

7. Status of STD Screening, Diagnosis and Treatment in Ceará, Brazil

**Silvia Bomfim Hyppólito, MD
Ceará Federal University
Maternidade Escola Assis
Chateaubriand (MEAC)
Ceará, Brazil**

Introduction

Behavioral changes in the sexual life of the population, especially women, have increased the incidence of sexually transmitted diseases. This trend will continue with the universal spread of AIDS. Experts estimate that there will be 40 million people infected with HIV by the year 2000.

Family planning services have a responsibility to:

- supply contraceptives on demand to avoid unwanted pregnancies,
- screen clients for STDs and provide appropriate treatment or referral, and
- include information on STD prevention as part of their counseling activities.

STDs in the State of Ceará

The State of Ceará, located in northeast Brazil, is one of the poorest regions of the country and drought is a frequent phenomenon. In Ceará, screening for and diagnosis of STDs at health posts are not performed routinely. Because there usually are no laboratories available at the health posts, patients have to be referred elsewhere for a definitive diagnosis. Physicians usually start treatment based only on the clinical screening, and followup of clients and their partners is extremely difficult.

Doctors do not always notify the specific health authority about a disease because they may not be sure that the diagnosis is correct. Doctors also fail to report diseases because they are not encouraged to do so by the health authorities. In this instance, JHPIEGO's simplified methodology of STD screening can play an important role in improving health workers' confidence in their diagnosis.

The Regional Training Center on Human Reproduction of MEAC, Federal Health University of Ceará, under the Ceará Health State Secretary, provides training described below for physicians and nurses.

- Simplified screening methodology for STDs, based on signs and symptoms and very inexpensive lab tests (such as KOH reaction), direct microscopic examination of vaginal discharge (looking for Gardnerella clue cells, trichomonas or fungus), etc. By excluding Gardnerella, trichomonas and fungus and checking for the presence of symptoms such as dysuria and urethral or endocervical discharge, physicians can begin treatment for gonorrhea or chlamydia without more laboratory tests.
- Appropriate infection prevention practices which provide protection for clients and service providers

Data on STDs for the State of Ceará were found to be underestimated and therefore did not give a good picture of the epidemiology of STDs. As a result, additional data were collected just from Fortaleza, the capital of Ceará.

STDs in Fortaleza

The demographic census of 1991 prepared by the Instituto Brasileiro de Geografia e Estatística (IBGE) shows that Fortaleza has a population of 1,758,334 inhabitants. The population of Fortaleza in 1970 was approximately 857,980—it has doubled in just two decades.

Fortaleza's population is very young, with 55.8 percent under the age of 25 and 77.7 percent under age 45. This age distribution is an important socioeconomic and health factor because resources will be needed from the government and society to provide work, education, housing and health care for these people in the years to come. Presently there are not enough services to cover their needs.

Public health interventions in Fortaleza focus on improving sanitary facilities: just 16.5 percent of the houses are served by a public drain structure, while 8.7 percent of the others have private ditches. Thus, STD prevention and treatment programs have a much lower priority.

The data on several infectious diseases are limited even in the Municipal Health Secretary of Fortaleza. The cases reported as part of the compulsory disease notification system clearly were underestimated. Nevertheless they showed why government authorities were so much more worried about the cholera epidemic, meningitis and others diseases, than about STD infection. **Table 7-1** shows the ten most common diseases in Fortaleza.

Table 7-1. Diseases in Fortaleza in Order of Frequency

ORDER OF FREQUENCY	DISEASE
1	Respiratory Infection
2	Diarrhea
3	Worms
4	Cholera
5	High Blood Pressure
6	Skin Diseases
7	Diabetes
8	Malnutrition
9	STDs/AIDS
10	Tuberculosis

Conclusion

In conclusion, there is much to be done in order to have better health care in the developing world. Appropriate technology to diagnose and treat the diseases must be developed. Otherwise, life indicators will continue to be poor. Improving health workers' ability to diagnose STDs will result in better notification and more emphasis on prevention.

References

BEMFAM (Sociedade Civil Bem-Estar Familiar no Brasil). 1991. Planejamento em Saúde Familiar no Nordeste, Brasil.

Department DVS/SSF, Prefeitura de Fortaleza, Ceará, Brasil. Personal communication.

Prefeitura Municipal de Fortaleza, Secretaria de Saúde do Município, Relatório de Gestão: Janeiro/1993 a Março/1994, Fortaleza, Março, 1994.