



Let's Talk
About It...

Hepatitis, HIV and Sexually
Transmissible Infections (STIs)

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Let's Talk About It...

Hepatitis, HIV (Human Immunodeficiency Virus) infection and STIs (Sexually Transmissible Infections) are health problems in many countries, including Australia. People who were born, have lived or travelled overseas may be at higher risk of getting some of these infections. Many people with these infections look and feel healthy and may not know that they have been infected. This booklet provides information about these infections and the importance of being tested early and getting treatment if necessary.

Hepatitis

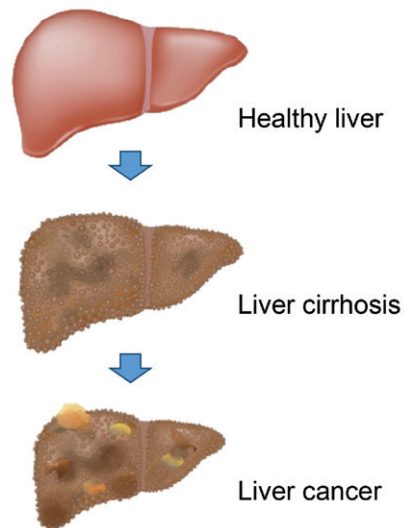
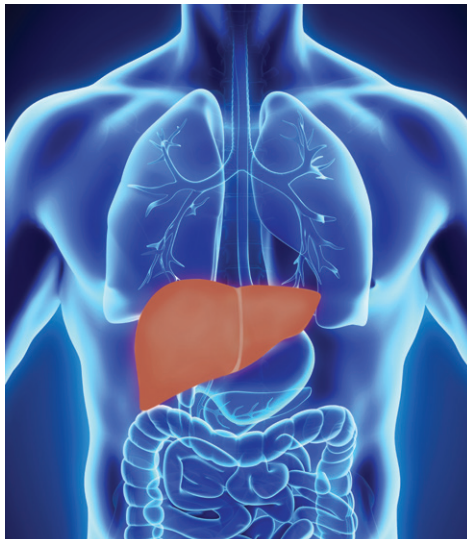
Hepatitis

What is Hepatitis?

Hepatitis means inflammation (swelling) of the liver and is a very common liver disease. The liver is the largest organ inside the body and has many functions. For example, it cleanses toxins and chemicals from the blood; stores vitamins; helps digestion and processes food into nutrients. Hepatitis can be caused by:

- Viruses
- Too much alcohol
- Some drugs/chemicals
- Other diseases and conditions such as fatty liver

Hepatitis caused by viruses is called **viral hepatitis**. It is the most common form of hepatitis in the world and can spread from person to person. There are five main types of viral hepatitis: **hepatitis A, hepatitis B, hepatitis C**, hepatitis D and hepatitis E, the first three are the most common. They are caused by different viruses and have different transmission routes, tests, treatment and prevention methods. This booklet provides detailed information about the three most common viral hepatitis.



The differences between the three most common viral hepatitis

	Hepatitis A (HAV)	Hepatitis B (HBV)	Hepatitis C (HCV)
Cause	Hepatitis A virus	Hepatitis B virus	Hepatitis C virus
Transmission	Faecal – oral route (poo - mouth)	<ul style="list-style-type: none"> • Mother to baby at birth • Blood contact • Sexual contact 	<ul style="list-style-type: none"> • Blood contact • mother to baby at birth- very low
Acute infection (<6 months)	Yes	Yes	Yes
Chronic infection (>6months)	No	Yes	Yes
Chance of developing a chronic infection	–	<ul style="list-style-type: none"> • 80-90% if infected as an infant • 30% if infected as a child • Less than 5% if infected as an adult 	75% infected at any age
Chance of developing liver cirrhosis/ cancer without intervention	–	25%	20-30%
Diagnosis	Hepatitis A blood test	Hepatitis B blood test	Hepatitis C blood test
Medication	No	Yes – Only some people need, usually lifelong	Yes – All people need, 8-12 weeks treatment
Cure	Most recover naturally	No	Yes – over 95%
Regular check-ups	No	Yes – All people with chronic hepatitis B, with or without treatment	Yes – people with chronic hepatitis C who have not had treatment or have been diagnosed with liver cirrhosis
Prevention	Vaccine	Vaccine	No vaccine – avoid blood
Re-infection	No	No	Yes
Breastfeeding	Yes	Yes	Yes – but not when on treatment

For more details, please continue reading.

Hepatitis A

Hepatitis A is caused by the hepatitis A virus (HAV). It is not common in Australia but is very common in many other countries. Hepatitis A is only a short-term infection, and does not cause long-term liver damage. If people have had hepatitis A once, they will be immune (protected) for life, and will not get it again.

How do people get hepatitis A?

The hepatitis A virus is found in faeces (poo). It is spread through **food or drink** that is contaminated with faeces from an infected person. This is more likely to happen in countries where food and water is not safe and can easily be infected by germs such as the hepatitis A virus. It can also happen if infected people have poor hygiene, such as not washing their hands after going to the toilet, they may then pass the virus to the food or drink they prepare. Sometimes people in Australia can get hepatitis A from eating infected food brought in from overseas, or through close contact with an infected person who recently traveled overseas.

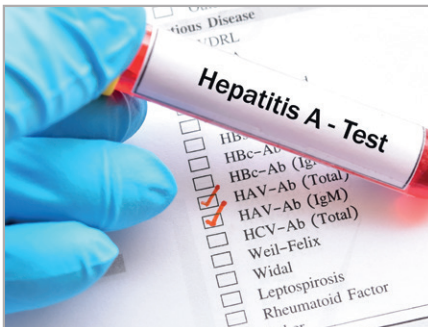
What are the symptoms of hepatitis A?

People with hepatitis A do not usually have any symptoms, especially children. But some people may have symptoms such as:

- Fever
- Fatigue (feeling tired)
- Loss of appetite (not feeling hungry)
- Nausea (feeling like you want to vomit)
- Vomiting
- Abdominal pain
- Dark-coloured urine
- Grey-coloured stools (poo)
- Joint pain
- Jaundice (yellow skin, yellow eyes)

How do people know if they have hepatitis A?

The only way for people to know if they have hepatitis A is to have a specific



blood test for hepatitis A. All General Practitioners (GPs - medical doctors who are the first contact for all daily health matters) can order the test.

Are people tested for hepatitis A before they come to Australia?

