



Sentinel Surveillance of Sexually Transmitted Infections (STIs) in South Australia, 2017

Report 9, 2018

ISSN 1839-3721

Issued Jun 2018



**Government
of South Australia**

SA Health

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Acknowledgements: The annual report was prepared, analysed and edited by Bin (Mikko) Li and reviewed by Dr Alison Ward and Dr Carole Khaw.

We gratefully acknowledge the work of Clinic 275 staff in data collection, data cleaning and data entry.

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List of abbreviations

AChSHM	Australasian Chapter of Sexual Health Medicine
C trachomatis	Chlamydia trachomatis
CALD	Culturally and linguistically diverse
CDCB	Communicable Disease Control Branch
ChEx	An express chlamydia screening service
FSW	Female sex worker
HIV	Human immunodeficiency virus
IDU	Injecting drug use
MSM	Men who have sex with men
nPEP	Non-Occupational Post Exposure Prophylaxis
NSU	Non-specific urethritis
O'SEAS	Overseas
RACP	The Royal Australasian College of Physician
RAH	Royal Adelaide Hospital
STI/STIs	Sexually transmitted infection/ Sexually transmitted infections
PrEP	Pre-Exposure Prophylaxis

Executive Summary

During 2017, there were a total of 12716 episodes of care for 8796 individual clients resulting in 17256 clinic attendances at Clinic 275. New episodes of care and individual patients have increased continuously (Figure 1). New client registrations accounted for 36% of all episodes of care and 50% of all clients seen in 2017. Eleven percent (1975/17256) of the overall attendances reported homosexual or bisexual behaviour in the preceding twelve months.

There has been a marginal increase in the clinic attendances at Clinic 275 from 16922 in 2016 to 17256 in 2017. There has been a simultaneous increase in the number of episodes of care and individual patients, with 6.2% and 0.3% increase compared with 2016 (Figure 1, Table 1). The average number of visits per episode is 1.4 in 2017, same as 2016. Follow-up attendances have decreased from 5468 in 2016 to 3995 in 2017. This is consistent with the Unit's strategy to increase clinical opportunities for new STI diagnoses and reduce unnecessary in-person follow up. The proportion of complex consultations has increased due to increased STI diagnoses requiring treatment and partner notification, increased attendance for provision of HIV Pre-exposure prophylaxis (PrEP), and increased proportion of visits for new episodes of care and new registrations. An express chlamydia testing service ("ChEx") had been introduced to provide fast chlamydia screening for heterosexuals at low risk of other STIs or HIV.

The number of gonorrhoea diagnoses has increased by 26% in 2017, with 416 cases diagnosed in 2017 compared to 329 in 2016 (Table 10). The cases of gonorrhoea diagnosed at Clinic 275 were predominantly among men who have sex with men (MSM) (Table 15). There were 343 (82%) cases in males and 73 (18%) in females. No increase has been observed in women. The male to female ratio was 4.7:1 (Figure 5). The majority of males and females diagnosed with gonorrhoea were asymptomatic (Table 11).

The number of chlamydia diagnoses has dramatically increased by 34% in 2017, with 1005 cases diagnosed in 2017 compared to 752 in 2016. Diagnosed cases consisted of 733 (73%)

male and 272 (27%) female. The male to female ratio was 2.7:1, similar to the ratio reported in 2016 (Figure 4).

A marginal increase has been noted in the diagnoses of infectious syphilis, with 71 cases diagnosed in 2017, which has been increased by 223% since 2010 (22 cases). Most of these cases (95%) were diagnosed in males (Table 16).

There were 20 newly diagnosed cases of HIV in 2017, with 19 in males and only 1 in females; the male to female ratio was 18:1. Males were more likely to be diagnosed with HIV compared with females (Table 20).

Due to the small number of some STIs, these results should be interpreted cautiously.

1 Introduction

Clinic 275 of the Royal Adelaide Hospital is a sentinel surveillance site for Sexually transmitted infections (STIs) in South Australia. Sentinel surveillance is an active surveillance system that can provide early indication of an outbreak and provide accurate detailed data.

The clinic routinely records a standard sexual history and risk markers for infection as well as offering screening for STIs to all clients seen. Hence information is gathered not only on notifiable diseases but also for other STIs that are not notifiable.

Notifications alone may give a distorted view of the disease in the community. Notifications from the general medical community indicate twice as many women are infected with chlamydia as men but the Unit detects twice as many chlamydial infections in men as women. This is largely due to the high proportion of attendance by males, including men who have sex with men (MSM) at Clinic 275, as well as the policy of screening all symptomatic and asymptomatic patients attending Clinic 275.

2 Activities at Clinic 275, 2017

Overview

During 2017 there were 12716 episodes of care for 8796 clients resulting in 17256 clinic attendances. New client registrations accounted for 36% of all episodes, 50% of all patients seen and similar to 2016. Follow up visits have continuously decreased since 2013 (Figure 1). There has been a striking increase in the diagnoses of chlamydia (34%) and an increase in the diagnoses of gonorrhoea (26%) compared with 2016 (Table 1).

Eleven percent (1975/17256) of the overall attendances and thirty three percent (1975/5966) of males attending the clinic reported homosexual or bisexual behaviour in the preceding twelve months. 23.6% (665/2822) of new male registrants were men who have sex with men in 2017, which was lower than 2016 (25.6%). (Table 3)

New registrants at Clinic 275, 2017

Data on client attendances, episodes of care and individual clients have been extracted from the SHIP electronic medical record system since 5 December 2016. As the number of follow up visits has decreased due to the introduction of the SMS results system, the number of new episodes of care has risen (Figure 1, Table 1). The clinic operates mostly on a walk in basis, hence the reduction in follow up visits appears to allow increased walk in capacity for new episodes of care, increasing new opportunities for testing, for registration of new patients and to address new clinical problems.

A client may have more than one diagnosis for an episode of care; therefore total diagnoses may exceed total episodes of care. An individual client may have several episodes of care each year, each requiring one or more attendances at Clinic 275. The average number of visits per episode is 1.4 in 2017 and same as 2016.

Among all new client registrations, the male to female ratio was 1.76:1 (2822/1604), similar to 2016. The proportion of females under 20 years of age (23.8%) newly registering at the clinic exceeded that for males (10.7%) of the same age group by about 13% (Table 2). The median age of male and female new registrants was 26.5 years and 23.1 years respectively, similar to 2016 (Table 2).

Characteristics of new male registrants at Clinic 275, 2017

Among 2822 new male registrants who attended Clinic 275 in 2017, 23.6% reported male-to-male sexual activity (Table 3).

Around half of new male registrants were under 25 years old. The median age of male new registrants was 26.5 years. Most of the new registrants were Caucasian (67.2%) and only around 1% of new male registrants were Aboriginal Australians. 68.8% of new registrants were born in the region of Oceania and Antarctic where data was available (Table 2).

28.7% of new male registrants were symptomatic, 49.2% were asymptomatic. 12% reported to have 5 or more sexual partners in the past three months.

Among new male registrants, 19% reported no previous HIV test, 2.6% of new male registrants reported a past history of injecting drug use and 1% reported current injecting drug use (Table 3).

Characteristics of new female registrants at Clinic 275, 2017

Amongst 1604 new female registrants who attended Clinic 275 in 2017, over half of the new registrants were under 25 years old. The median age of female new registrants was 23 years of age (Table 2).

Similar to the male patients, most of the new female registrants were Caucasian (62%) and only 0.9% of new female registrants were Aboriginal Australians. 70% of new female registrants were born in the region of Oceania and Antarctic where data was available.

34.3% were symptomatic, 43.5% were asymptomatic. 7.0% reported to have 5 or more sexual partners in the past three months.

Among new female registrants, 17% reported no previous HIV test, 2% of new female registrants reported a past history of injecting drug use and only 0.6% reported current injecting drug use (Table 3).

The Specialised Health Information Program (SHIP)

Clinic 275 has adopted a new electronic clinic record system called the specialised health information program (SHIP) provided by CaraData. SHIP is a comprehensive, flexible, secure and complete electronic patient record system, specifically designed for Sexual Health services. SHIP provides an extensive medical record, offering support to clinical and administrative staff assisting in the daily recording of patient information, test results, visits, treatments, and diagnosis. SHIP can enable clinics to become paper light as it can be used as a complete Electronic Patient Record. SHIP has comprehensive data collection capability consistent with national STI/HIV datasets. We started registering patients using SHIP on 23 September 2016 and full electronic record keeping with SHIP went live on 5 December 2016.

Research projects

Clinic 275 has been involved in several research projects with Kirby Institute and Melbourne Sexual Health Centre (MSHC). These include the Australian Collaboration for Coordinated Enhanced Sentinel Surveillance of Sexually Transmitted Infections (STIs) and Blood Borne

Viruses (BBVs)-ACCESS, IMPRESS and HPV IMPACT study to investigate HPV types in younger men 16-35 years.

ACCESS involves four separate sentinel surveillance networks that provide important and unique information on testing and positivity of a range of STIs and BBVs in a range of priority populations: young heterosexuals, men who have sex with men; Indigenous people; and sex workers.

The four networks are:

Sexual health clinics (SHCs);

Primary Health Care Clinics (FPCs, including general practices and Family Planning Clinics);

Aboriginal Community Controlled Health Services (ACCHSs); and

Diagnostic laboratories

The aim of the ACCESS surveillance system is to maintain a comprehensive surveillance system that will help to evaluate the impact of interventions designed to control BBVs and STIs in Australia. Clinic 275 has been a site for ACCESS since 2013.

The IMPRESS study led by Melbourne Sexual Health Centre recruits males aged 17-19 who are invited to join this research project to investigate the prevalence of genital HPV infection in males following introduction of universal male Human Papillomavirus (HPV) vaccination. This study will find out how common HPV is among males aged 17 to 19 years. Two groups are compared: males who have been offered vaccination against HPV as part of the vaccination program and those who were not offered the vaccination.

The IMPACT study is a large multi-centre program funded by Commonwealth Government Department of Health. The study involves the collection of samples for HPV testing from healthy 18 to 35 year old volunteers. Participants for the study are recruited from a number of services across Australia, including sexual health clinics, general practice clinics, community-led Aboriginal Medical Services and family planning clinics.

Alfred Health's highly successful PrEPX study for those at risk for HIV infection has expanded into South Australia. Patients have the opportunity to enrol in a local Pre-Exposure Prophylaxis (PrEP) research study delivered through a partnership between Victoria's Alfred Health, the South Australian Health and Medical Research Institute (SAHMRI) and SA Health.

PrEPX-SA will enroll people whose sexual or injecting drug use activities means there is a high risk of acquiring HIV infection. Participants take daily antiretroviral medication to prevent HIV acquisition. Data is collected on demographic and behavioural characteristics of participants, HIV incidence, complications and STI rates.

Accredited Training for Fellowship of the Australasian Chapter of Sexual Health Physicians, The Royal Australasian College of Physician (RACP)

Clinic 275 is an Accredited Training Site for the Australasian Chapter of Sexual Health Medicine, (AChSHM), of the RACP, and currently holds the maximum five-year Accreditation period. The clinic offers one full-time equivalent Sexual Health registrar training position, and the position was occupied by a registrar in 2017 undertaking advanced training in Sexual Health Medicine towards Fellowship of AChSHM.

Resident Medical Officer Rotations

The Clinic employs two Royal Adelaide Hospital Resident Medical Officers during each three-month rotation. Consultants implement an induction program as well as training involving weekly tutorials. RMOs are encouraged to complete a presentation or project during the term. At least half of these RMOs are streamed for General Practice training, contributing to workforce capacity development in Sexual Health Medicine.

Staff Education

Clinic 275 ran a monthly journal club for doctors and other interested health care workers in 2017. Thursday staff development mornings were run for doctors and nurses, contributing to annual Continuing Professional Development requirements for nursing and medical staff. Registrars and consultant Sexual Health Physicians participated and presented at monthly Royal Adelaide Hospital education meetings, including the HIV genotype meeting, the HIV/Hepatitis meeting, and the Infectious Diseases Journal Club. A well-received quarterly training session delivered by our NGO partner, SIN (Sex Industry Network) on Sex Worker sensitivity training, was instituted for new staff.

Revised Diagnosis and Management of STI's

Clinic 275 first published guidelines on the Diagnosis and Management of STIs in 1998. Edition 5 was published in 2005 in print and PDF via the original STD services website. In 2013 and 2014 these guidelines were revised and updated, and further revisions and updates were made in 2017. Clinic 275 STI Diagnosis and Management Guidelines are published in electronic form and are available via the SA Health website www.sahealth.sa.gov.au/clinic275. These guidelines are state specific, reflecting local South Australian epidemiology and antibiotic sensitivities and can be accessed by primary care clinicians throughout SA via the Clinic 275 webpage. Phone support for interpretation and clinical advice for use of these guidelines is provided by the Duty Doctor roster of senior Sexual Health Physicians at Clinic 275.

Partner Notification (PN) Activities at Clinic 275

Partner notification (PN) is the process of identifying the relevant contacts of a person with an infectious disease and ensuring that they are aware of their exposure and the best option for testing and or treatment. PN is a state wide service located at Clinic 275 which provides contact tracing for people diagnosed with sexually transmitted infections (STI), not only at

Clinic 275, but also includes people diagnosed at other health care facilities, such as Defence Health, Prison Health or General Practice.

