

## Issue 63 – November 2011

### Infections to be aware of

The Kirby Institute (formerly the National Centre in HIV Epidemiology and Clinical Research) has published the *HIV, viral hepatitis and sexually transmissible infections in Australia Annual Surveillance Report 2011*. There are a range of infections that sex workers and other participants in the sex industry should be aware of.

#### Chlamydia

The most commonly reported sexually transmissible infection (STI) is chlamydia. Rates of this infection have been increasing for a decade, and according to the report, diagnoses of chlamydia have more than tripled in both males and females since 2001. Nationally, there were 74,305 diagnoses of chlamydia in 2010, representing a per capita rate of diagnosis of 319 per 100,000 population. This is a 17 percent increase over the rate in 2009. Females are more likely than males to be diagnosed with the infection, and rates are greatest in the 15 to 29 age bracket. In 2010, 19,216 persons in Queensland were diagnosed with chlamydia, more than any other State or Territory. The rate of chlamydia in Queensland is higher than the national rate, at 405 per 100,000 population.

Studies have consistently demonstrated low rates of STIs amongst sex workers and this report provides further evidence. It says that: "In the past 5 years, more than 75% of men and women seen for the first time through a network of sexual health services were tested for chlamydia" (p. 8). This is a reference to the Australian Collaboration for Chlamydia Enhanced Sentinel Surveillance (ACCESS). Of the priority populations tested, female sex workers had the lowest rate of chlamydia. Just 5.6 percent of female sex workers tested positive. This compared to 20.7 percent of both male and female Aboriginal and Torres Strait Islanders, 16.3 percent of young heterosexual males, 15.6 percent of young heterosexual females, and 9.1 percent of men who have sex with men. This would tend to indicate that sex workers are more likely to have safer sex than these other priority populations, supporting research that safer sex is the norm for sex workers.

#### Gonorrhoea

Nationally, the rate of diagnosis of gonorrhoea increased by 25 percent, from 7,993 cases in 2009 to 10,015 in 2010. The national rate of diagnosis was 43 per 100,000 population in 2010, compared to 35 per 100,000 in 2009. In Queensland, there were 2,072 cases of gonorrhoea diagnosed in 2010, up from 1,558 in 2009 (a 33 percent increase). The population rate of diagnosis is comparable to the national

average, at 44 per 100,000 population. Males aged from 15 to 29 years are most likely to be diagnosed with gonorrhoea.

#### Infectious syphilis

The rate of diagnosis of infectious syphilis was stable amongst the female population between 2004 and 2010, with less than 2 females diagnosed per 100,000. Conversely, according to the report: "The rate of diagnosis of infectious syphilis increased sharply in the male population from 5.2 in 2005 to 12.1 per 100,000 population in 2007 and then slowly declined to 8.9 in 2010 ... The increases occurred in all State and Territory jurisdictions other than the Northern Territory, and were almost completely confined to men who have sex with men" (p. 17).

#### Viral hepatitis

Diagnoses of acute hepatitis A infection are low in Australia, and except for 2009, the rate of diagnosed infection has been at or below 1.4 per 100,000 population between 2006 and 2010. The report estimates there are 170,000 people living in Australia with hepatitis B. Between 2006 and 2010, the rate of diagnosis has been stable at about 31 per 100,000 population. There are an estimated 221,000 people with chronic hepatitis C living in Australia. The rate of diagnosis of hepatitis C has declined from 58.6 per 100,000 population in 2006 to 52 per 100,000 in 2009.

Transmission of hepatitis B and hepatitis C infection in Australia is predominantly related to injecting drug use.

## HIV

By the end of 2010, some 30,486 cases of HIV infection had been diagnosed in Australia, and an estimated 21,391 persons were living with a diagnosed HIV infection. This represents a national prevalence of 96 per 100,000 population. Almost half of the number of people living with a diagnosed HIV infection are estimated to be in New South Wales. It is estimated that there are 3,557 persons living in Queensland with a diagnosed HIV infection (3,188 males and 369 females).

For the past five years, new diagnoses of HIV have been relatively stable nationally at around 1,000 annually, "following a steady increase from 719 cases in 1999" (p. 9). In 2010, the number of new diagnoses of HIV infection was 1,043. Most diagnoses are in men who have sex with men (66 percent from 2006 to 2010), with a quarter of diagnoses attributed to heterosexual contact in the same period. In respect of heterosexual transmission, the majority of people were from high prevalence countries or their partners.

In 2010, Queensland experienced its highest rate of HIV diagnosis of 5.4 per 100,000 population (242 diagnoses, up from 209 in the previous year). This compares to a rate of diagnosis of 2.8 per 100,000 population in 2001. In terms of risk behaviour, according to the 2010 Gay Community Periodic Survey, 24.5 percent of respondents in Queensland said that they engage in unprotected

anal intercourse with casual partners, rising to 30.1 percent with regular partners.

## How to reduce the risk of acquiring an STI

The risk of acquiring an STI can be substantially reduced by always practising safer sex. This means consistent use of prophylactics (male condoms, female condoms, and dental dams) for both sexual intercourse and oral sex (and the use of lubricant, where appropriate).

The report can be accessed here:

<http://www.med.unsw.edu.au/NCHECRweb.nsf/page/Annual+Surveillance+Reports>

## Working whilst knowingly infective with an STI

For the benefit of sex workers at licensed brothels, the PLA has recently produced a multilingual (English, Chinese, Korean, and Thai) pamphlet on working whilst knowingly infective with an STI. Copies of the pamphlet have been distributed to licensed brothels, sexual health clinics (in areas with brothels), Respect Inc, the Ethnic Communities Council of Queensland, and Family Planning Queensland (Brisbane). Copies of the pamphlet may also be downloaded from the publications area of the PLA website: [www.pla.qld.gov.au](http://www.pla.qld.gov.au).

## The PLA licence & certificate register

Under s. 111 of the *Prostitution Act 1999*, the Executive Director of the Office of the PLA must keep a licence and certificate register. The register must include full particulars of:

- the name of each holder of a licence or certificate

- the granting, giving, renewal, surrender, suspension or cancellation of a licence or of a certificate
- the address of the premises at which the holder of a licence may operate the brothel under the licence
- the addresses of the licensed brothels for which the holder of a certificate is authorised to be an approved manager
- all entries into licensed brothels by police officers.

The register may be inspected free of charge by any member of the public. If a member of the public wants to make a copy of an entry in the register, a fee is payable.

## Suggestions for articles

Are there any issues or topics that you would particularly like featured in, *In Touch*? Your ideas for articles will help to keep the newsletter relevant and topical. Suggestions can be submitted via email to [pladmin@iprimus.com.au](mailto:pladmin@iprimus.com.au).

## 2011 PLA meeting dates

The PLA Board generally meets on the first Monday of each month. Meeting dates for the remainder of 2011 are: 5 December. *Whilst current at the time of printing, these dates are tentative and subject to change without notice.*

## Vacancies for Approved Manager positions

Nil advised.

Please note that approved manager advertisements may be submitted at any time for inclusion in the next edition of the newsletter. They should be emailed to [pladmin@iprimus.com.au](mailto:pladmin@iprimus.com.au).