People are not required to have a test for hepatitis A before coming to Australia.

How does hepatitis A affect people?

Some people may feel unwell if they have hepatitis A, but it does not cause long-term damage to the liver, and deaths caused by hepatitis A are very rare.

Is there treatment for hepatitis A?

There is no specific treatment for hepatitis A.

Most people with hepatitis A need to:

- Rest
- Drink plenty of water
- Avoid smoking
- Avoid drinking alcohol

Some people may feel very sick when they have hepatitis A and may require treatment for their symptoms.

How can people protect themselves from hepatitis A?

There is a **vaccine** for hepatitis A. Vaccination is the best way to prevent hepatitis A. The hepatitis A vaccine involves 2 injections. People can get the vaccine from their GP and most people need to pay for it.

If a person has already been vaccinated for hepatitis A, or had hepatitis A in the past, they already have immunity (protection) and do not need the hepatitis A vaccine again.

You can also reduce the risk by having good hygiene including **always** washing your hands after going to the toilet and before preparing food; drinking boiled or bottled water and eating cooked food while travelling in countries where water and food may be unsafe.

Hepatitis B

Hepatitis B is caused by the hepatitis B virus (HBV), and it is a major health problem among people who were born in areas where hepatitis B is common, such as **Asia, the Pacific Islands, Africa, the Middle East and parts of South America**. Many people coming to Australia may have been infected with hepatitis B in their home country without knowing it.

Acute hepatitis B (short-term): when a person is infected with the hepatitis B virus and the infection lasts **less** than 6 months. Hepatitis B can be an acute or chronic infection. Some people (most adults) with acute hepatitis B can clear the virus naturally from their body within six months. This means they are cured and will not get hepatitis B again, and also do not need the hepatitis B vaccine.

Chronic hepatitis B (long-term): when a person with acute hepatitis B cannot clear the virus naturally and the infection lasts **longer** than 6 months. **People with chronic hepatitis B usually have it for life.**

The chance of developing chronic hepatitis B depends on the age when first infected by the virus: about 80-90% of infants, 30% of children and less than 5% of adults infected with the hepatitis B virus will develop chronic hepatitis B. Thus, **babies and children who are infected are more likely to develop chronic hepatitis B.**

Both people with either acute or chronic hepatitis B can infect others.

How do people get hepatitis B?



People can get hepatitis B through:

- **Mother-to-baby** transmission – a pregnant woman with hepatitis B can pass the hepatitis B virus to her baby during birth. In many countries, this is the most common way to get hepatitis B.
- **Blood** transmission – there are many ways people can get hepatitis B through contact with infected blood, even a very small amount. For example:
 - The use of unsterile medical or non-medical equipment. Sterilisation is a process to kill viruses. In some countries equipment such as needles and syringes may not be sterilised properly after use. Therefore, viruses can be spread to another person when the same equipment is used again. In Australia, it is safer due to strict infection controls.
 - Sharing personal care items that may have blood on them, for example, razors and toothbrushes.
 - Body or ear piercing, tattooing and other cosmetic procedures (if the equipment or tools used are not sterilised properly).
 - Cultural practices and traditional treatments that involve cutting or piercing the skin (if the equipment or tools used are not sterilised).
 - Child-to-child and close family contact, normally through contact with open sores, cuts or wounds.
 - Blood transfusion or blood products, in countries where blood and blood products are not tested for the hepatitis B virus. In Australia, all blood and blood products are carefully tested to make sure they are safe.
 - Sharing injecting drug equipment.
- **Sexual** transmission - hepatitis B can also be passed on through sex. However, the chance of an adult developing chronic Hepatitis B is very low (less than 5%).

People **cannot get** hepatitis B through the following ways:

- Sharing food and drinks
- Sharing cutlery, plates, cups, chopsticks, bowls etc.
- Shaking hands
- Hugging
- Kissing
- Coughing
- Sneezing
- Using public toilets or swimming pools
- Breastfeeding
- Mosquito bites

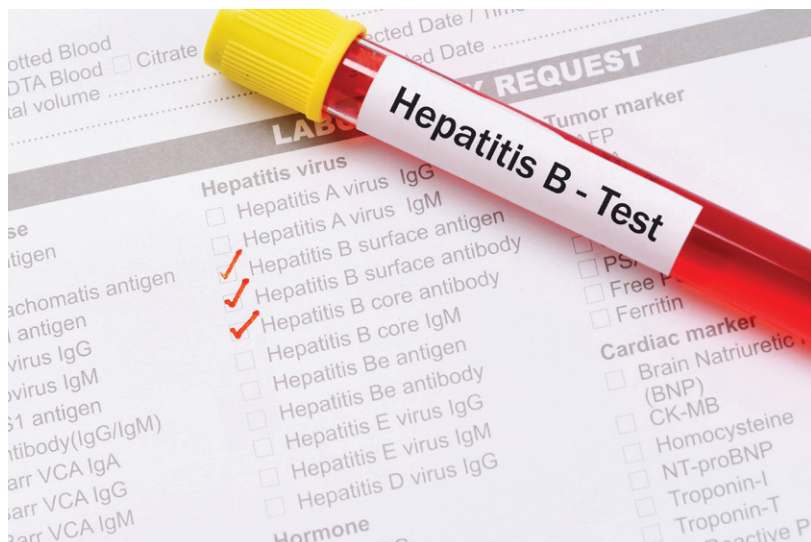


What are the symptoms of hepatitis B?

In Australia around 30% of people with hepatitis B do not know they have it because many people with hepatitis B do not have any symptoms. Some people may experience one or more of the symptoms similar to Hepatitis A (please refer to page 7).

How do people know if they have hepatitis B?

The only way for people to know if they have hepatitis B is to have a specific **blood test for hepatitis B** (it is different from common blood tests). All GPs can order the test, and it should include tests for **hepatitis B surface antigen (HBsAg), hepatitis B surface antibody (HBsAb), and hepatitis B core antibody (HBcAb)**.



The table below can help people understand their results.