This has seen two significant changes in the role and function of PN at ASHC.

Firstly, we saw the development, consultation and implementation of the first ever Site Specific Instructions (SSI) for Chlamydia, Gonorrhoea, Syphilis and Human Immunodeficiency Virus (HIV). These documents provide clear and concise instruction on the correct process of PNS to a client diagnosed with these infections and are available to those working within Central Adelaide Local Health Network (CALHN).

Secondly the role and function of PN officer was successfully personally reclassified from a level 2 Clinical Nurse to a level 3 Nurse Consultant. This move forward only enhances the role of PN that is a vitally important part of ASHC's core business and also a crucial step in breaking the chains of infection in sexual networks in South Australia.

3 Chlamydia

The number of chlamydia diagnoses has dramatically increased in 2017, with 1005 new diagnoses in 2017 compared to 752 in 2016 (Table 4).

Chlamydia by gender

New chlamydia cases diagnosed at Clinic 275 were predominantly male. There were 733 (73%) and 272 (27%) females. The male to female ratio was 2.7 but this varied with age (Table 2, Figure 3).

Chlamydia by symptomatology

Only 28% of males and 29% of females diagnosed with Chlamydia at Clinic 275 in 2017 had symptoms where data was available (Table 5). The low rate of symptomatic chlamydia in males may be related to the significant proportion of chlamydial infections diagnosed on extra-genital swabs among males (Table 6). Extra-genital (rectal and pharyngeal) chlamydia infections are typically asymptomatic in nature, as are the majority of cervical chlamydia infections in women.

Chlamydia by specimen site

About 59% of males were diagnosed with chlamydia using polymerase chain reaction (PCR) from urogenital samples, while around 79% of females were diagnosed with chlamydia using the samples collected from cervix or vagina. The proportion of rectal chlamydia diagnosed was 36% in males and 19% in women. It has been routine practice to ask female patients for history of anal sex since 2013. Rectal chlamydia testing has become routine in asymptomatic women reporting anal sex since 2014.

Chlamydia by age

In 2017, the highest age-specific rates of diagnosed chlamydia were among those aged 20-24 years for both males and females. The number of diagnosed chlamydia among males and females aged 20-24 years in 2017 were 233 (31.8% of males with chlamydia) and 122 (44.9% of females with chlamydia) respectively (Table 7, Figure 3).

Chlamydia by ethnicity

Among 1005 diagnosed cases at Clinic 275 in 2017, 73%, 10% and 0.8% were identified as Caucasian, Asian and Aboriginal respectively (Table 8).

4 Gonorrhoea

In 2017, a total of 416 cases were diagnosed with gonococcal infection (Table 10). This was a 26% increase compared with gonorrhoea diagnoses in 2016.

Of all the patients diagnosed with gonorrhoea in 2017, over half were under 30 years old, 72% were of Caucasian ethnicity (Table 19).

Gonorrhoea by gender

There were 343 (82%) in males and 73 (18%) in female cases. There has been an increase in the numbers of diagnoses at Clinic 275, 416 cases in 2017 compared to 329 in 2016.

Numbers of gonorrhoea diagnoses in males were much higher than those in females (Table 10, Figure 5) and the male to female ratio 4.7:1 and was higher than the ratio of 3.5:1 reported in 2016.

Gonorrhoea by specimen site

In 2017, 30.9%, 32.1% and 37% of the male patients with newly diagnosed gonorrhoea were from urogenital, rectal and pharyngeal specimen sites respectively; 65.6%, 16.7% and 17.7% of females were diagnosed with gonorrhoea from urogenital site, throat and rectum respectively (Table 12).

Gonorrhoea by age

In 2017, the highest age-specific rates for gonorrhoea diagnoses were among those aged 20-24 years for both males and females and the number of diagnosed gonococcal infections in this age group were 92 (26.9%) in males and 24 (32.9%) in females respectively (Table 13).

Gonorrhoea by ethnicity

Among the 416 diagnosed cases at Clinic 275 in 2017, 72%, 3.6% and 10.6% were identified as Caucasian, Aboriginal and Asian respectively (Table 17).

5 Infectious Syphilis

In 2017, a total of 71 cases were diagnosed with infectious syphilis, the majority in male patients. There has been an increase in the number of diagnoses at Clinic 275, 71 cases in 2017 compared to 66 cases in 2016 (Table 16).

Infectious syphilis by gender

Most of the patients diagnosed with infectious syphilis were in male (67, 94%) and only 6% were diagnosed in female (Table 16, Figure 7).

Infectious syphilis by age

The highest age-specific rates for syphilis diagnoses were among those aged over 50 years in males (15, 21%) and 30-34 years (2, 50%) in females (Table 17).

Infectious syphilis by ethnicity

Among these 71 diagnosed male cases at Clinic 275 in 2017, 77.6% and 10.4% were identified as Caucasian and Asian respectively (Table 18).

6 Human Immunodeficiency virus infection

In 2017, there were 20 newly diagnosed cases of HIV at Clinic 275 with 19 in males and only 1 in females; the male to female ratio was 19:1 (Table 1).

HIV by age

The highest age-specific rates for HIV diagnoses were among those aged 25-29 years in males (Table 20).

HIV by ethnicity

In 2017, eight and nine cases with newly diagnosed HIV were identified as Asian and Caucasian respectively (Table 21).

HIV by sex preference

In 2017, 13 cases of newly diagnosed HIV were reported among men who had sex with men, which represents 68% of HIV cases diagnosed in male patients (Table 22).

7 *Mycoplasma genitalium*

Current testing policy for *Mycoplasma genitalium* at Clinic 275 is to test all males with urethral symptoms and regular male and female partners of men with confirmed *Mycoplasma genitalium*. No asymptomatic screening is recommended for *Mycoplasma genitalium* at Clinic 275. In 2017, there were 125 newly diagnosed cases of *Mycoplasma genitalium* at Clinic 275, 122 in males and 3 in females; the male to female ratio was 41:1 (Table 23).

***Mycoplasma genitalium* by age**

The highest age-specific rates for mycoplasma genitalium diagnoses were among those aged 25-29 years for both males and females (Table 24).

***Mycoplasma genitalium* by ethnicity**

In 2017, 84% of male cases of *Mycoplasma genitalium* were Caucasian, 4.1% Asian, and 2.5% Aboriginal Australian. All 3 female cases were of Caucasian ethnicity (Table 25).

***Mycoplasma genitalium* by sexual preference**

Around half of men diagnosed with *Mycoplasma genitalium* reported heterosexual sexual preference. The proportion of mycoplasma genitalium diagnoses has increased in MSM in 2017 (52, 42.6%) (Table 26).

8 Genital wart

Genital warts at first presentation have decreased in women under 30 years and heterosexual men under 30 years since 2007 (Table 27), concomitant with the introduction of the national human papillomavirus vaccination program. Free vaccination for boys in school at year eight commenced in 2014.

9 Rates of STIs among priority populations

Figures 9-13 show the proportion of major STIs and HIV among priority groups attending Clinic 275 in 2017. The denominator used is episodes of care for men who have sex with men (MSM), people under 30 years of age, Aboriginal Australian, people born overseas and sex workers. Note absolute numbers vary between priority groups, with relatively few episodes of care for Aboriginal clients and sex workers annually, while youth and MSM make up the majority of attendances at Clinic 275.

Figures 14-18 compare the rates of each STI and HIV among priority groups compared to the average rate for all attendances at Clinic 275 (dotted line).

Chlamydia remains the most common STI in every priority group (Figure 9-13).

Those at highest risk of chlamydia are MSM, clients under 30 years of age and born overseas (Figure 14). Chlamydia is far more common than any other STI affecting youth (Figure 10).

Groups at highest risk of gonorrhoea are MSM and Aboriginal clients. There was a peak of gonorrhoea diagnoses among sex workers attending Clinic 275 in 2008 (Figure 15).

Infectious syphilis has disproportionately affected MSM and sex worker attending Clinic 275 in 2016 (Figure 16).

HIV diagnoses remain consistently above the Clinic 275 average in MSM, and people born overseas (Figure 17). Over the past 15 years, very small numbers of cases of HIV have been recorded among patients reporting former or current sex work. Most of these cases were in males reporting sexual contact with men. These cases do not necessarily represent occupational exposure, and absolute risk of HIV among sex workers attending Clinic 275 appears to be very low. Occasional cases of HIV have been recorded in Aboriginal clients.

Table 1 Summary statistics for Clinic 275, 2017

<i>Diagnoses</i>	<i>Male</i>	<i>Female</i>	<i>Total</i>
Acute Hepatitis B	2	0	2
Bacterial vaginosis	na	177	177
Balanitis	98	na	98
Chlamydia	733	272	1005
Genital herpes	37	24	61
Genital warts	296	56	352
Gonorrhoea	343	73	416
Hepatitis C - incident	3	0	3
HIV	19	1	20
Infectious syphilis	67	4	71
Molluscum contagiosum	108	34	142
Mycoplasma genitalium	122	3	125
NSU	79		79
Pelvic inflammatory disease	na	175	175
Scabies	8	1	9
Trichomoniasis	2	10	12
Urethral irritation	49	na	49
Urinary tract infection	2	51	53
Clinic attendances	12372	4884	17256
Episodes of care	8923	3793	12716
Individual clients	5966	2830	8796
New registrations	2822	1604	4426

na: not applicable

Table 2 Demographic characteristics of new registrants for the first time at Clinic 275, 2017

<i>Characteristics</i>	<i>Male</i>		<i>Female</i>	
	n	%	n	%
New registrants	2822	61.2	1604	38.8
Age				
<20	302	10.7	381	23.8
20-24	880	31.2	604	37.7
25-29	639	22.6	278	17.3
30-34	337	11.9	142	8.9
35-39	210	32.9	69	4.3
40-44	142	5.0	39	2.4
45-49	110	3.9	41	2.6
50+	202	7.2	50	3.1
Median age (years)	26.5		23.1	
Age range (years)	14.7-81.4		13.6-79.5	
Race				
Aboriginal	22	0.8	15	0.9
Asian	293	10.4	179	11.2
Caucasian	1895	67.2	997	62.2
Other	128	4.5	79	4.9
African	42	1.5	43	2.7
Unknown	442	15.7	293	18.3
Country of Birth				
Oceania and Antarctic	2050	68.8	1132	70.4
North-West Europe	250	8.5	161	9.5
Southern and Eastern Europe	45	2.1	36	1.5
North Africa and the Middle East	40	1.8	19	0.7
South-East Asia	86	4.2	45	4.5
North-East Asia	101	4.4	72	4.5
Southern and Central Asia	79	3.7	20	1.4
American	72	3.0	53	3.9
Sub-Saharan Africa	45	2.4	40	2.7

Table 3 Characteristics of clinic presentation of new registrants seen for the first time at Clinic 275, 2017

<i>Characteristics</i>	<i>Male</i>		<i>Female</i>	
	n	%	n	%
No previous HIV test	533	18.9	278	17.3
Reason for visit				
Asymptomatic	1389	49.2	697	43.5
Symptomatic	809	28.7	550	34.3
Other	599	21.2	344	21.4
Partners in last 3 months				
0	608	21.5	386	24.1
1	815	28.9	533	33.2
2	537	19.0	328	20.4
3	326	11.6	162	10.1
4	199	7.1	81	5.0
5 or more	337	11.9	114	7.1
Injecting drug use				
Past history – ever used IDU	74	2.6	32	2.0
Current use	27	1.0	9	0.6
Male-to-male sex	665	23.6		

*: denominator is new male registrant

Table 4 Number of chlamydia diagnoses at Clinic 275, 2008-2017

<i>Year</i>	<i>Male</i>	<i>Female</i>	<i>Total</i>
2008	396	223	619
2009	357	228	585
2010	446	244	690
2011	513	313	826
2012	514	299	813
2013	545	309	854
2014	553	298	851
2015	583	301	884
2016	484	268	752
2017	733	272	1005

Table 5 Number of chlamydia diagnoses by symptomatology at Clinic 275, 2017

<i>Symptomatology</i>	<i>Male</i>		<i>Female</i>		<i>Total</i>	
	n	%	n	%	n	%
Symptomatic*	208	28.4	80	29.4	288	28.7
Asymptomatic	281	38.3	114	41.9	395	39.3
Other	208	28.4	64	23.5	272	27.1
Unknown	36	4.9	14	5.1	50	5.0
Total	733	100	272	100	1005	100

**: Cases are classified as "symptomatic" if genital discharge and/or dysuria are reported in male; and genital discharge and /or dysuria and/or pelvic pain are reported in female*

Table 6 Number of chlamydia diagnoses by specimen site at Clinic 275, 2017

<i>Specimen site</i>	<i>Male</i>		<i>Female</i>		<i>Total</i>	
	n	%	n	%	n	%
Urogenital	478	58.6	253	78.8	731	64.3
Rectum	292	35.8	61	19.0	353	31.0
Throat	46	5.6	7	2.2	53	4.7
Total	816	100	321	100	1137	100

NB: Patients may have infections at multiple sites; hence the total number of infections might be more than the total number of diagnoses.

