-based STI incidence and prevalence data. There is a need for more nationally representative STI prevalence studies in South Africa and more periodic cross sectional studies that can be used to monitor prevalence trends and the success of STI treatment initiatives (Johnson et al, 2005: 291). To maximize HIV prevention efforts in South Africa, public health officials should consider testing for other STIs when they test for HIV. Prepare a National STI strategy to ensure STIs are no longer neglected in our response.

Speaker Biography

Professor Geoff Setswe is a Deputy Executive Director in the HIV/AIDS, STI & TB Programme. He holds a Doctor of Public Health (DrPH) degree from the University of Limpopo, and obtained a Masters of Public Health (MPH) from Temple University in Philadelphia, USA (1998). His doctorate focused on behavioural interventions for reducing HIV risk among employees. The study provides policy makers and implementers with evidence of behavioural interventions that work to reduce HIV risk among employees in various workplaces. He worked for the HSRC as Chief Research Specialist and Research Director from 2006 to 2010. Prof. Setswe is an expert on the social aspects of HIV and AIDS and on the development of research programs to reduce HIV transmission and the impact of AIDS. He has been principal investigator on more than 12 research projects in HIV/AIDS and public health in the past 8 years. His research interests are in the behavioural and social aspects of HIV/AIDS/TB/STI, AIDS/TB policy, epidemiology and general public health issues.

e: gsetswe@hsrc.ac.za