Do I have hepatitis B?	Test results		What is my status?	What to do next?
No	HBsAg	Negative (-)	Not protected	Consider a hepatitis B vaccination to get protected
	HBsAb	Negative (or <10 IU/L) (-)		
	HBcAb	Negative (-)		
	HBsAg	Negative (-)	Protected because of hepatitis B vaccination (immune)	Nothing
	HBsAb	Positive (or >10 IU/L) (+)		
	HBcAb	Negative (-)		
	HBsAg	Negative (-)	Protected because of past hepatitis B infection and cured naturally (immune)	Nothing
	HBsAb	Positive (or >10 IU/L) (+)		
	HBcAb	Positive (+)		
Yes	HBsAg	Positive (+)	Hepatitis B	Further tests. If chronic: -Lifelong regular check-ups -Treatment if required
	HBsAb	Negative (or <10 IU/L) (-)		
	HBcAb	Positive (+)		

HBsAg means Hepatitis B Surface Antigen (also written as HepBsAg). If it is positive, it means you have hepatitis B.

HBsAb means Hepatitis B Surface Antibody (also written as HepBsAb or anti-HBs). If it is positive, it means you are immune to or protected against hepatitis B.

HBcAb means Hepatitis B Core (Total) Antibody (also written as HepBcAb or anti-HBc). If it is positive, it means you had hepatitis B in the past or currently have hepatitis B.

If you have hepatitis B, your family members, sexual and household contacts should also get tested.

Are people tested for hepatitis B before they come to Australia?

Most people are not required to be tested for hepatitis B. Only the following groups are required to get tested:

Permanent and provisional visa applicants who:

- are aged 15 or over and intend to work as or study to be a doctor, dentist, nurse or paramedic
- are aged 15 or over and apply for an onshore protection type visa
- are pregnant and plan to have the baby in Australia
- are a child for adoption or a child in the care of an Australian state or territory government welfare authority

Temporary visa applicants who:

- intend to work as or study to be a doctor, dentist, nurse or paramedic
- are pregnant and intend to have the baby in Australia

You can find updated and detailed information at

<https://immi.homeaffairs.gov.au/help-support/meeting-our-requirements/health>

People should consider having a hepatitis B test after arriving in Australia if they are not part of the above groups.

How does hepatitis B affect people?

About 1 in 4 (25%) people with chronic hepatitis B can develop **serious** liver disease, including liver failure (the liver stops working), liver cirrhosis (scarring of the liver), or liver cancer. These can be largely prevented if people have regular checkups and take treatment if required.

Is there treatment for hepatitis B?

Yes, there are treatments for **chronic hepatitis B** that reduce the amount of virus in the body, and help prevent liver damage, cirrhosis and liver cancer. However, this is not a cure. **Currently, most people who start treatment need to continue for the rest of their life.** Not all people with chronic hepatitis B need treatment, but **all people with chronic hepatitis B need regular check-ups** by their doctor for their whole life (please refer to the B Healthy-My guide to chronic Hepatitis B booklet for more details). Chronic hepatitis B can flare up (suddenly change) and cause liver damage at any time without a person feeling unwell. Hepatitis B may not cause problems for many years, but for some people, liver damage may develop quickly. Check-ups are the only way to find out if any liver damage has or is occurring and whether treatment is needed. This can help to prevent liver cirrhosis, liver cancer and liver failure.

For **acute hepatitis B** treatment may not be needed as it is only a short term infection. However, you will need to be tested again after 6 months to check if you have developed a chronic infection.

GPs with specific hepatitis B training and specialists can provide treatment for chronic hepatitis B. You can find the list of these GPs at <https://ashm.org.au/PrescriberListing>

How can we prevent hepatitis B?

There is a **vaccine** for hepatitis B. Vaccination is the best way to prevent people from getting hepatitis B. In Queensland, some people can get the hepatitis B vaccine for free, for example:

- Infants
- People living with a person who has hepatitis B, such as family members or housemates
- Migrants from hepatitis B endemic countries who have a Medicare card (if not already immune to hepatitis B or not previously vaccinated)
- Persons with chronic liver disease and/or hepatitis C
- Sexual contacts of persons with hepatitis B

Please go to www.health.qld.gov.au/clinical-practice/guidelines-procedures/diseases-infection/immunisation/schedule for the most up to date list.

Before being vaccinated, the doctor should check if a person needs the vaccine. If already vaccinated for hepatitis B, or have had hepatitis B in the past, they may already have immunity (protection) and do not need the hepatitis B vaccine.

For adults, the hepatitis B vaccine involves 3 injections over 6 months. For infants, there are 4 injections over 6 months and the first injection is given at birth. It is important to complete all the injections for the vaccine to work. Most people do not need further injections (booster) after completing all injections.

To check that the vaccination has worked, people can ask their GP to do a blood test at least 4 weeks after the final injection. A baby can be tested 3 months after the final injection.

What will happen if a pregnant woman has hepatitis B?

As soon as a woman knows she is pregnant, she should see a doctor for advice. Some women with a high level of hepatitis B virus (viral load) in their blood may need medication in the last few months of pregnancy to

reduce the risk of passing the virus to the baby. The baby should also get **the first dose of the hepatitis B vaccine and hepatitis B immune globulin (HBIG) within 12 hours of being born**, then 3 more doses of hepatitis B vaccine at 2, 4 and 6 months. By doing so, the chance of the baby getting hepatitis B can be greatly reduced to less than 5%. The child should be tested for hepatitis B at 9 - 12 months old to check that they are protected.

Breastfeeding does not transmit hepatitis B. Mothers with hepatitis B can breastfeed their babies; however, if their nipples are cracked and bleeding, they should not breastfeed until the nipples have healed.

Hepatitis C

Hepatitis C is caused by the hepatitis C virus (HCV). People coming to Australia from another country may have been infected with hepatitis C in their home country but are not aware of it. Like hepatitis B, hepatitis C can be an acute or chronic infection. Unlike hepatitis B, the chance of people developing chronic hepatitis C does not depend on the age of infection. About 3 in 4 (75%) people infected by the hepatitis C virus will develop chronic hepatitis C and will need treatment.

How do people get hepatitis C?

People can get hepatitis C through **contact with blood** that is infected with the hepatitis C virus.

Examples of blood transmission can be found on page 11 in the Hepatitis B section.

An infected pregnant woman can pass the virus to her baby during birth. This is not common and less than 5% of babies born to mothers with hepatitis C will become infected.

People **cannot** get hepatitis C through social contacts, please refer details on page 13 in the Hepatitis B section.