Table 7 Number of chlamydia diagnoses by age groups at Clinic 275, 2017

<i>Age groups (yrs)</i>	<i>Male</i>		<i>Female</i>		<i>Total</i>	
	n	%	n	%	n	%
<20	48	6.5	74	27.2	122	12.1
20-24	233	31.8	122	44.9	355	35.3
25-29	184	25.1	39	14.3	223	22.2
30-34	97	13.2	19	7.0	116	11.5
35-39	47	6.4	11	4.0	58	5.8
40-44	31	4.2	1	0.4	32	3.2
45-49	34	4.6	3	1.1	37	3.7
50+	59	8.0	3	1.1	62	6.2
Total	733	100	272	100	1005	100

Table 8 Number of chlamydia diagnoses by ethnicity at Clinic 275, 2017

<i>Ethnicity</i>	<i>Male</i>		<i>Female</i>		<i>Total</i>	
	n	%	n	%	n	%
Aboriginal	5	0.7	3	1.1	8	0.8
Asian	66	9.0	34	12.5	100	10.0
Caucasian	558	76.1	175	64.3	733	72.9
Other	32	4.4	13	4.8	45	4.5
African	22	3.0	12	4.4	34	3.4
Unknown	50	6.8	35	12.9	85	8.5
Total	733	100	272	100	1005	100

Table 9 Number of chlamydia diagnoses by gender and sexual preference at Clinic 275, 2017

<i>Gender and sexual preference</i>	<i>Male</i>		<i>Female</i>		<i>Total</i>	
	n	%	n	%	n	%
MSM	339	46.2			339	33.7
Heterosexual Men	367	50.1			367	36.5
Female			253	93.0	253	25.2
Unknown	27	3.7	19	7.0	46	4.6
Total	733	100	272	100	1005	100

Table 10 Number of gonorrhoea diagnoses at Clinic 275, 2008-2017

<i>Year</i>	<i>Male</i>		<i>Female</i>		<i>Total</i>	
2008	139		43		182	
2009	72		20		92	
2010	94		11		105	
2011	121		16		137	
2012	161		21		182	
2013	174		47		221	
2014	238		31		269	
2015	252		35		287	
2016	256		73		329	
2017	343		73		416	

Table 11 Number of gonorrhoea diagnoses by symptomatology at Clinic 275, 2017

<i>Symptomatology</i>	<i>Male</i>		<i>Female</i>		<i>Total</i>	
	n	%	n	%	n	%
Symptomatic*	109	31.8	19	26.0	128	30.8
Asymptomatic	71	20.7	12	16.4	83	20.0
Other	132	38.5	28	38.4	160	38.5
Unknown	31	9.0	14	19.2	45	10.8
Total	343	100	73	100	416	100

NB: Cases are classified as "symptomatic" only if genital discharge and/or dysuria are reported

Table 12 Number of gonorrhoea diagnoses by specimen site at Clinic 275, 2017

<i>Specimen site</i>	<i>MSM</i>		<i>Heterosexual men</i>		<i>Female</i>	
	n	%	n	%	n	%
Urogenital	150	30.9	63	65.6	213	36.6
Rectum	156	32.1	16	16.7	172	29.6
Throat	180	37.0	17	17.7	197	33.8
Total	486	100	96	100	582	100

NB: Patients may have infections at multiple sites; hence the total number of infections might be more than the total number of diagnoses.

Table 13 Number of gonorrhoea diagnoses by age groups at Clinic 275, 2017

<i>Age groups (yrs)</i>	<i>Male</i>		<i>Female</i>		<i>Total</i>	
	n	%	n	%	n	%
<20	10	2.9	5	6.8	15	3.6
20-24	92	26.8	24	32.9	116	27.9
25-29	88	25.7	10	13.7	98	23.6
30-34	52	15.2	13	17.8	65	15.6
35-39	34	9.9	8	11.0	42	10.1
40-44	18	5.2	5	6.8	23	5.5
45-49	19	5.5	6	8.2	25	6.0
50+	30	8.7	2	2.7	32	7.7
Total	343	100	73	100	416	100

Table 14 Number of gonorrhoea diagnoses by ethnicity at Clinic 275, 2017

<i>Ethnicity</i>	<i>Male</i>		<i>Female</i>		<i>Total</i>	
	n	%	n	%	n	%
Aboriginal	10	2.9	5	6.8	15	3.6
Asian	41	12.0	3	4.1	44	10.6
Caucasian	246	71.7	54	74.0	300	72.1
Other	22	6.4	5	6.8	27	6.5
African	7	2.0	0	0.0	7	1.7
Unknown	17	5.0	6	8.2	23	5.5
Total	343	100	73	100	416	100

Table 15 Number of gonorrhoea diagnoses by gender and sexual preference at Clinic 275, 2017

<i>Gender and sexual preference</i>	<i>Male</i>		<i>Female</i>		<i>Total</i>	
	n	%	n	%	n	%
MSM	271	79.0			271	65.1
Heterosexual Men	57	16.6			57	13.7
Female			60	82.2	60	14.4
Unknown	15	4.4	13	17.8	28	6.7
Total	343	100	73	100	416	100

Table 16 Number of infectious syphilis diagnoses at Clinic 275, 2008-2017

<i>Year</i>	<i>Male</i>		<i>Female</i>		<i>Total</i>	
2008	27		6		33	
2009	20		0		20	
2010	16		6		22	
2011	17		1		18	
2012	23		2		25	
2013	33		2		35	
2014	25		1		26	
2015	42		5		47	
2016	63		4		67	
2017	67		4		71	

Table 17 Number of infectious syphilis diagnoses by age groups at Clinic 275, 2017

<i>Age groups (yrs)</i>	<i>Male</i>		<i>Female</i>		<i>Total</i>	
	n	%	n	%	n	%
<20	2	3.0	0	0.0	2	2.8
20-24	7	10.4	0	0.0	7	9.9
25-29	10	14.9	1	25.0	11	15.5
30-34	10	14.9	2	50.0	12	16.9
35-39	12	17.9	1	25.0	13	18.3
40-44	4	6.0	0	0.0	4	5.6
45-49	5	7.5	0	0.0	5	7.0
50+	17	25.4	0	0.0	17	23.9
Total	67	100	4	100	71	100

Table 18 Number of infectious syphilis diagnoses by ethnicity at Clinic 275, 2017

<i>Ethnicity</i>	<i>Male</i>		<i>Female</i>		<i>Total</i>	
	n	%	n	%	n	%
Aboriginal	0	0.0	0	0.0	0	0.0
Asian	7	10.4	0	0.0	7	9.9
Caucasian	52	77.6	3	75.0	55	77.5
Other	3	4.5	0	0.0	3	4.2
Unknown	5	7.5	1	25.0	6	8.5
Total	67	100	4	100	71	100

Table 19 Number of infectious syphilis diagnoses by gender and sexual preference at Clinic 275, 2017

<i>Gender and sexual preference</i>	<i>Male</i>		<i>Female</i>		<i>Total</i>	
	n	%	n	%	n	%
MSM	49	73.1			49	69.0
Heterosexual Men	8	11.9			8	11.3
Female			4	100.0	4	5.6
Unknown	10	14.9			10	14.1
Total	67	100	4	100	71	100

Table 20 Number of HIV diagnoses by age groups at Clinic 275, 2017

<i>Age groups (yrs)</i>	<i>Male</i>		<i>Female</i>		<i>Total</i>	
	n	%	n	%	n	%
<20	0	0.0	0	0.0	0	0.0
20-24	4	21.1	0	0.0	4	20.0
25-29	4	21.1	1	100.0	5	25.0
30-34	4	21.1	0	0.0	4	20.0
35-39	4	21.1	0	0.0	4	20.0
40-44	2	10.5	0	0.0	2	10.0
45-49	0	0.0	0	0.0	0	0.0
50+	1	5.3	0	0.0	1	5.0
Total	19	100	1	100	20	100

Table 21 Number of HIV diagnoses by ethnicity at Clinic 275, 2017

<i>Ethnicity</i>	<i>Male</i>		<i>Female</i>		<i>Total</i>	
	n	%	n	%	n	%
Aboriginal	0	0.0	0	0.0	0	0.0
Asian	8	42.1	0	0.0	8	40.0
Caucasian	9	47.4	1	100.0	10	50.0
Other	2	10.5	0	0.0	2	10.0
African	0	0.0	0	0.0	0	0.0
Total	19	100	1	100	20	100

Table 22 Number of HIV diagnoses by gender and sexual preference at Clinic 275, 2017

<i>Gender and sexual preference</i>	<i>Male</i>		<i>Female</i>		<i>Total</i>	
	n	%	n	%	n	%
MSM	13	68.4			13	65.0
Heterosexual Men	5	26.3			5	25.0
Female			1	100	1	5.0
Unknown	1	5.3			1	5.0
Total	19	100	1	100	20	100

Table 23 Number of *mycoplasma genitalium* diagnoses at Clinic 275, 2010-2017

<i>Year</i>	<i>Male</i>	<i>Female</i>	<i>Total</i>
2010	13	3	16
2011	34	4	38
2012	66	12	78
2013	58	5	63
2014	62	7	69
2015	82	5	87
2016	95	17	112
2017	122	3	125

Table 24 Number of *mycoplasma genitalium* diagnoses by age groups at Clinic 275, 2017

<i>Age groups (yrs)</i>	<i>Male</i>		<i>Female</i>		<i>Total</i>	
	n	%	n	%	n	%
<20	8	6.6	2	66.7	10	8.0
20-24	17	13.9	1	33.3	18	14.4
25-29	28	23.0	0	0.0	28	22.4
30-34	27	22.1	0	0.0	27	21.6
35-39	13	10.7	0	0.0	13	10.4
40-44	16	13.1	0	0.0	16	12.8
45-49	4	3.3	0	0.0	4	3.2
50+	9	7.4	0	0.0	9	7.2
Total	122	100	3	100	125	100

Table 25 Number of *mycoplasma genitalium* diagnoses by ethnicity at Clinic 275, 2017

<i>Ethnicity</i>	<i>Male</i>		<i>Female</i>		<i>Total</i>	
	n	%	n	%	n	%
Aboriginal	3	2.5	0	0.0	3	2.4
Asian	5	4.1	0	0.0	5	4.0
Caucasian	103	84.4	3	100.0	106	84.8
Other	1	0.8	0	0.0	1	0.8
African	8	6.6	0	0.0	8	6.4
Unknown	2	1.6	0	0.0	2	1.6
Total	122	100	3	100	125	100

Table 26 Number of *Mycoplasma genitalium* diagnoses by gender and sexual preference at Clinic 275, 2017

<i>Gender and sexual preference</i>	<i>Male</i>		<i>Female</i>		<i>Total</i>	
	n	%	n	%	n	%
MSM	52	42.6		0.0	52	41.6
Heterosexual Men	63	51.6		0.0	63	50.4
Female		0.0	3	100.0	3	2.4
Unknown	7	5.7		0.0	7	5.6
Total	122	100	3	100	125	100

*: denominator is new male registrants

Table 27 Number of diagnoses of genital gonorrhoea, syphilis, chlamydia, NSU, bacterial vaginosis, herpes and warts by gender at Clinic 275, 2008-2017

<i>Year</i>	<i>All episodes</i>				<i>New patient 1st presentation</i>	
	Gonorrhoea	Syphilis	Chlamydia	NSU	Herpes	Warts
Male						
2008	139	27	396	127	52	264
2009	72	20	357	100	40	246
2010	94	16	446	83	56	242
2011	121	17	513	111	55	228
2012	161	23	514	109	60	209
2013	174	33	545	136	39	177
2014	238	25	553	130	49	175
2015	252	42	583	125	59	173
2016	254	63	486	119	49	188
2017	343	67	733	79	27	176
	Gonorrhoea	Syphilis	Chlamydia	Bacterial vaginosis	Herpes	Warts
Female						
2008	43	6	223	252	45	125
2009	20	0	228	245	62	133
2010	11	6	244	343	57	78
2011	16	1	313	273	67	80
2012	21	2	299	250	54	77
2013	47	2	309	271	53	62
2014	31	1	298	289	45	64
2015	35	5	301	301	47	53
2016	74	4	269	261	43	53
2017	73	4	272	177	19	41

Table 28 Proportion of chlamydia diagnoses among risk groups and compared with all clinic attenders by episode of care, 2008-2017

<i>Year</i>	<i>MSM</i>	<i><30 yrs</i>	<i>Sex worker</i>	<i>Born overseas</i>	<i>Aboriginal Australian</i>	<i>all attenders</i>
2008	7.0%	12.6%	6.0%	14.0%	8.3%	9.5%
2009	7.8%	11.7%	4.0%	7.3%	8.8%	8.7%
2010	8.3%	12.5%	2.9%	8.8%	14.9%	9.7%
2011	10.7%	14.7%	5.5%	9.1%	15.5%	11.1%
2012	12.0%	14.3%	5.5%	9.8%	12.0%	10.8%
2013	12.6%	14.8%	9.5%	10.7%	11.0%	11.5%
2014	12.4%	12.4%	3.3%	11.1%	10.6%	10.4%
2015	11.7%	12.7%	12.0%	10.6%	7.9%	10.4%
2016	7.7%	10.2%	5.7%	6.0%	7.3%	8.6%
2017	17.6%	13.4%	7.9%	14.5%	9.5%	11.4%

