People make healthy choices for healthy lifestyles—Sexual Health
Last updated: September 2013
Joint Strategic Needs Assessment

Summary

- Sexual health needs vary according to factors such as age, gender, sexuality and ethnicity, and some groups are particularly at risk of poor sexual health. Poor sexual health outcomes disproportionally affects residents suffering health inequalities.
  
  The Isle of Wight is ranked 249 out of 326 local authorities, rank 1 being the worst for the diagnosis of sexually transmitted infections (STIs) (Health Protection Agency (HPA), 2012).
- The diagnosis rate for acute STIs for the Isle of Wight is 491.8 per 100,000 residents compared to an England average of 792.1 per 100,000.
- 66% diagnosis of acute STIs for the Isle of Wight was in the age group 15-24.
- The National Chlamydia Screening Programme (NCMP) targets the 15-24 age group. Public Health England (PHE) recommends that local areas achieve a diagnostic rate of 2400 per 100,000 resident 15-24 year olds or more to produce a fall in Chlamydia prevalence (PHE 2013). The Isle of Wight is achieving a diagnosis rate of 1918.2 per 100,000.
- The prescribing of Long Acting Reversible Contraception (LARC) in General Practice on the Isle of Wight is achieving high rates compared with England and statistical neighbours.
- U18 conceptions over the 1998-00 to 2008-10 period, the Isle of Wight has maintained a consistently lower rate compared to England, although the difference is not statistically significant. Over time the rate shows a gradual decline in line with England and the South East, although, again, this is not statistically significant.
- The Isle of Wight has a lower rates of all age abortion than England and Wales. In 2011, 16% of conceptions against 20.8%.(ONS 2013)

The level of population need

Context and Background

Sexually Transmitted Infections (STIs) and Human Immunodeficiency Virus HIV are transmitted primarily through unprotected sexual intercourse, anal, vaginal and oral. HIV which is a blood borne virus (BBV) can also be transmitted from mother to baby during pregnancy and from blood to blood contact such as sharing needles.

Not everyone with an STI will have symptoms, but if STIs are left untreated they may result in serious health complications; such as Pelvic Inflammatory Disease (PID), infertility, tubal pregnancy and chronic pelvic pain.

Additional impacts of poor sexual health include unintended pregnancies. Unintended pregnancies in young women under 18 are more likely to lead to poorer health and social outcomes for both mother and child.

Access to confidential open access sexual health services which include all methods of contraception that are free at the point of access significantly reduces the risk of unintended pregnancies.

There is a link between excessive alcohol use by young people leading to more risky sexual behaviour.(DH 2013)

Sexually Transmitted Infections (STIs)

New STI diagnoses rose by 2 per cent from 2010 to 2011 (from 419,773 to 426,867), primarily associated with increased rates of gonorrhoea, syphilis and genital herpes. In 2011 the diagnosed HIV prevalence rate in Isle of Wight was 0.4 per 1,000 population aged 15-59 years compared to 2 per 1,000 in England.

Young heterosexuals (15-24 years old) and men who have sex with men remained at highest risk, with increases in testing and continuing high levels of unsafe sexual behaviour contributing to the rises recorded (HPA, 2012).
Figure 1 shows the rate of acute STIs per 100,000 residents for the Isle of Wight and ONS comparators for 2011.

Figure 1:

The England average rate is 792.1 per 100,000 and the Isle of Wight has the second lowest rate at 491.8 per 100,000 population compared to its comparators. The number of newly diagnosed cases of selected STIs has remained fairly constant on the Island between 2009 (597) and 2011 (586).

Chlamydia

Chlamydia is the most common bacterial sexually transmitted infection in England, with rates substantially higher in young adults than any other age group. The majority of infections are asymptomatic and can have serious health consequences (including infertility) if untreated. (NCSP 2013)

Figure 2 shows the chlamydia screening rates for under 25 years as part of the NCSP for the Isle of Wight, statistical neighbours and England. The IOW screening rates are higher than England average but lower than the South East region.

Figure 2:

England has seen a 55% increase in chlamydia diagnosis with 143,862 new cases diagnosed in 2011. This compares with 92,948 new cases at the start of the programme in 2004.

Figure 3 shows the rate of chlamydia diagnosis in the 15-24 age group per 100,000 residents for the Isle of Wight and its comparators.

Fig 3:

The rate of chlamydia diagnosis per 100,000 young people aged 15-24 years old on the Isle of Wight was 1918.2 for 2011 this compares closely with the England rate of 2089.6.

Chlamydia diagnosis has continued to rise on the Island in the 15-24 age group. In 2009 there were 336 new cases; this increased to 367 newly diagnosed cases in 2011 a rise of 9.2% this is most likely to be as a result of proactive targeted screening as part of the NCSP.

Genital warts

Genital warts are the most common viral STI diagnosed in the UK and are caused by certain strains of human papillomavirus (HPV). Most HPV are asymptomatic, cause little problem and resolve on their own. However, some types of HPV cause genital warts or certain cancers such as cervical cancer (SEPHO, 2009).

On the Island the cases of diagnosed genital warts has fallen steadily from 218 cases in 2009 to 164 cases in 2011.

Syphilis is a bacterial STI with higher rates found in MSM and adults over 25 years.

Gonorrhoea is also a bacterial infection with higher rates found in MSM and young adults.

The instances of gonorrhoea and syphilis on the Island are very small and in some cases less than 5; this makes accurate analysis of the data difficult, as any
changes observed between years will be subject to natural variation.

Genital Herpes is the most common ulcerative STI and in the UK. Whilst it can be successfully managed with anti-viral therapy to reduce future outbreaks and reduce onward transmission there is no cure as the virus is able to remain inactive within the body.

There is a higher risk of contracting genital herpes if an individual is immunosuppressed. It is associated with a greater risk of acquiring HIV.

Figure 4:

HIV & AIDS (Acquired Immune Deficiency Syndrome)
HIV is an infection associated with serious illness, high cost of treatment and care, significant mortality and high number of potential life years lost. HIV can lead to the development of AIDS, this occurs when the HIV infection has led to the number of immune system cells (CD4) having dropped to a certain level. (HPA)

The Isle of Wight has the second lowest rate of 0.4 cases per 1,000 population, compared to the England average of 2 cases per 1,000.

Contraception
Women in England have a wide range of contraceptives available to them, but they may not be aware of all methods and the differences between them. There are three main categories of contraception:

- User dependent methods are methods you have to think about regularly or each time you have sex. You must use them according to instructions, e.g. combined oral contraceptive pill (COC)
- Long-acting reversible contraception (LARC) methods, e.g. intra dermal implant
- Sterilisation is a surgical procedure

LARC methods do not depend on daily concordance and is highly cost effective when used appropriately.

Figure 5 shows the percentage rate of LARC prescribed by GP practices per 1000 GP registered female population aged 15-24.

Abortion
There are many complex reasons why a woman might decide to have an abortion, including personal circumstances and or a risk to health. The Isle of Wight has lower rates of all age abortion than England and Wales in 2011, 16% of conceptions against 20.8 %. (ONS 2013)
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References


BASHH http://www.bashh.org