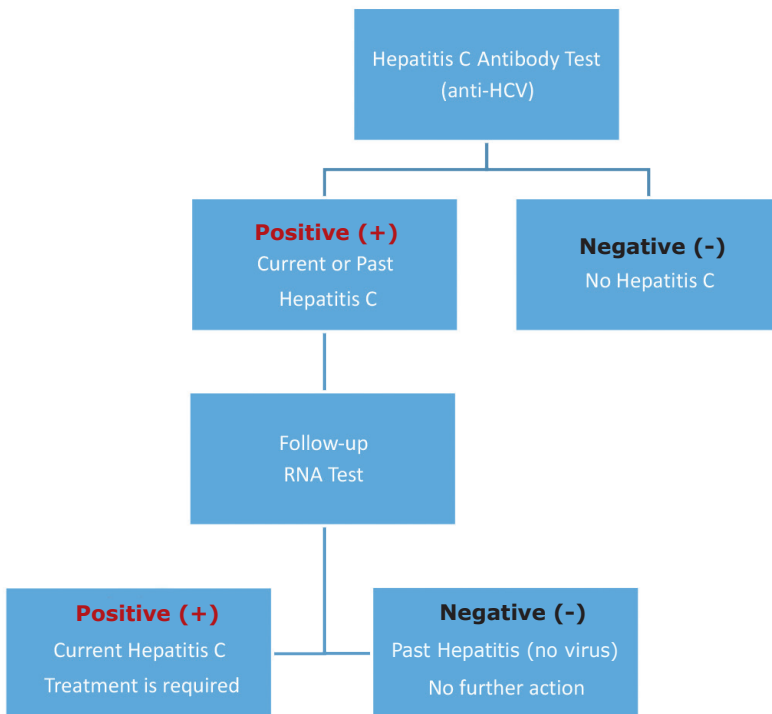
What are the symptoms of hepatitis C?

Most people with hepatitis C have no symptoms, but some people may experience symptoms similar to hepatitis A or hepatitis B.

How do people know if they have hepatitis C?

The only way for people to know if they have hepatitis C is to have a **specific blood test for hepatitis C** (it is different from common blood tests). All GPs can order the test.

Firstly, the test looks for **hepatitis C antibodies** in the blood. If the antibody test is negative, the person does not have hepatitis C. If positive (or detected), it means that the person either currently has hepatitis C or has had hepatitis C in the past. A further test called a **hepatitis C RNA test** is needed to check whether the person still has hepatitis C. If the RNA test is negative, it means the person does not have hepatitis C. If the RNA test is **positive** (or detected), it means the person currently has hepatitis C and will **need treatment**.



People with chronic hepatitis C can develop serious liver disease, such as cirrhosis and liver cancer. It is important people get tested and treated if they have chronic hepatitis C. If a person has just become infected, another HCV RNA test will be needed at least 6 months later, to see if the virus is still in the body.

Are people tested for hepatitis C before they come to Australia?

Most people are not required to be tested for hepatitis C. Only the following groups are required to get tested:

Permanent and provisional visa applicants who:

- are aged 15 or over and intend to work as or study to be a doctor, dentist, nurse or paramedic in Australia
- are aged 15 or over and apply for an onshore protection type visa

Temporary visa applicants who:

- intend to work as or study to be a doctor, dentist, nurse or paramedic in Australia

Please find updated and detailed information at <https://immi.homeaffairs.gov.au/help-support/meeting-our-requirements/health>

How does hepatitis C affect people?

Over time without treatment, chronic hepatitis C can damage the liver and some people may develop serious liver disease, including cirrhosis, liver cancer, and liver failure.



Is there treatment for hepatitis C?

Yes, there are highly effective treatments for hepatitis C. After completing 8 or 12 weeks of treatment, over 95% of people with chronic hepatitis C will be **cured** (no hepatitis C). The treatments have very few side effects such as tiredness or headache. GPs, specialists and nurse practitioners can prescribe treatment for hepatitis C. Generally, if you have a Medicare card, the treatment costs less than \$125, with a concession card less than \$20.

If you do not have a Medicare card, you may be able to access cheaper hepatitis C medication at www.fixhepc.com.au. **People who have been cured can be re-infected with the hepatitis C virus** if they do not protect themselves from the virus. Please see our Hepatitis C Factsheet at www.eccq.com.au/bbv for further details.

How can we prevent hepatitis C?

There is **NO** vaccine for hepatitis C. It is particularly important to prevent it by **avoiding contact with blood**:

- Do not share anything that may have been exposed to blood (such as razors, toothbrushes or injecting drug equipment)
- Avoid 'backyard' practices (at home or not in a licenced place) that involve skin penetration or blood contact, such as tattooing, body or ear piercing and cosmetic procedures
- Cover cuts, scratches and wounds with dressings or a bandage
- Wear gloves while cleaning up any blood
- Be careful when visiting a hospital, doctor, dentist or having cosmetic procedures in another country. Ask whether they sterilise their equipment or use new equipment

What will happen if a pregnant woman has hepatitis C?

The risk of a infected pregnant woman passing hepatitis C to her child is very low (less than 5%). Mothers with hepatitis C can breastfeed; however, if a woman's nipples are cracked and bleeding, she should not breastfeed until they have healed. Women should see their doctor for advice as soon as they know they are pregnant.

After the pregnancy and breastfeeding, the mother should have treatment to cure the hepatitis C. All babies born to mothers with hepatitis C should get tested for hepatitis C at 12 to 18 months old (www.childrens.health.qld.gov.au).