Table 29 Proportion of gonorrhoea diagnoses among risk groups and compared with all clinic attenders by episode of care, 2008-2017

<i>Year</i>	<i>MSM</i>	<i><30 yrs</i>	<i>Sex worker</i>	<i>Born overseas</i>	<i>Aboriginal Australian</i>	<i>all attenders</i>
2008	5.0%	2.3%	8.0%	1.7%	6.0%	2.8%
2009	3.5%	1.0%	4.0%	1.1%	5.0%	1.4%
2010	5.2%	1.4%	1.0%	1.1%	4.0%	1.5%
2011	7.4%	1.8%	0.0%	1.5%	11.7%	1.8%
2012	10.6%	2.5%	2.8%	1.7%	4.3%	2.4%
2013	8.7%	2.8%	1.2%	2.5%	3.7%	3.0%
2014	13.2%	3.1%	4.3%	3.2%	4.8%	3.3%
2015	11.9%	2.8%	0.9%	3.3%	5.9%	3.4%
2016	8.8%	3.6%	3.4%	2.6%	6.3%	3.7%
2017	14.1%	4.4%	4.4%	4.9%	17.9%	4.7%

Table 30 Proportion of infectious syphilis diagnoses among risk groups and compared with all clinic attenders by episode of care, 2008-2017

<i>Year</i>	<i>MSM</i>	<i><30 yrs</i>	<i>Sex worker</i>	<i>Born overseas</i>	<i>Aboriginal Australian</i>	<i>all attenders</i>
2008	2.2%	0.3%	2.0%	1.3%	2.4%	0.5%
2009	1.6%	0.2%	0.0%	0.5%	0.0%	0.3%
2010	0.9%	0.2%	0.0%	0.6%	0.0%	0.3%
2011	0.8%	0.1%	0.0%	0.6%	1.0%	0.2%
2012	1.3%	0.1%	0.9%	0.4%	0.0%	0.3%
2013	1.8%	0.3%	1.2%	0.7%	1.2%	0.5%
2014	1.1%	0.1%	1.1%	0.5%	1.0%	0.3%
2015	2.1%	0.4%	0.9%	0.6%	0.0%	0.6%
2016	2.4%	0.5%	0.0%	0.5%	1.0%	0.8%
2017	3.2%	0.5%	0.0%	1.8%	1.2%	1.0%

Table 31 Proportion of HIV diagnoses among risk groups and compared with all clinic attenders by episode of care, 2008-2017

<i>Year</i>	<i>MSM</i>	<i><30 yrs</i>	<i>Sex worker</i>	<i>Born overseas</i>	<i>Aboriginal Australian</i>	<i>all attenders</i>
2008	1.1%	0.1%	0.0%	0.2%	1.2%	0.2%
2009	0.9%	0.1%	0.0%	0.4%	0.0%	0.2%
2010	0.6%	0.0%	0.0%	0.2%	1.0%	0.2%
2011	1.2%	0.2%	0.0%	0.6%	0.0%	0.3%
2012	1.0%	0.2%	0.0%	0.5%	0.0%	0.3%
2013	1.2%	0.2%	0.0%	0.6%	1.2%	0.3%
2014	0.9%	0.1%	0.0%	0.3%	0.0%	0.2%
2015	1.0%	0.2%	0.0%	0.4%	1.0%	0.3%
2016	0.9%	0.3%	0.0%	0.1%	4.2%	0.3%
2017	0.7%	0.2%	0.0%	0.5%	0.0%	0.2%

Table 32 Proportion of *mycoplasma genitalium* diagnoses among risk groups and compared with all clinic attenders by episode of care, 2010-2017

<i>Year</i>	<i>MSM</i>	<i><30 yrs</i>	<i>Sex worker</i>	<i>Born overseas</i>	<i>Aboriginal Australian</i>	<i>all attenders</i>
2010	0.3%	0.2%	0.0%	0.3%	0.0%	0.2%
2011	0.4%	0.5%	0.0%	1.2%	1.9%	0.5%
2012	0.8%	1.1%	0.9%	1.5%	0.0%	1.0%
2013	0.9%	0.9%	0.0%	1.0%	0.0%	0.9%
2014	0.9%	0.9%	0.0%	1.1%	0.0%	0.8%
2015	1.6%	0.8%	0.9%	0.9%	1.0%	1.0%
2016	1.0%	1.5%	0.0%	0.7%	2.1%	1.3%
2017	1.8%	1.3%	0.0%	1.0%	2.4%	1.4%

Table 33 Proportion of major STIs and HIV diagnoses in MSM, 2008-2017

<i>Year</i>	<i>Chlamydia</i>			<i>Gonorrhoea</i>			<i>Syphilis</i>			<i>HIV</i>			<i>Mycoplasma genitalium</i>		
	<i>n</i>	<i>Total</i>	<i>%</i>	<i>n</i>	<i>Total</i>	<i>%</i>	<i>n</i>	<i>Total</i>	<i>%</i>	<i>n</i>	<i>Total</i>	<i>%</i>	<i>n</i>	<i>Total</i>	<i>%</i>
2008	65	619	10.5%	46	182	25.3%	20	33	60.6%	10	12	83.3%			
2009	76	585	13.0%	34	92	37.0%	16	20	80.0%	9	12	75.0%			
2010	92	690	13.3%	58	105	55.2%	10	22	45.5%	7	11	63.6%	3	16	18.8%
2011	135	826	16.3%	93	137	67.9%	10	18	55.6%	15	22	68.2%	5	38	13.2%
2012	154	813	18.9%	136	182	74.7%	17	25	68.0%	13	20	65.0%	10	78	12.8%
2013	176	854	20.6%	121	221	54.8%	25	35	71.4%	17	23	73.9%	12	63	19.0%
2014	196	851	23.0%	209	269	77.7%	17	26	65.4%	14	20	70.0%	14	69	20.3%
2015	209	884	23.6%	212	287	73.9%	37	47	78.7%	17	23	73.9%	29	87	33.3%
2016	158	752	21.0%	181	329	55.0%	49	66	74.2%	19	28	67.9%	21	112	18.8%
2017	339	1005	33.7%	271	416	65.1%	49	71	69.0%	13	20	65.0%	35	125	28.0%

Table 34 Proportion of major STIs and HIV diagnosed in patients (<30 years), 2008-2017

Year	Chlamydia			Gonorrhoea			Syphilis			HIV			Mycoplasma genitalium		
	n	Total	%	n	Total	%	n	Total	%	n	Total	%	n	Total	%
2008	476	619	76.9%	87	182	47.8%	11	33	33.3%	4	12	33.3%			
2009	448	585	76.6%	39	92	42.4%	7	20	35.0%	5	12	41.7%			
2010	514	690	74.5%	59	105	56.2%	7	22	31.8%	2	11	18.2%	8	16	50.0%
2011	646	826	78.2%	78	137	56.9%	6	18	33.3%	8	22	36.4%	20	38	52.6%
2012	634	813	78.0%	112	182	61.5%	5	25	20.0%	11	20	55.0%	51	78	65.4%
2013	667	854	78.1%	127	221	57.5%	14	35	40.0%	10	23	43.5%	42	63	66.7%
2014	625	851	73.4%	158	269	58.7%	3	26	11.5%	7	20	35.0%	45	69	65.2%
2015	650	884	73.5%	145	287	50.5%	20	47	42.6%	8	23	34.8%	42	87	48.3%
2016	534	752	71.0%	187	329	56.8%	28	66	42.4%	15	28	53.6%	78	112	69.6%
2017	707	1016	69.6%	226	423	53.4%	26	75	34.7%	9	19	47.4%	56	125	44.8%

Table 35 Proportion of major STIs and HIV diagnoses in sex workers, 2008-2017

Year	Chlamydia			Gonorrhoea			Syphilis			HIV			Mycoplasma genitalium		
	n	Total	%	n	Total	%	n	Total	%	n	Total	%	n	Total	%
2008	6	619	1.0%	8	182	4.4%	2	33	6.1%	0	12	0.0%			
2009	4	585	0.7%	4	92	4.3%	0	20	0.0%	0	12	0.0%			
2010	3	690	0.4%	1	105	1.0%	0	22	0.0%	0	11	0.0%	0	16	0.0%
2011	6	826	0.7%	0	137	0.0%	0	18	0.0%	0	22	0.0%	0	38	0.0%
2012	6	813	0.7%	3	182	1.6%	1	25	4.0%	0	20	0.0%	1	78	1.3%
2013	8	854	0.9%	1	221	0.5%	1	35	2.9%	0	23	0.0%	0	63	0.0%
2014	3	851	0.4%	4	269	1.5%	1	26	3.8%	0	20	0.0%	0	69	0.0%
2015	13	884	1.5%	1	287	0.3%	1	47	2.1%	0	23	0.0%	1	87	1.1%
2016	5	752	0.7%	3	329	0.9%	0	66	0.0%	0	28	0.0%	0	112	0.0%
2017	14	1016	1.4%	8	423	1.9%	1	75	1.3%	0	19	0.0%	0	125	0.0%

Table 36 Proportion of major STIs and HIV diagnoses in patients born overseas, 2008-2017

Year	<i>Chlamydia</i>			<i>Gonorrhoea</i>			<i>Syphilis</i>			<i>HIV</i>			<i>Mycoplasma genitalium</i>		
	n	Total	%	n	Total	%	n	Total	%	n	Total	%	n	Total	%
2008	67	619	10.8%	8	182	4.4%	6	33	18.2%	1	12	8.3%			
2009	107	585	18.3%	16	92	17.4%	8	20	40.0%	6	12	50.0%			
2010	126	690	18.3%	16	105	15.2%	8	22	36.4%	3	11	27.3%	4	16	25.0%
2011	149	826	18.0%	25	137	18.2%	10	18	55.6%	9	22	40.9%	19	38	50.0%
2012	168	813	20.7%	29	182	15.9%	7	25	28.0%	8	20	40.0%	25	78	32.1%
2013	201	854	23.5%	46	221	20.8%	13	35	37.1%	11	23	47.8%	18	63	28.6%
2014	228	851	26.8%	65	269	24.2%	11	26	42.3%	6	20	30.0%	23	69	33.3%
2015	226	884	25.6%	70	287	24.4%	13	47	27.7%	9	23	39.1%	19	87	21.8%
2016	123	752	16.4%	54	329	16.4%	11	66	16.7%	3	28	10.7%	14	112	12.5%
2017	255	1016	25.1%	82	423	19.4%	23	75	30.7%	9	19	47.4%	22	125	17.6%

Table 37 Proportion of major STIs and HIV diagnoses in Aboriginal Australians, 2008-2017

<i>Year</i>	<i>Chlamydia</i>			<i>Gonorrhoea</i>			<i>Syphilis</i>			<i>HIV</i>			<i>Mycoplasma genitalium</i>		
	<i>n</i>	<i>Total</i>	<i>%</i>	<i>n</i>	<i>Total</i>	<i>%</i>	<i>n</i>	<i>Total</i>	<i>%</i>	<i>n</i>	<i>Total</i>	<i>%</i>	<i>n</i>	<i>Total</i>	<i>%</i>
2008	7	619	1.1%	5	182	2.7%	2	33	6.1%	1	12	8.3%			
2009	7	585	1.2%	4	92	4.3%	0	20	0.0%	0	12	0.0%			
2010	15	690	2.2%	4	105	3.8%	0	22	0.0%	1	11	9.1%	0	16	0.0%
2011	16	826	1.9%	12	137	8.8%	1	18	5.6%	0	22	0.0%	2	38	5.3%
2012	11	813	1.4%	4	182	2.2%	0	25	0.0%	0	20	0.0%	0	78	0.0%
2013	9	854	1.1%	3	221	1.4%	1	35	2.9%	1	23	4.3%	0	63	0.0%
2014	11	851	1.3%	5	269	1.9%	1	26	3.8%	0	20	0.0%	0	69	0.0%
2015	8	884	0.9%	6	287	2.1%	0	47	0.0%	1	23	4.3%	1	87	1.1%
2016	7	752	0.9%	6	329	1.8%	1	66	1.5%	4	28	14.3%	2	112	1.8%
2017	9	1016	0.9%	12	423	2.8%	1	75	1.3%	0	19	0.0%	3	125	2.4%

