**Sexually transmitted Diseases "STDs"**

Definition: It is a large number of disease's transmitted usually by sexual intercourse. The old name was venereal disease in 1916 was mainly three diseases (syphilis, gonorrhea and chancroid'), then by the time another two diseases added (lymphogranuloma venerium &granuloma inguinal ), in 1965, the WHO changed the name venereal disease into STDs because of two reasons :

1. because of stigma of the name veneria .
2. these diseases affect not only the genital organs but have systemic effects. Until 1989 the number of pathogens became 28 forming, 30 clinical syndromes & more than 50 diseases.

According to the Centers for Disease Control and Prevention (CDC) in February 2013, about 20 million people are diagnosed with an STI each year in the United States, and there are about 110 million total STD cases. About half of these new infections occur in young people between the ages of 15 and 24. In 2011, the CDC reported about 1,412,000 new chlamydia infections and about 14,000 new cases of syphilis in the United States. Chlamydia is more common in people 15–24 years of age and syphilis is more common in men.

**The new classification according to the cause** :

1. viral : HIV, Herpes simplex virus, Human papilloma virus, Cytomegalo virus, Hepatitis virus .
2. Bacterial : e.g. Niesseria gonorrhea (gonorrhea), treponema pallidum (syphilis), Haemophillus ducrey (chancroid).
3. Protozoal : Trichomonas vaginalis, Entamaeba histolytica & Giardia Lamblia.
4. Fungal : Candida albicans.
5. Ectoparacites : Sarcoptes scabiae (scabies)

**(AIDS) Acquired Immunodeficiency Syndrome**

Acquired immunodeficiency syndrome (AIDs) was first recognize in 1981 in a cluster of disease associated with the loss of cellular immunity in adult who had no obvious reason for percentage such immunodeficiency. AIDs was subsequently shown to be the late clinical stage of infection with the human immunodeficiency virus (HIV),

**Clinical feature :** Within several weeks to several months after infected with HIV, the patient develops an acute self- limited mononucleosis like illness lasting for one or two weeks. free of symptoms for many months to years then opportunistic infections & constitutional and neurologic symptoms.

-onset clinical illness is usually insidious with non specific symptoms such as :. Lymphadenopathy

* Anorexia
* Chronic diarrhea
* Weight loss
* Fever
* Fatigue

The opportunistic infections : as indicators for AIDS such as :

* Pneumonia
* Toxoplasmosis
* Esophageal or (LRT) lower Respiratory tract candidiasis
* Disseminated a typical mycobacteriosis
* Pulmonary or CNS or ocular CMV (Cytomegalo virus) infection
* Chronic ulcerative mucocutaneous or disseminated herpes simplex infection.

**Infectious agent :** Human Immunodeficiency Virus (HIV)

**Occurrence :** mainly USA, Haiti, Africa, & Europe. In the USA as of 1990 nearly all patient with AIDS fall into the following categories:

* Homosexual about 70%
* Intravenous drug users
* Heterosexual contacts of infected partners
* Children born to infected mothers
* Patients with hemophilia

Nearly 90% of all patients with AIDS are 20-49 years of age.

**Mode of transmission :**

Routine social or community contact with an HIV infected person. Carriers no risk of transmission only by sexual exposure and exposure to blood or tissue (contaminated intravenous needles & syringes, transfusion of infected blood or it's components e.g. clotting factor concentrations for hemophilia cases), vertical transmission from mother to infant during pregnancy and delivery or breast feeding transmission of infected blood or its components. Less common mode of transmission include connect of abraded skin or mucous with infectious body secretion and the transplantation of HIV infected tissue organs.

While virus has on occasion been found in saliva, tears, urine, and bronchial secretion, transmission after contact with these secretions has not been reported.

**Incubation period :**  variable. Although the time from the infection to the development of detectable antibodies is generally less than one month, the time from HIV infection to diagnosis of AIDs has an observed rang of less than one year to 15 years or longer. The median time to development of AIDs in infected infant is shorter than the adult.

**Period of communicability** : not known precisely, begins early after onset HIV infection and presumably extended throughout life.

**Method of controls :**

1. Preventive measure :
2. Public & school health education about mode of transmission.
3. Avoid sexual intercourse with known or suspected HIV infected person, should be use latex condoms.
4. Use of disposable syringes and needles.
5. Avoid contaminate of plasma & blood &screen for clotting factor products .
6. WHO recommends immunization for children by vaccination .
7. Control of patients, contacts, & the immediate environment :
8. Report to local health authorities
9. Isolation
10. Concurrent disinfection
11. Quarantine , None
12. Immunization of contact ,None
13. Specific treatment, select antiviral agent e.g. (AZT)
14. All HIV infected should have tuberculin test for TB.