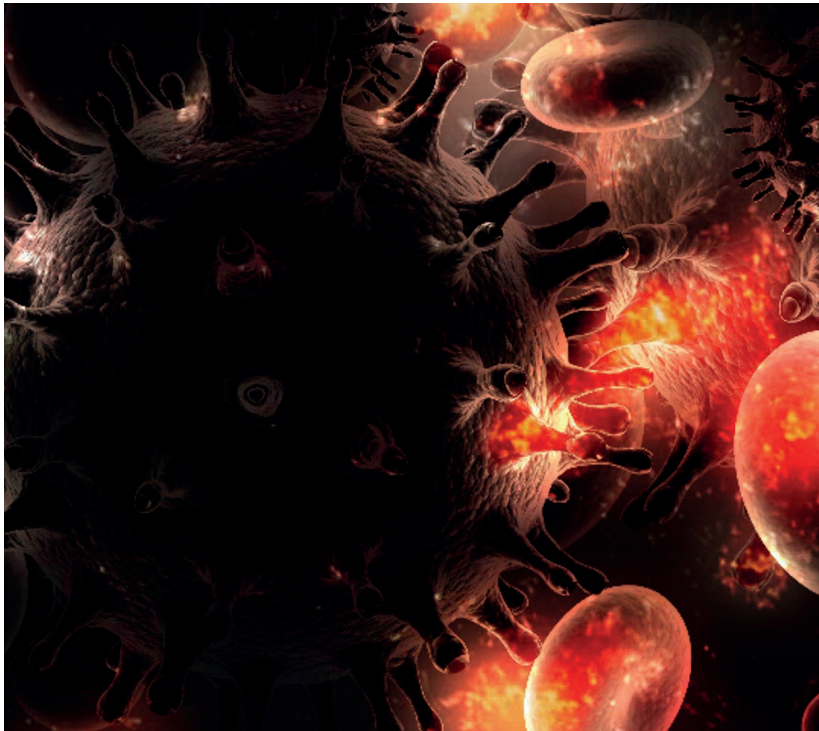
HIV

HIV

Thousands of people in Australia are infected with HIV and anyone can get HIV, including people from overseas. People need to protect themselves from getting HIV in Australia or when travelling overseas.

What is HIV/AIDS?

HIV stands for **H**uman **I**mmunodeficiency **V**irus. It is the virus that can cause **AIDS** (**A**cquired **I**mmunodeficiency **S**yndrome). AIDS is the late stage of the HIV infection. Not all people with HIV develop AIDS. If people are tested and treated early for HIV they will not progress to AIDS.



How do people get HIV?

HIV exists in body fluids. People can get HIV through contact with infected body fluids including blood, semen, vaginal fluid and breast milk. People can only get HIV if infected body fluids get into their body through:

Sex: HIV can be spread through having vaginal or anal sex with an infected person. This is a common way to transmit HIV in many countries. People infected with an STI have a higher risk of becoming infected with HIV. People who have both HIV and an STI are more likely to transmit HIV to their sexual partner(s).

Mother-to-child: an infected mother can pass HIV on to her child during pregnancy, at birth or through breastfeeding.

Blood:

- HIV can be spread through blood. There are different ways people can get HIV through blood, please refer to “Blood transmission” on page 11 in the Hepatitis B section.
- As hepatitis B, hepatitis C and HIV can all be transmitted by blood, they are also called **blood-borne viruses (BBVs)**. If a person is diagnosed with one of these infections, the person also needs to be tested for the other two infections because they share the same transmission route - blood.
- People can have two or more infections at the same time - this is called a co-infection, and may need to be managed by a specialist.

People **cannot get** HIV through:

- Kissing
- Shaking hands
- Hugging
- Sharing food, drinks, cutlery, plates, cups, chopsticks, bowls etc
- Using swimming pools and toilet seats
- Mosquitoes
- Sweat
- Tears
- Saliva
- Urine



SAFE



What are the symptoms of HIV?

In the first few weeks after being infected with HIV, many people experience flu-like symptoms, such as:

- Fever
- Swollen lymph nodes (lymph glands)
- Swollen tonsils (tonsillitis)
- Sore throat
- Joint and muscle aches
- Diarrhoea
- Rash

These symptoms will then disappear quickly and infected people will not show any symptoms for some years.

How do people know if they have HIV?

Many people with HIV look and feel healthy. The only way for people to know if they have HIV is to have a **specific blood test for HIV**. You can have a HIV test at:

- a GP clinic
- a sexual health clinic
- at home: you can order free home test kits at www.rapid.org.au or purchase one at www.atomohivtest.com

If people have been infected in the last 2 weeks to 3 months, the blood test may not be able to tell whether they have the infection or not, and they will need to have a second test. This period of time is called the **window period**. While waiting for the result, they should **always** use protection (such as condoms) during sex and avoid blood contact. People will get a much better health outcome if they are tested and treated early. If a person's test result is **positive**, it means this person has HIV.



Are people tested for HIV before they come to Australia?

People often think that they were tested for HIV before they came to Australia but many people are not required to be tested for HIV. Only the following groups are required to get tested:

Permanent and provisional visa applicants who:

- are aged 15 or over
- are a child for adoption or a child in the care of an Australian state or territory government welfare authority

Temporary visa applicants who:

- intend to work as (or study to be) a doctor, dentist, nurse or paramedic.

Please find detailed information at

<https://immi.homeaffairs.gov.au/help-support/meeting-our-requirements/health>

People should consider having an HIV test if they have not been tested already, or if they may have been exposed to risks previously listed under "How do people get HIV?" on page 24.

How does HIV affect people?

People with HIV may look and feel healthy for many years after they have been infected. However, **without treatment**, HIV can slowly destroy the immune system (the body's defence system) over the years and later will progress to AIDS, making it easier to get serious infections and other diseases that healthy people might not normally get. People **might** die from these AIDS-related infections and diseases.

Is there treatment for HIV?

Yes, HIV treatment called Antiretroviral Therapy (ART) can effectively control HIV and prevent AIDS. People diagnosed with HIV should start HIV treatment as soon as possible. Currently, people need to continue taking medication every day for life. Only GPs with HIV training and specialists can provide the HIV treatment. You can find a GP with training in HIV at <https://ashm.org.au/PrescriberListing/>.

People with HIV can have a normal life if they take HIV medications as required. Early testing and treatment are important to make treatments most effective.

With effective treatment, the amount of HIV in the body can be reduced to such a low level that it is unable to be found in a blood test, which is called **'undetectable'**. This does not mean that the person has been cured or is free of HIV.

A person with undetectable HIV cannot pass the HIV to other people through sex (Undetectable=Untransmittable or U=U). Thus, HIV treatment can prevent sexually transmitted HIV (also called **Treatment as Prevention** or TasP).

Treatment must be continued to keep HIV undetectable.

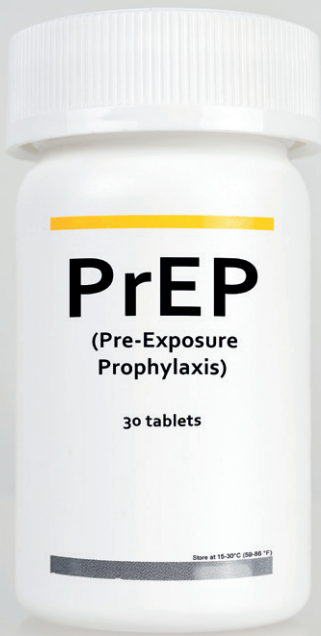
How can we prevent HIV?