Figure 1 Number of clients by attendance categories, 2008-2017

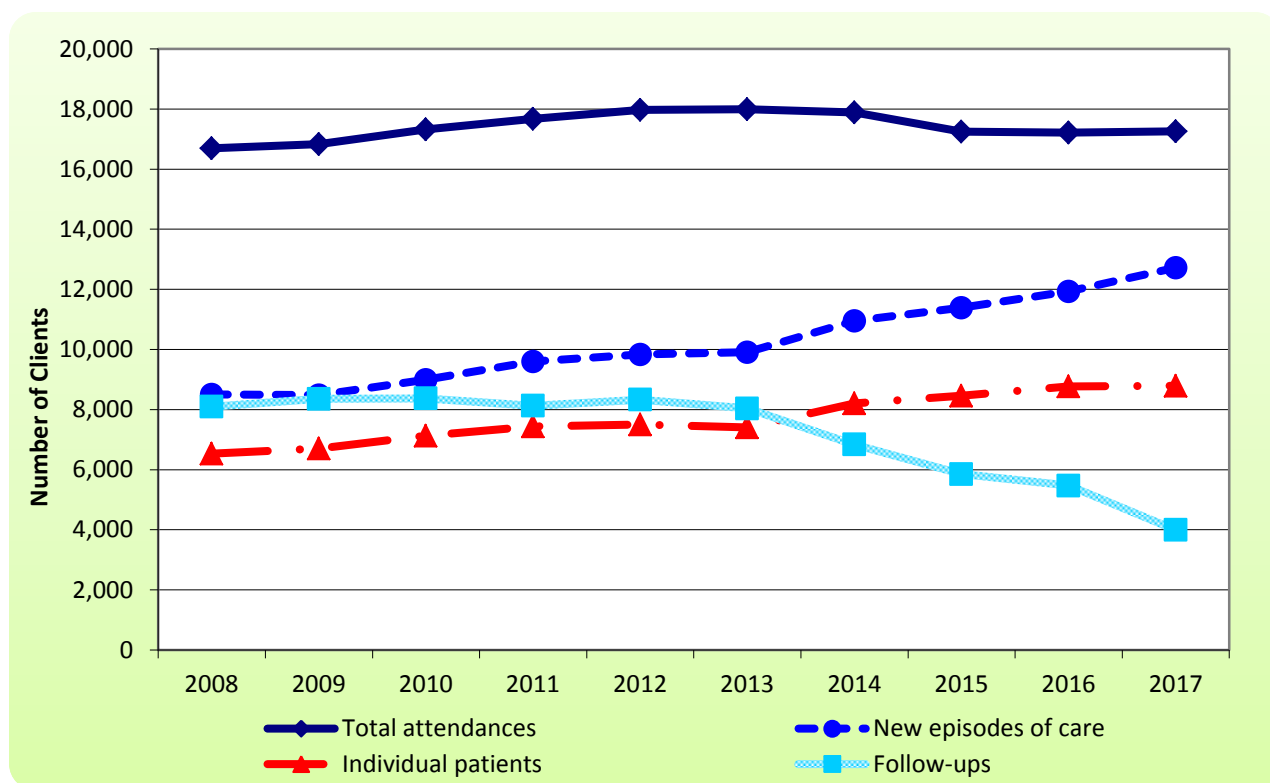


Figure 2 Number of chlamydia diagnoses by gender at Clinic 275, 2008-2017

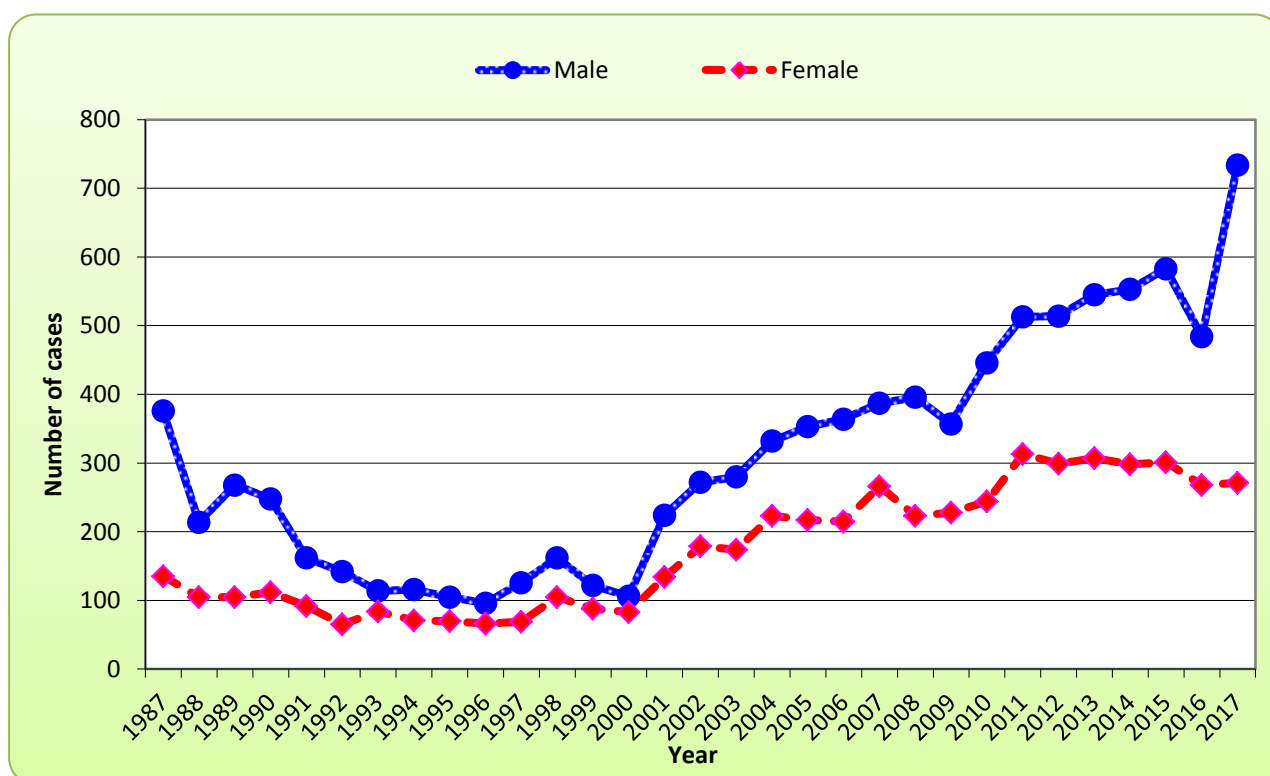


Figure 3 Number of chlamydia diagnoses by gender and age groups at Clinic 275, 2017

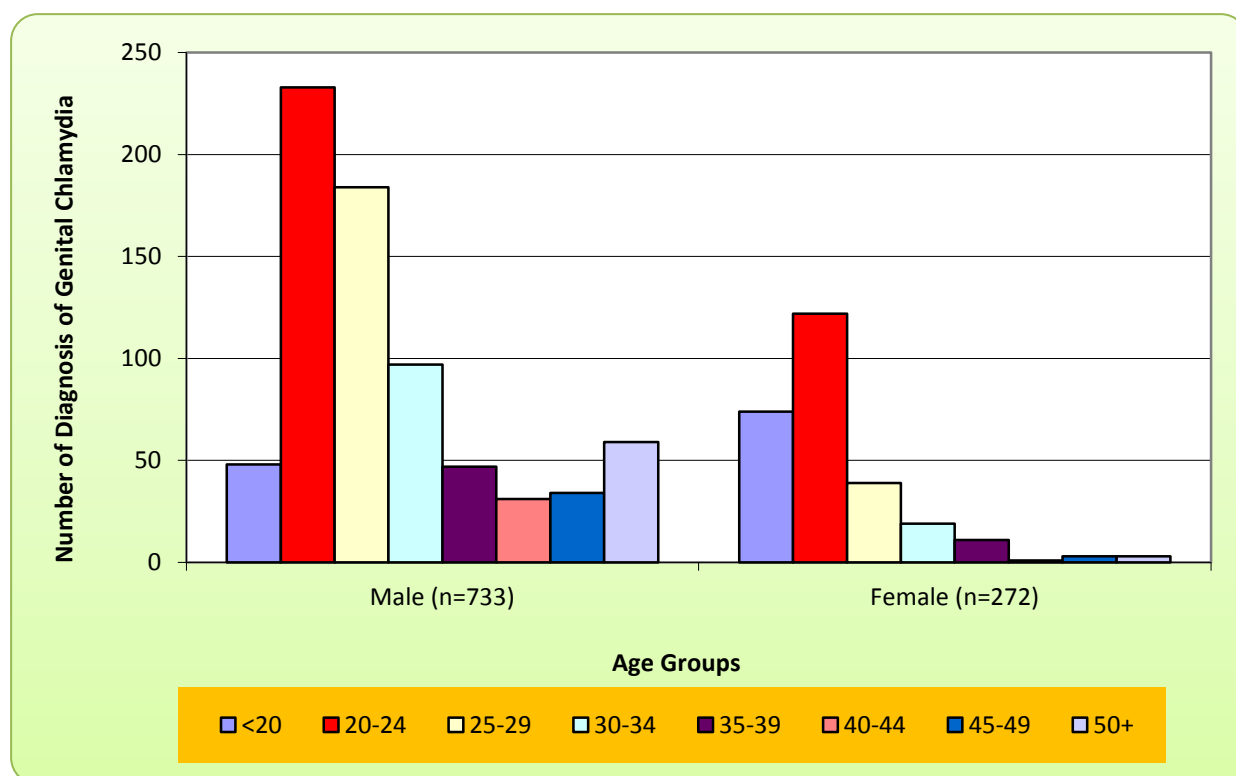


Figure 4 Number of gonorrhoea diagnoses by gender at Clinic 275, 2008-2017

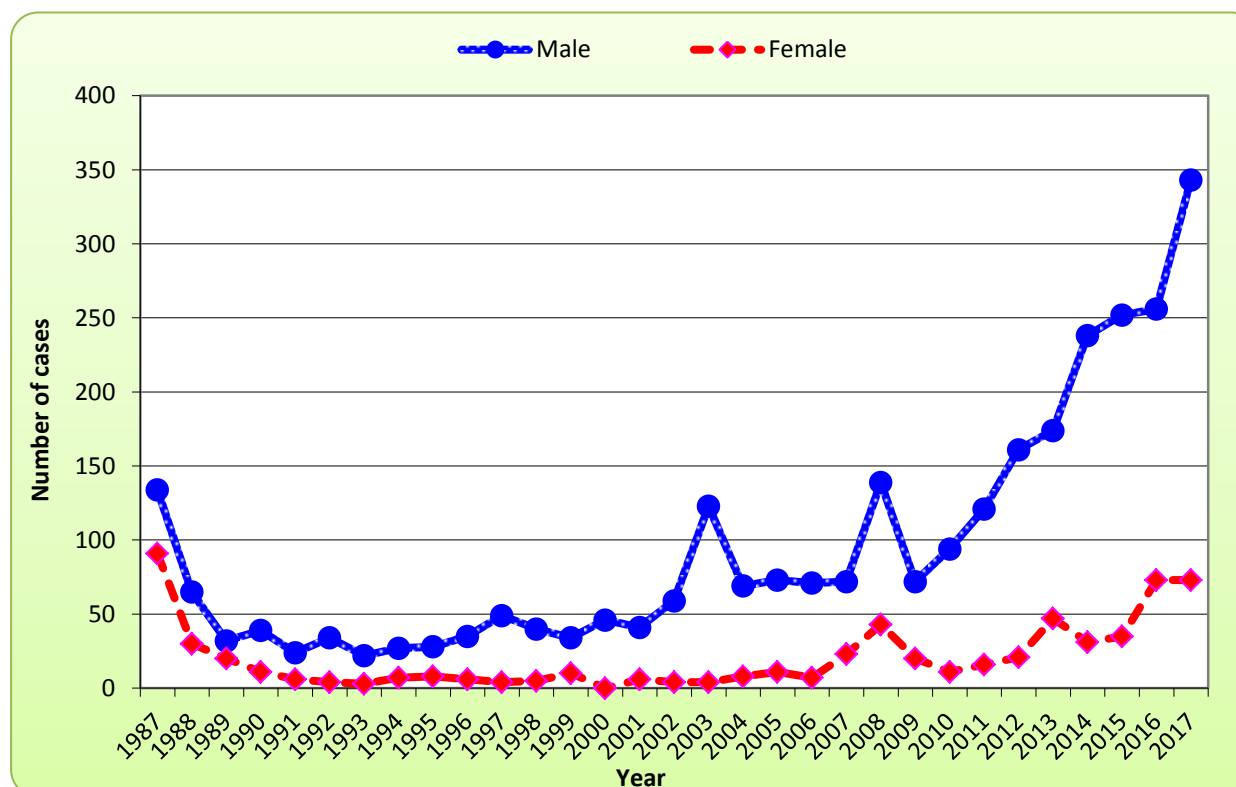


Figure 5 Number of gonorrhoea diagnoses by gender and age groups at Clinic 275, 2017

