

SITUATION CONCERNING SEXUALLY TRANSMITTED DISEASES IN TRIESTE

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ABSTRACT

The situation concerning STDs in Trieste during 1994 was evaluated.

We have collected the data regarding syphilis, gonorrhoea, non-gonococcal urethritis, and HIV infection from the Dermoceltic center, from the in- and out-patient clinic of the department of Dermatology and from the Laboratory of tissue typization.

The study showed the following results: syphilis: 12 cases (early 3, late 9), 10 cases of gonorrhoea, 24 cases of non gonococcal urethritis, 35 HIV-1 seropositive patients. Geographical situation of Trieste, and the Italian law that guarantees anonymity only in some cases, may explain the low number of patients. Furthermore, for these reasons, the STD patient could prefer to contact a private doctor, who may not notify the Health authorities.

KEY WORDS

STD epidemiology, syphilis, gonorrhoea, HIV urethritis

INTRODUCTION

In order to present the situation regarding sexually transmitted diseases (STD) in Trieste we have collected the data from some centers in our city in which STDs are detected and/or treated.

We have especially considered the most important venereal diseases: syphilis, gonorrhoea, non gonococcal urethritis and infections with human immunodeficiency virus (HIV).

MATERIALS AND METHODS

We have collected the data regarding STDs in Dermoceltic Center, in- and out-patients admitted

to the Department of Dermatology of the University of Trieste and Tissue typization laboratory of the Cattinara Hospital.

In vitro diagnosis of syphilis was performed with the following tests: RPR test (Human Gesellschaft fur Biochemica und Diagnostica - Germany); TPHA (micro-hemagglutination assay technique - Fujirebio Inc., Japan); FTA-Abs (indirect fluorescent antibody technique by Delta Biologicals srl - Italy). HIV-Ab positivity were tested by Abbott HIV-1/HIV-2 3rd generation test and an in vitro enzyme immunoassay (EIA) for the simultaneous detection of antibodies to HIV type 1 and/or type 2 in human serum or plasma.

Diagnosis of gonococcal and non-gonococcal ure-