There is **no** vaccine for HIV. Therefore it is very important to take the following measures to protect yourself and others:

- **Use condoms:** currently condoms are still the best protection to prevent sexually transmitted HIV, STIs and pregnancy.
- **Avoid direct blood contact:** please see details described previously on page 11.
- **Take HIV prevention medication:**
 - Pre-Exposure Prophylaxis (**PrEP**): is an HIV medicine that can protect uninfected people from getting HIV. As it is not a vaccine, PrEP only works when taken every day. If people stop taking it, they will not be protected. Any GP can prescribe PrEP. If people do not have a Medicare card, they can buy PrEP online at: www.greencrosspharmacy.online with a prescription from their GP.
 - There may be some side effects when taking PrEP. People cannot take another person's HIV medicine to protect them from getting HIV.
 - Post-Exposure Prophylaxis (**PEP**): is for uninfected people who may have been exposed to HIV. PEP is HIV medicine that should be taken within **72 hours** after possible exposure, earlier is better, and needs to be taken for 4 weeks. Doctors at Sexual Health Clinics, Emergency Departments in major hospitals and GPs with HIV training (please refer to "Is treatment for HIV? on page 27") can prescribe PEP.

What will happen if a woman is pregnant and has HIV?

A woman with HIV can have an HIV free (or HIV negative) baby. There are many ways to greatly reduce the risk of a baby being infected with HIV to less than 1%. If a woman with HIV is planning to have a baby or has just become pregnant they should see a doctor to get advice.



Choose the right size

- There are three different sizes of condoms: tight, regular and large
- Condoms that are too small can break
- Condoms that are too big can split.

Use this sample pack to find the right size for you. Only use condoms in your size.

Lubricant

Lubricant is important. Use it first to reduce the risk of irritation. Breaking, lubricated condoms using condoms are more comfortable. Use water-based lubricant. Do not use oil-based lubricants, as the oil can cause the condom to break.

Storing condoms

- Store condoms in a cool, dark place.
- Do not store condoms in a car.
- Condoms should be kept in a cool, dry place in their original packaging.

Where can I get condoms?

- Condoms are sold in small boxes of 12 or 24 condoms. Lubricant is sold in a variety of tubes.
- Condoms and lubricant are sold at supermarkets, pharmacies, convenience stores and online retailers.

Undetectable = Untransmittable

U = U

Sexually Transmissible Infections (STIs)

Sexually Transmissible Infections (STIs)

A **Sexually Transmissible Infection (STI)** is the name for a disease that can be passed from one person to another by sexual contact including **vaginal** sex (penis in vagina), **anal** sex (penis in anus) and **oral** sex (mouth to genitals/anus). There are many different STIs and they can be caused by either viruses, bacteria or parasites.

Some STIs can cause serious long-term health problems, including infertility (when a person cannot have a baby). **STIs can also increase the risk of transmitting and getting HIV.** Therefore, it is **very** important that STIs are diagnosed and treated early. The common STIs in Australia include bacterial infections such as chlamydia, gonorrhoea, and syphilis as well as viral infections such as genital herpes and genital warts. HIV and hepatitis B (viral infections) can be transmitted by sexual contact and they have been discussed separately in this booklet.

What are the symptoms of STIs?

Most people who have an STI do not have any symptoms. However, some people may experience one or more of the following:

- Blisters, lumps, sores, a rash or a change in the skin on and around the genitals (penis, testicles, vagina or anus)
- Pain in the testicles (males)
- Lower belly pain, pain during or just after sex, or bleeding between periods (females)
- Unusual discharge or bleeding from the penis, vagina, or anus
- Pain or difficulty passing urine

How do people know if they have an STI?

Many STIs have no symptoms. All people who are sexually active should have a sexual health check as it is the only way to know if there is an infection.

People should have a sexual health check if they:

- think they may have an STI
- had sex without a condom, or the condom broke or fell off
- they or their partner have had more than one sexual partner
- start or finish a sexual relationship
- have been sexually assaulted

Are people tested for STIs before they come to Australia?

Most people are not required to be tested for STIs before coming to Australia. However, some people need to test for syphilis if they:

- are aged 15 or over and applying for an onshore protection type visa
- are aged 15 or over and applying for a refugee type visa

How can people with an STI protect others?

People who are being treated for an STI should avoid having sex during treatment as the infection may be transmitted to their sexual partner(s). People with an STI should talk to their doctor or nurse about **contacting** any past or current sexual partner(s). If sexual partner(s) are also infected, they may get sick, pass the infection on to other people, or re-infect their current sexual partner.

How we prevent STIs?

- **Use condoms.** Condoms are the best protection against STIs, and can also prevent HIV and pregnancy. People should use condoms correctly and consistently:
 - Choose and use the right size (width) condom – small (45mm-51mm), regular (52mm -56mm) or large (56mm-60mm). ECCQ has a sample pack of condoms available for free. To order please go to www.eccq.com.au/bbv or email health@eccq.com.au
 - Condoms need to be kept in a cool place because they can be damaged by heat
 - Check the expiry date before using a condom
 - Use water based lubricant with condoms to prevent condoms from breaking
 - Do not use two or more condoms at the same time
 - Do not re-use condoms

Condoms and water-based lubricant can be bought from supermarkets, chemists, petrol stations and convenience stores.

- **Reducing the number of sexual partners.**
- **Having a sexual health check** if you have had sex while travelling in another country.
- **Having a sexual health check** if you have finished a relationship, before you start a new one or whenever you have had unsafe sex.

- **Avoid having sex** with a person if they have a lump, rash or sore on their genitals. Suggest that they have a sexual health check. But remember, most people with an STI will not show any symptoms.
- **Drink safely.** Drinking alcohol or taking drugs can make it difficult to make good decisions about having safe sex. Please find details at <https://www.health.gov.au/health-topics/alcohol/about-alcohol/how-much-alcohol-is-safe-to-drink>
- **Do not wash out vagina** with water or antiseptic solution after sex (this is called douching). Washing out the vagina does not protect against STIs, and instead, it can make it easier to be infected. Some traditional remedies used for vaginal infections can also make it easier to get an STI.
- There is a **vaccine** available for genital warts (HPV vaccine, and hepatitis B vaccine), but not for other STIs.