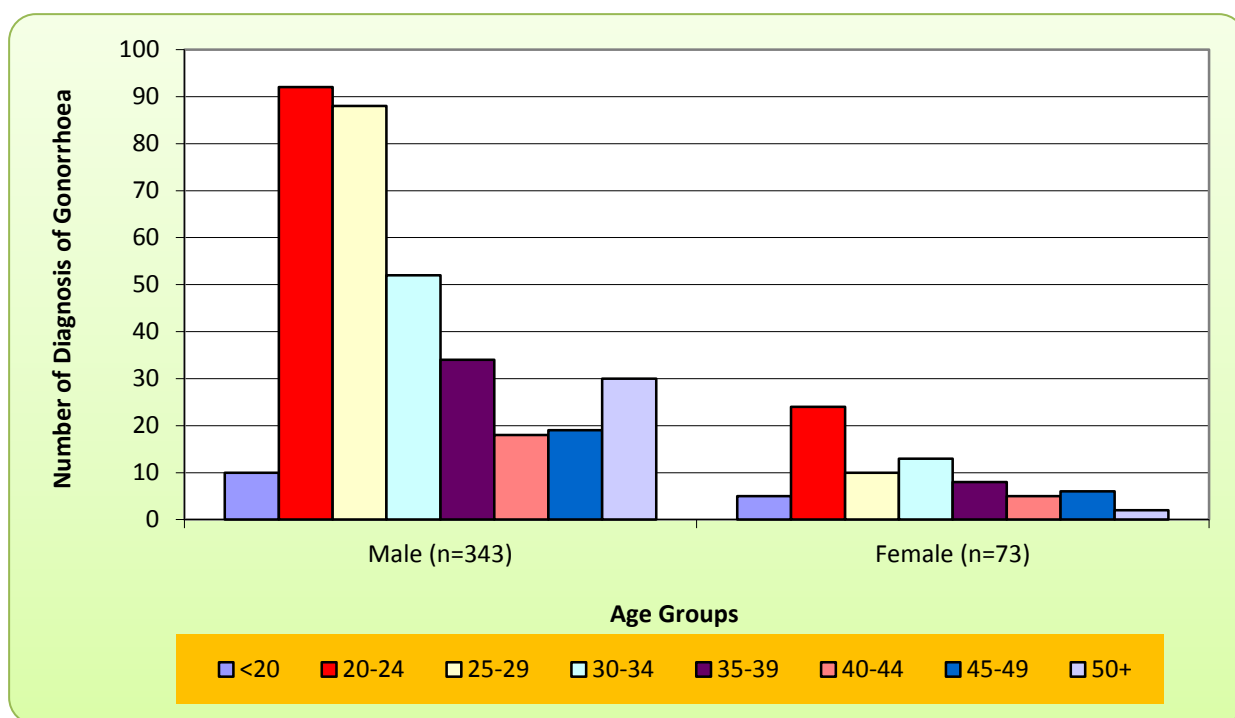


Figure 6 Number of infectious syphilis diagnoses by gender and age groups at Clinic 275, 2017

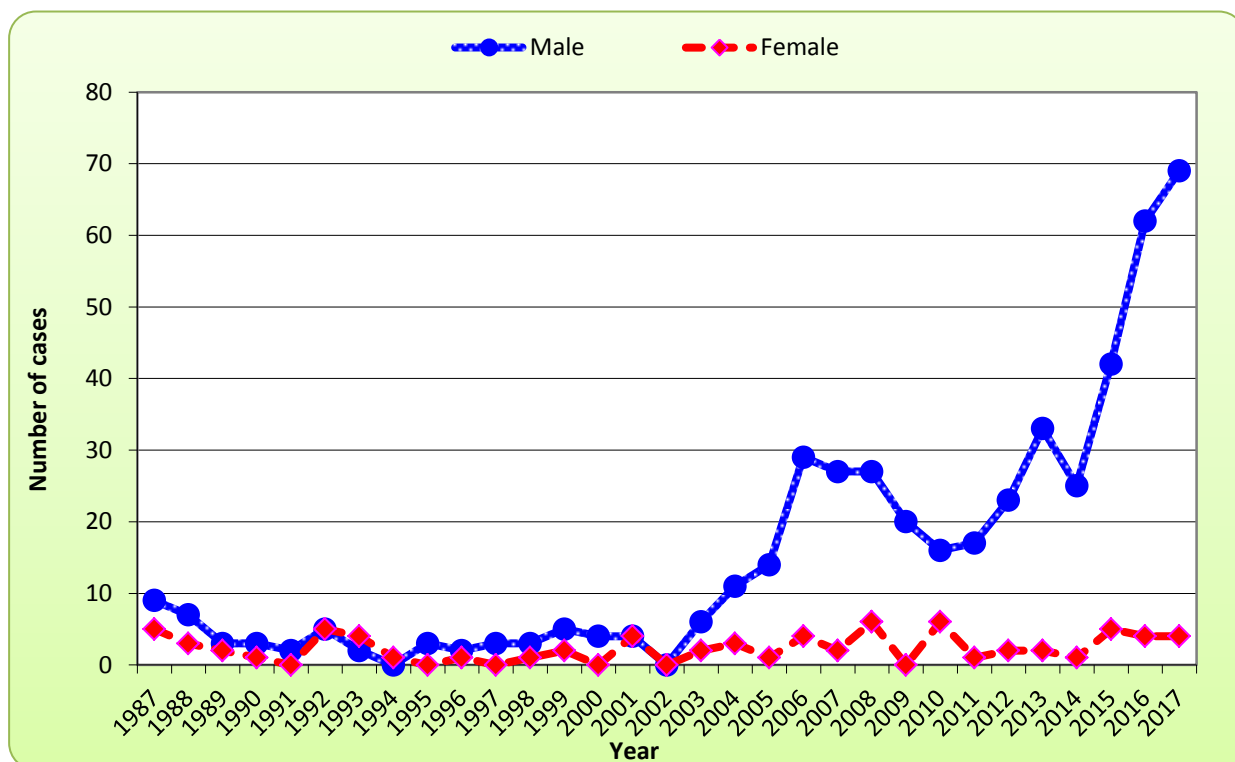


Figure 7 Number of infectious syphilis diagnoses by gender and age groups at Clinic 275, 2008-2017