Human Papilloma Virus (HPV) vaccine

There are more than 100 different types of HPV. Some types of HPV cause genital warts and some can cause **cancers of the cervix, anus, vulva, vagina, penis and throat**. The HPV vaccine is very safe and effective and can protect against the most common types of HPV related cancers and genital warts. For those aged 14 and under, the vaccine is given as two injections 6 to 12 months apart. In Australia, girls and boys aged 12-13 can receive the **free** HPV vaccine in school, as part of the National HPV Vaccination Program. People aged 15 or older will need 3 injections at 0, 2 and 6 month intervals. **The HPV vaccine is most effective if given before people become sexually active.**

However, the HPV vaccine does not protect against all HPV types. **All women between the ages of 25 and 74 years should have a Cervical Screening Test every 5 years.** The Cervical Screening Test looks for HPV.

What will happen if a pregnant woman has an STI?

In Australia, pregnant women are routinely tested for syphilis, HIV, hepatitis B and C at the start of their pregnancy and sometimes more than once during the pregnancy if they are at high risk. This is because STIs such as syphilis can be very dangerous for babies. Treatment and careful planning for the birth can reduce the risk of the baby being infected.



Common STIs in Australia – Summary

STI name	Transmission	Test	Treatment	Prevention	Consequences without testing and treatment
Chlamydia	<ul style="list-style-type: none"> sexual contact mother to baby during birth 	<ul style="list-style-type: none"> urine tests swab taken from affected area 	<ul style="list-style-type: none"> caused by bacteria, therefore, can be cured with the correct antibiotic treatment can be reinfected after cure 	<p>use condoms</p> <p>no vaccine</p>	<ul style="list-style-type: none"> infertility (difficulty having baby) in both men and women pelvic inflammatory disease (PID) and ectopic pregnancies (baby starts to develop in wrong place) in women
Gonorrhoea	<ul style="list-style-type: none"> sexual contact mother to baby during birth 	<ul style="list-style-type: none"> urine tests swab taken from affected area 	<ul style="list-style-type: none"> caused by bacteria, therefore, can be cured with the correct antibiotic treatment can be reinfected after cure increased drug resistance problem 	<p>use condoms</p> <p>no vaccine</p>	<ul style="list-style-type: none"> infertility (difficulty having a baby) in men and women pelvic inflammatory disease (PID) and ectopic pregnancies (baby starts to develop in wrong place) in women
Syphilis	<ul style="list-style-type: none"> direct contact with sores/lesions during any sexual contact mother to baby during pregnancy and/or birth blood but rare 	<ul style="list-style-type: none"> blood test swab taken from sore/lesion 	<ul style="list-style-type: none"> caused by bacteria, therefore, can be cured with the correct antibiotic can be reinfected after cure 	<p>use condoms</p> <p>avoid blood</p> <p>no vaccine</p>	<ul style="list-style-type: none"> damage to vital organs, such as the brain or heart miscarriage, foetal death or serious problems for babies
Genital Herpes (small sores on the skin)	<ul style="list-style-type: none"> close body contact (usually through sexual contact) mother to baby during birth - very low 	<ul style="list-style-type: none"> swab taken from open sore 	<ul style="list-style-type: none"> caused by viruses and cannot be cured treatments such as injection, oral medication, or applying cream onto affected area can help with symptoms (the full course of treatment must be finished even after symptoms disappear) 	<p>use condoms</p> <p>(may not prevent transmission if affected areas are not covered)</p> <p>no vaccine</p>	<ul style="list-style-type: none"> painful sores can spread to other parts of the body
Genital Warts (painless, raised bumps on skin around genitals)	<ul style="list-style-type: none"> close body contact (usually through sexual contact) mother to baby during birth - rare 	<ul style="list-style-type: none"> physical examination 	<ul style="list-style-type: none"> caused by viruses and cannot be cured warts can be removed by freezing, cutting or laser (burning), or by applying a cream 	<p>vaccine is available (HPV vaccine)</p>	<ul style="list-style-type: none"> lumps can become big and uncomfortable, painful or very itchy cancer of cervix, penis, anus or throat (depending on site of infection)

Frequently asked questions

What are viruses and bacteria?

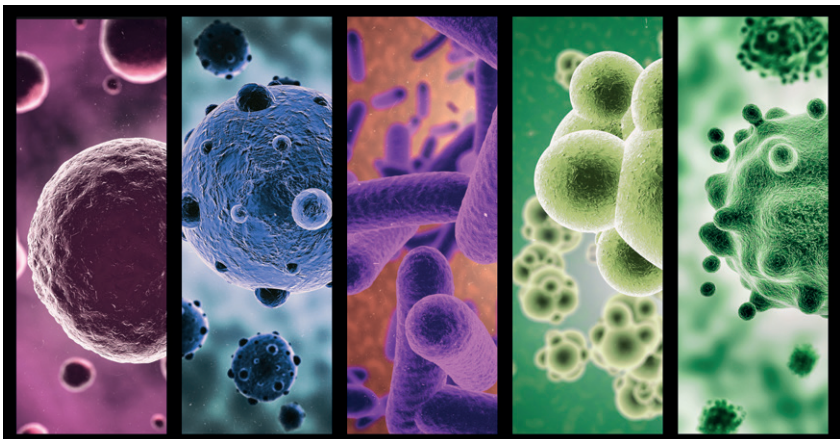
Viruses and bacteria are very small germs that can cause infectious diseases. There are many different viruses and bacteria that can cause different diseases. They cannot be seen with the naked eye but they can be passed between people through different ways such as blood, body fluids, food, drinks, urine, air and so on.

What are antigens and antibodies?

Antigens are parts of viruses or bacteria. Antibodies are produced by the body's immune system to fight against viruses or bacteria by specifically targeting the antigen and blocking/destroying it. Antigens and antibodies exist in the blood, therefore, a blood test can identify if a person has a certain disease, or has had the disease in the past by looking for the antigen/antibody for that particular virus or bacteria.

What is the difference between a vaccine, treatment and cure?

A vaccine is a product that can prevent people from getting a disease. It is for people who have never been infected. When people already have a disease, **treatment** can control the disease so it does not get worse. Treatment can sometimes cure a disease/infection. **A cure** means the person does not have the disease anymore after finishing treatment. However, people who are cured of some infections can still be reinfected.



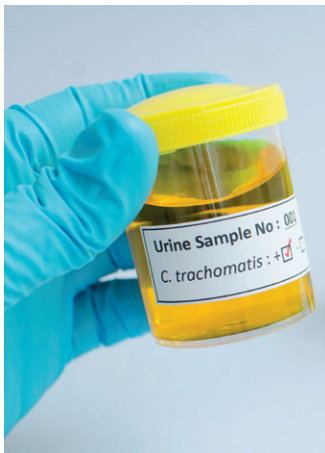
What is a sexual health check?