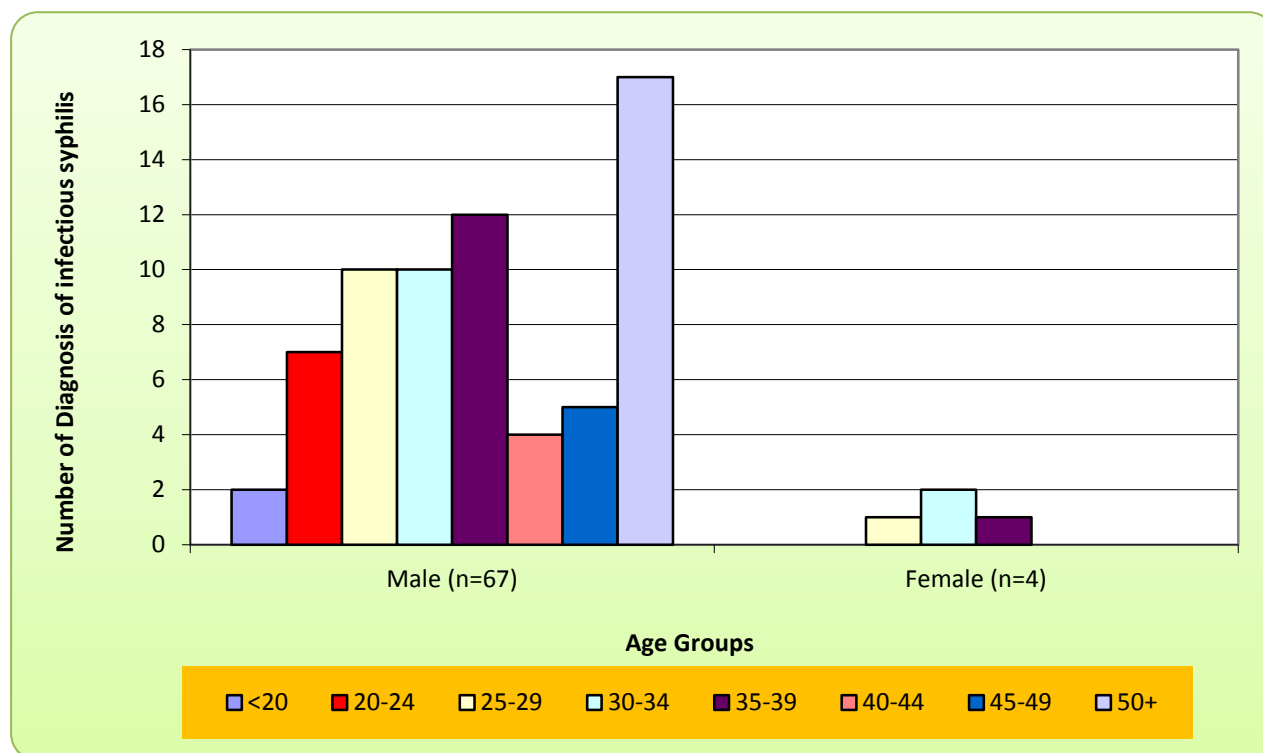


Figure 8 Number of HIV diagnoses by gender at Clinic 275, 2017

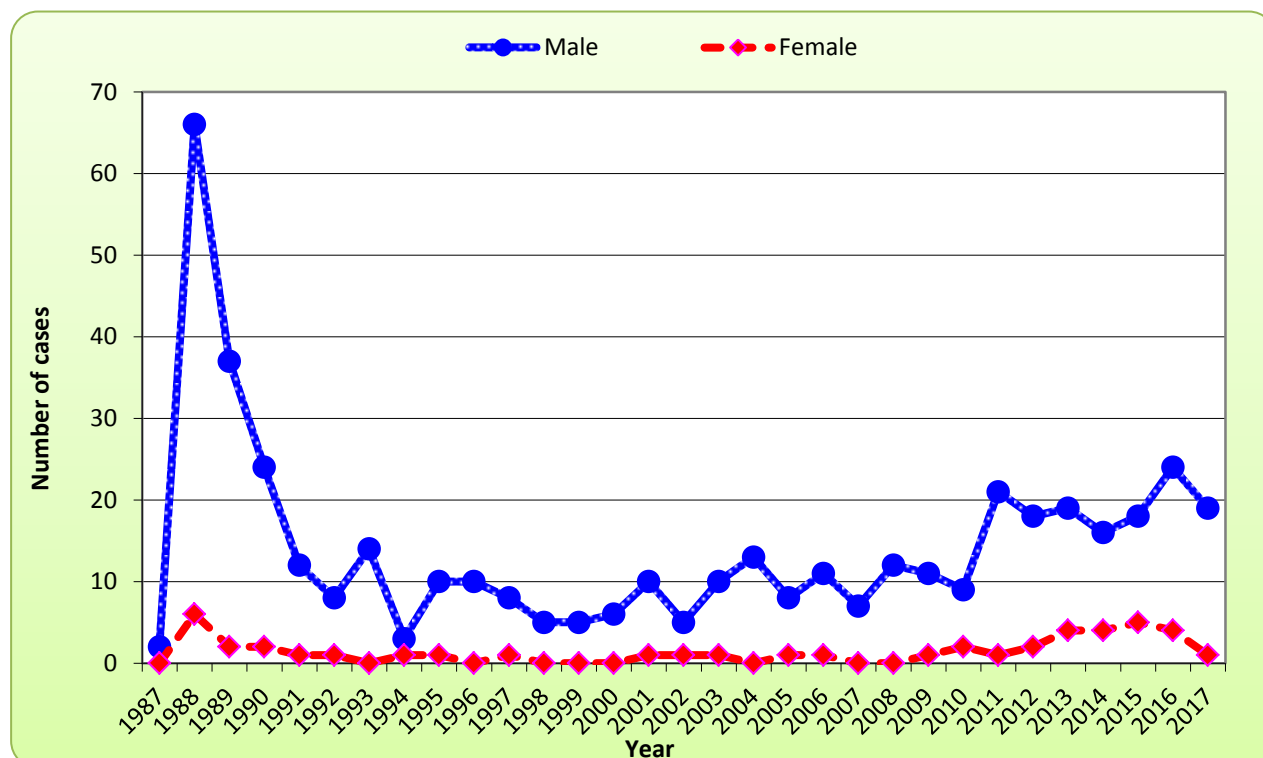
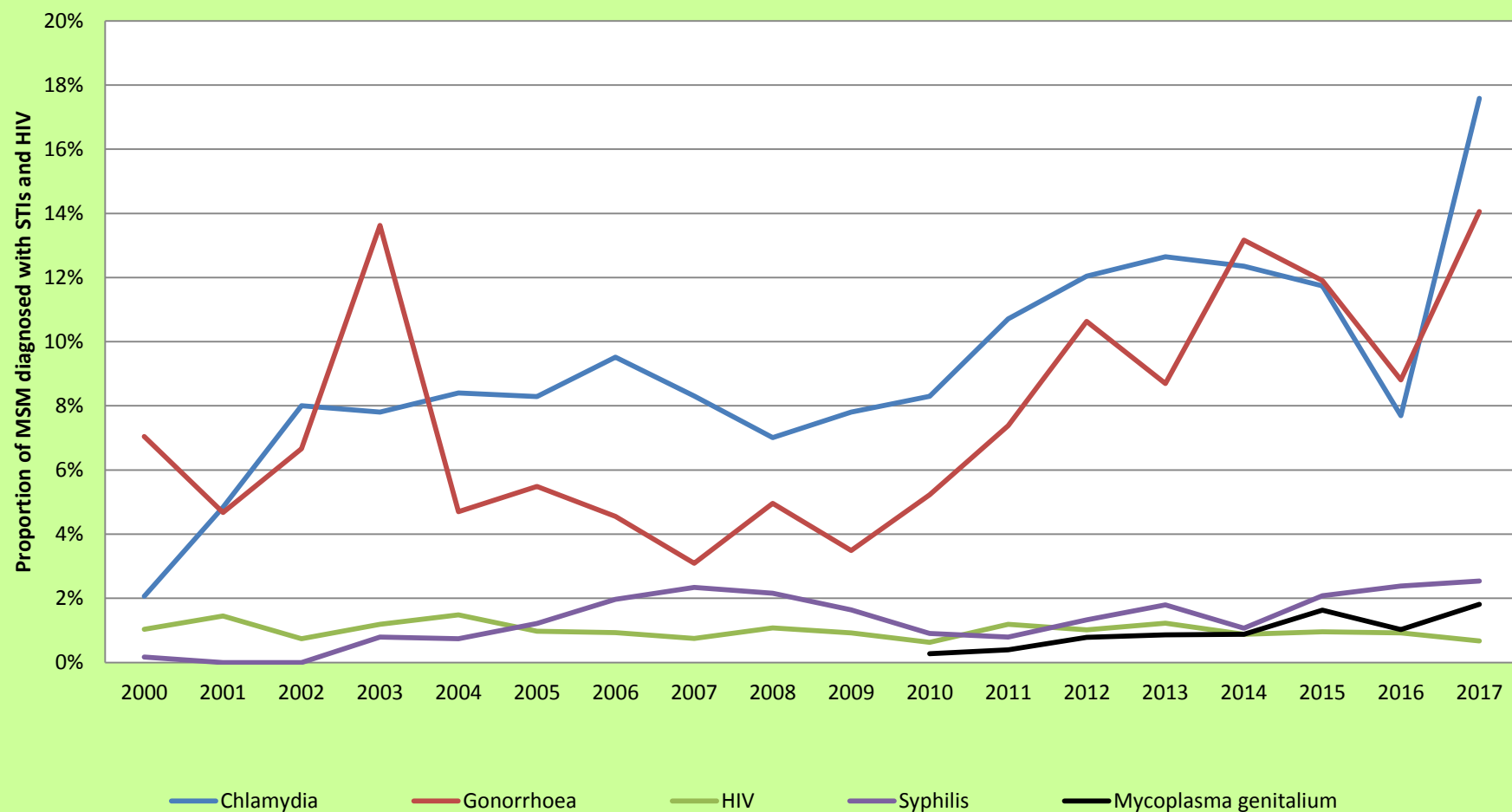
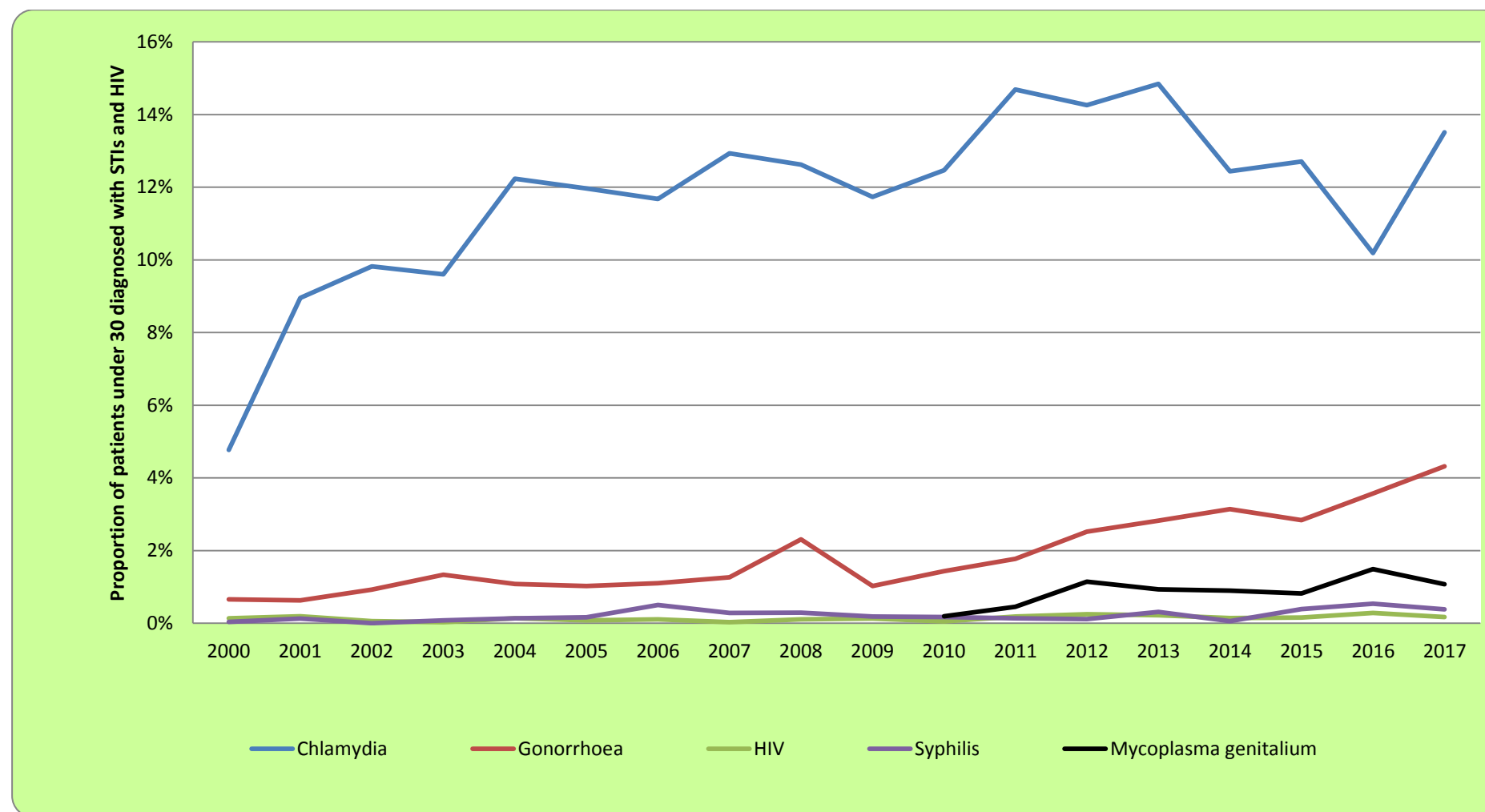


Figure 9 Proportion of STIs and HIV among MSM by episode of care, 2000-2017



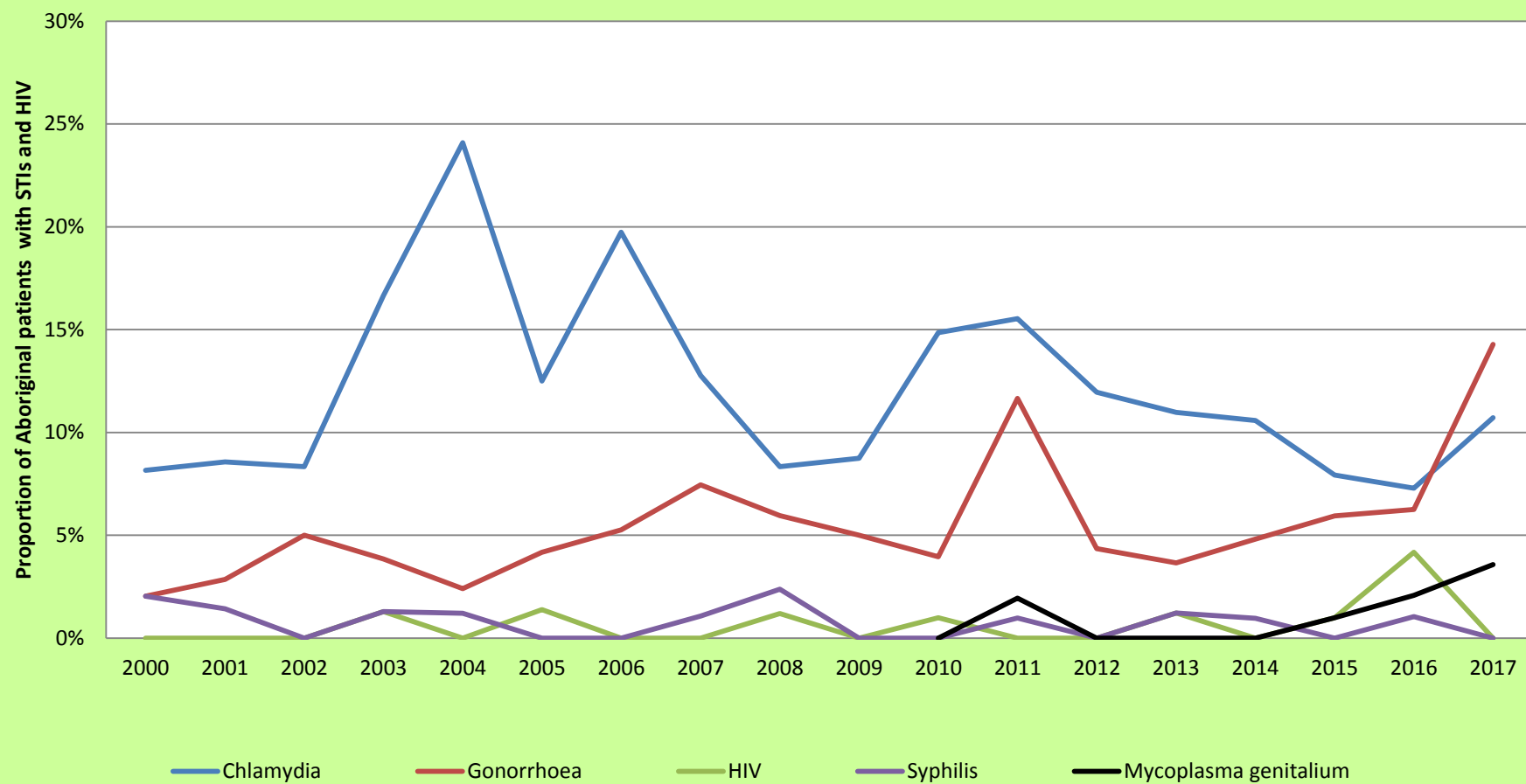
*: Denominator is episodes of care

Figure 10 Proportion of STIs and HIV among patients aged less than 30 years at Clinic 275, 2008-2017



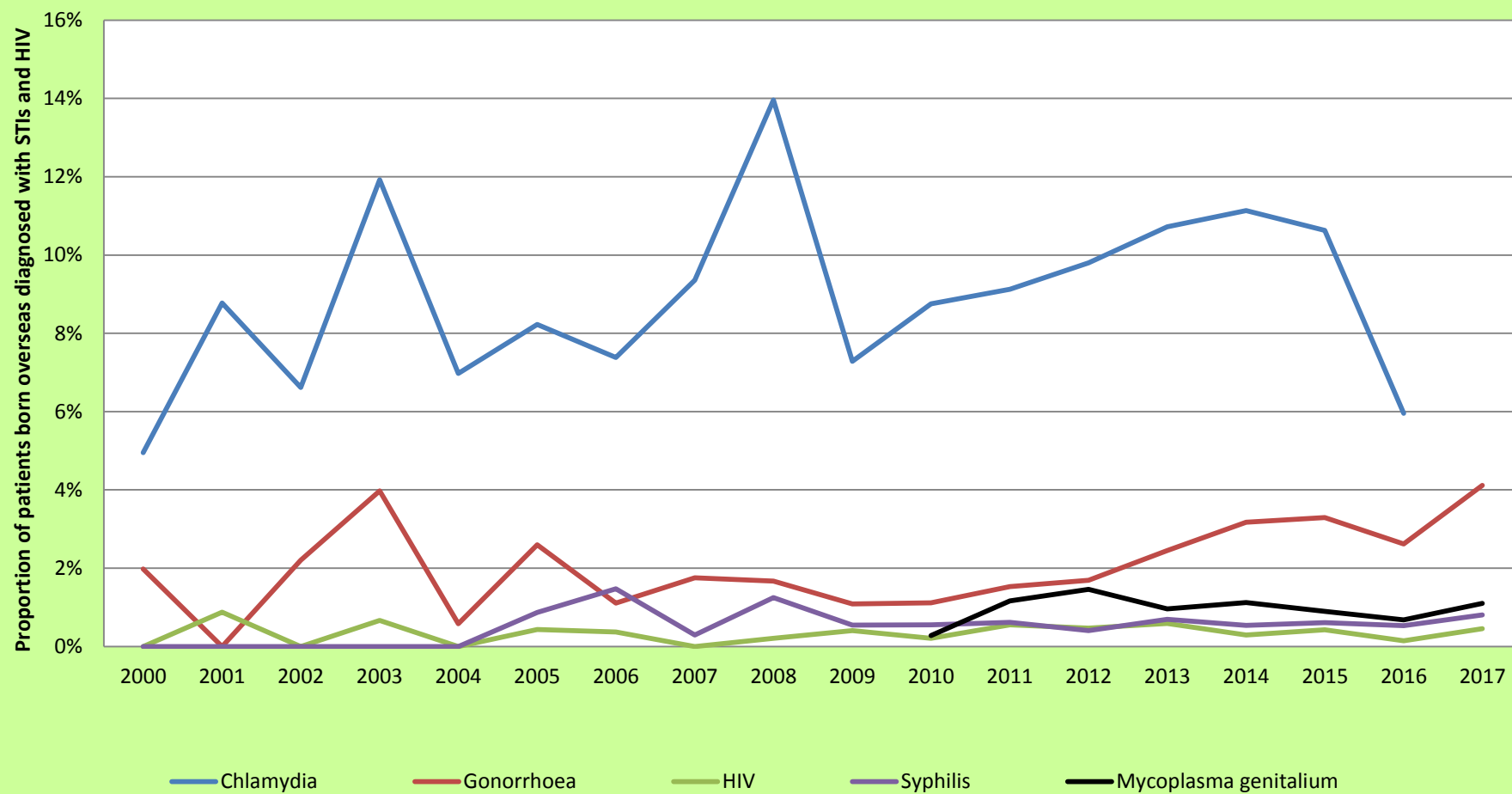
*: Denominator is episodes of care

Figure 11 Proportion of STIs and HIV among Aboriginal patients by episode of care, 2000-2017