A **sexual health check** is an appointment with a health provider to talk about your sexual health and possibly to do testing for STIs or other viruses like HIV or hepatitis. In Queensland, you can get a sexual health check from your GP, or at a sexual health clinic, or through family planning services such as True Relationships and Reproductive Health. If you do not have any symptoms and you are just wanting a check-up, a GP is a good choice if you feel comfortable talking about your sexual health with the GP. If you have more complex sexual health concerns, or want to see someone who is more specialised, then a sexual health clinic or a place like *True* might be better for you. You should call and make an appointment first. For a list of sexual health clinics in Queensland, please see the following website: <https://www.health.qld.gov.au/clinical-practice/guidelines-procedures/sex-health/services>

What does a sexual health check involve?

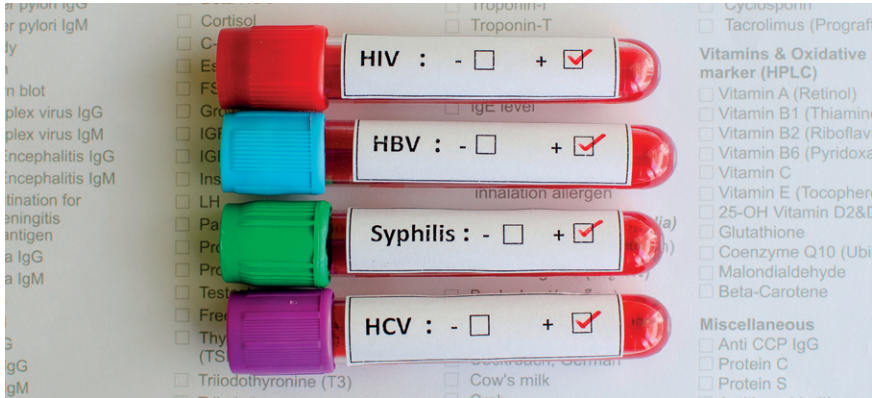
A sexual health check may involve answering questions about current and previous sexual activity, including the number and gender of sexual partner(s), the type of sex and any past illnesses. Some questions can be embarrassing or difficult to answer but it is important to tell the truth. This information helps the doctor to do the right tests and make the right diagnosis. People should not feel ashamed, try to hide, or lie about having an infection or symptoms.

With your permission, the doctor may do a physical examination and take samples of blood, urine or discharge to test for common STIs, HIV, and hepatitis. People can ask to see a male or female doctor or nurse. Doctors and nurses will keep your information confidential.



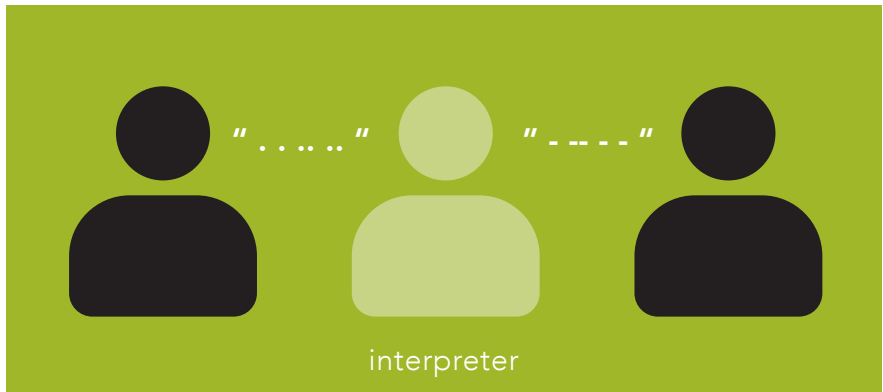
Can people have more than one infection at a time?

Yes. People who are infected with more than one infection at one time have a “**co-infection**”. For example, people may have hepatitis B and HIV at the same time or hepatitis B and hepatitis C or hepatitis C and syphilis etc.



What if people do not speak English?

People who have difficulty speaking or understanding English can ask for and should be provided with a **free** qualified interpreter when they see a doctor or nurse. When making an appointment people can ask for an interpreter to be booked. They should advise the required language or dialect and if they need a male or female interpreter. Interpreters are not allowed to share personal information about the person to other people. Family members should not be used as interpreters.



Can people get hepatitis, HIV and STIs when they travel to their home country?

Yes. Hepatitis, HIV and STIs are common in many countries. People should take precautions to protect themselves from infection whilst traveling overseas. People should:

- take condoms and use them for sexual activities
- avoid practices involving blood
- never share grooming products such as razors or toothbrushes
- drink boiled or bottled water and be careful about how food is prepared before eating
- ensure sterile equipment is used if having medical, dental or cosmetic procedures, tattoos, piercings and so on
- Consider getting the hepatitis A and/or hepatitis B vaccine if you do not have immunity

Do people have to tell others that they have hepatitis, HIV and/or STIs?

In Queensland, people do not have to tell other people if they have any of these infections, except in a few circumstances (www.halc.org.au). If there is a possibility that a person has become infected with hepatitis, HIV or an STI from another person, this person needs to know and to be tested. If it is difficult or not possible for a person to tell their past contacts, a doctor or nurse can help them, and they will not give any information about the person. This process is called **contact tracing**. Contact tracing helps to stop the spread of infections and ensures that all people who have an infection can get treatment. The staff at Sexual Health Clinics are trained to provide a helpful and confidential service.

People need to take special care not to pass on hepatitis, HIV, or STIs to other people, by using appropriate protection and being careful not to let anyone come into contact with their blood.



Does Australia treat people with hepatitis, HIV, and STIs fairly?

In Australia, it is against the law to treat people unfairly because they have hepatitis, HIV, an STI, or any other medical condition. People who have an infection can receive support from various organisations.

People who have these infections should get the same quality of services and the same opportunities as everyone else. Having hepatitis, HIV, or STIs should not influence their employment, education, Centrelink payments or current visa status. People who experience discrimination should contact the Anti-Discrimination Commission Queensland at www.qhrc.qld.gov.au

Further Information

Ethnic Communities Council of Queensland (ECCQ)

Website: www.eccq.com.au/bbv

Phone: 07 3844 9166

Email: health@eccq.com.au

Queensland Health

Website: www.health.qld.gov.au/sexhealth

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