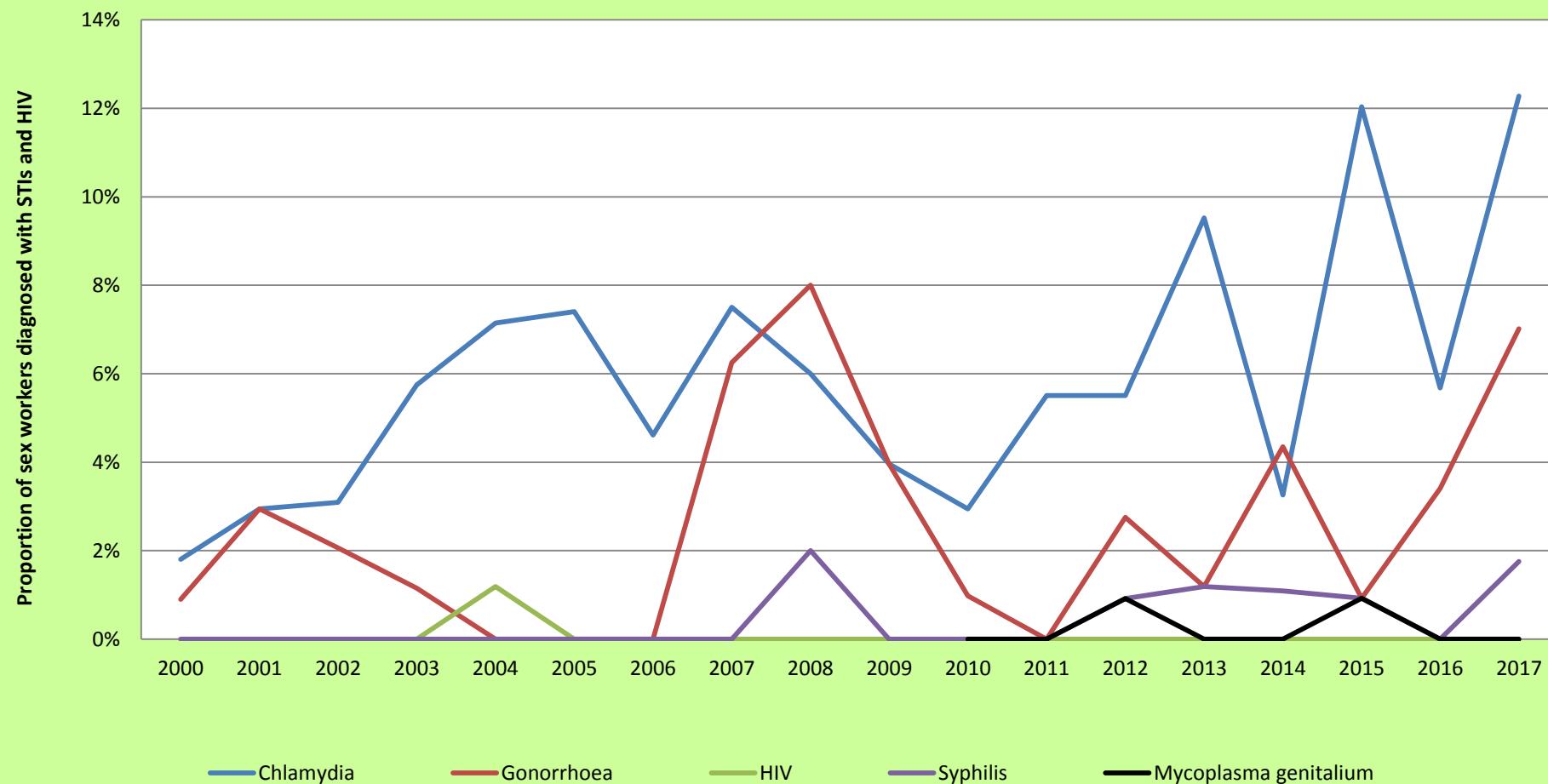
*: Denominator is episodes of care

Figure 12 Proportion of STIs and HIV among patients among patients who were born overseas by episode of care, 2000-2017



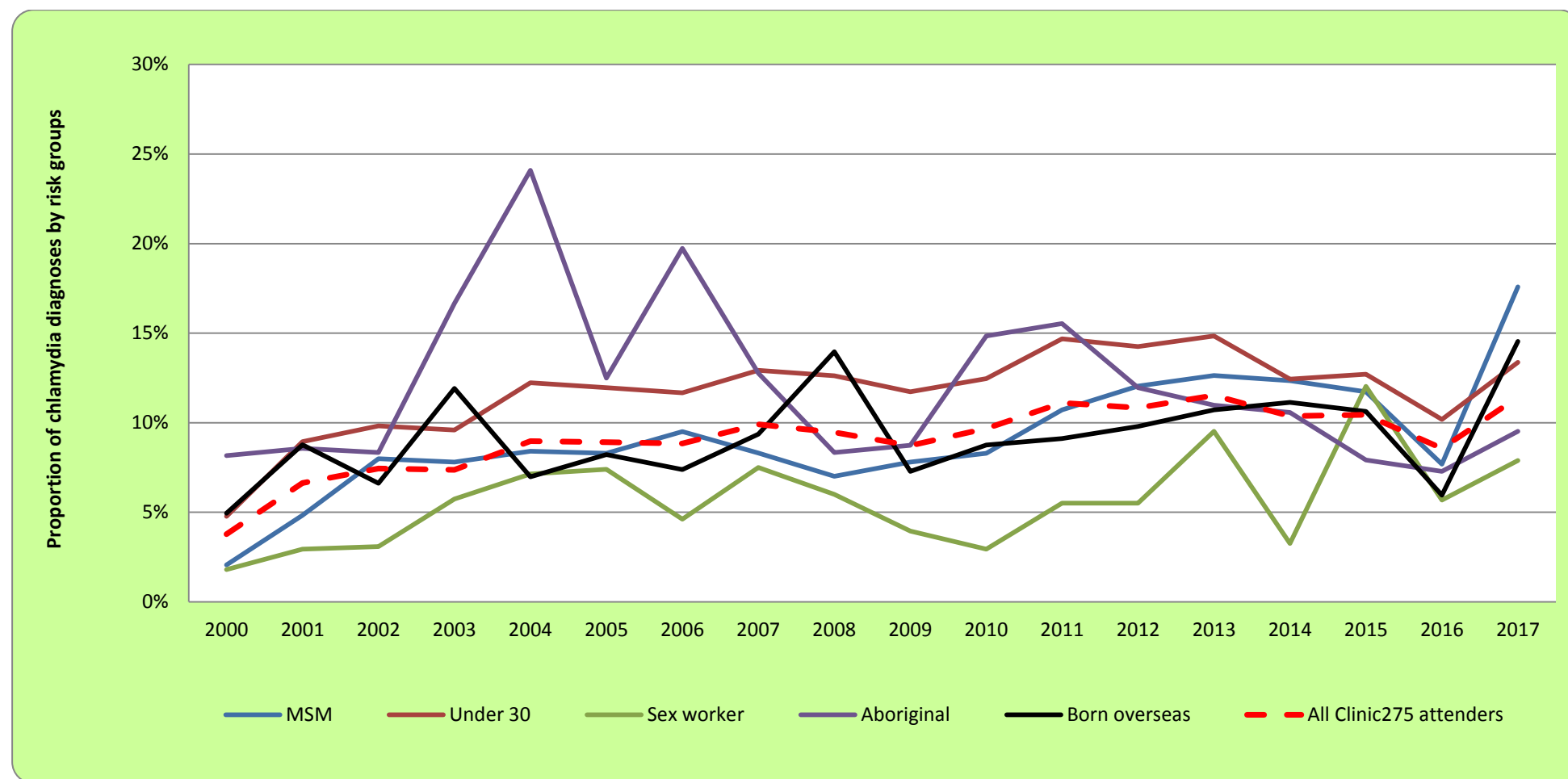
*: Denominator is episodes of care

Figure 13 Proportion of STIs and HIV among sex worker by episode of care, 2000-2017



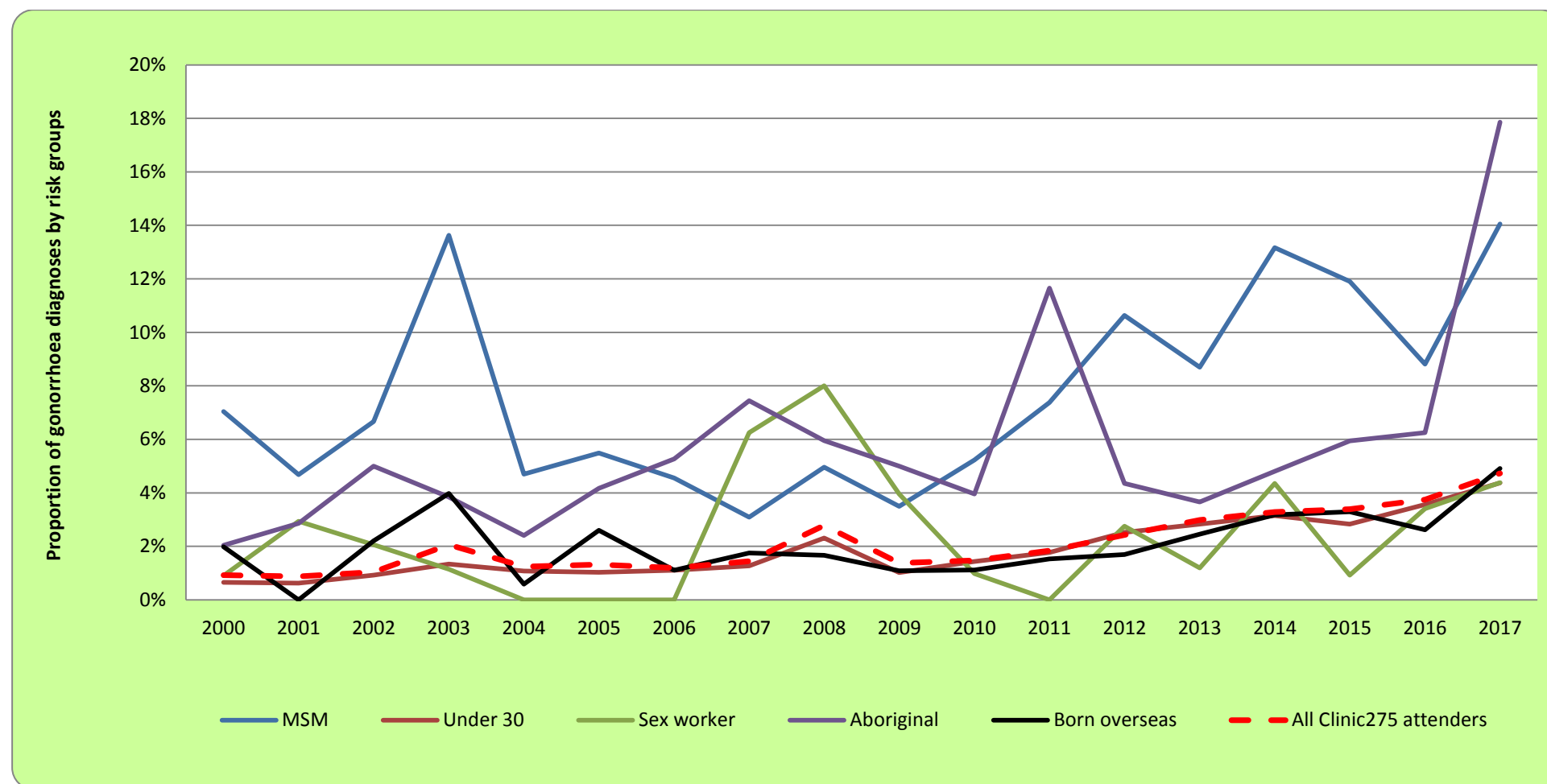
*: Denominator is episodes of care

Figure 14 Proportion of chlamydia diagnoses among relevant risk groups compared with all clinic attenders by episode of care, 2000-2017



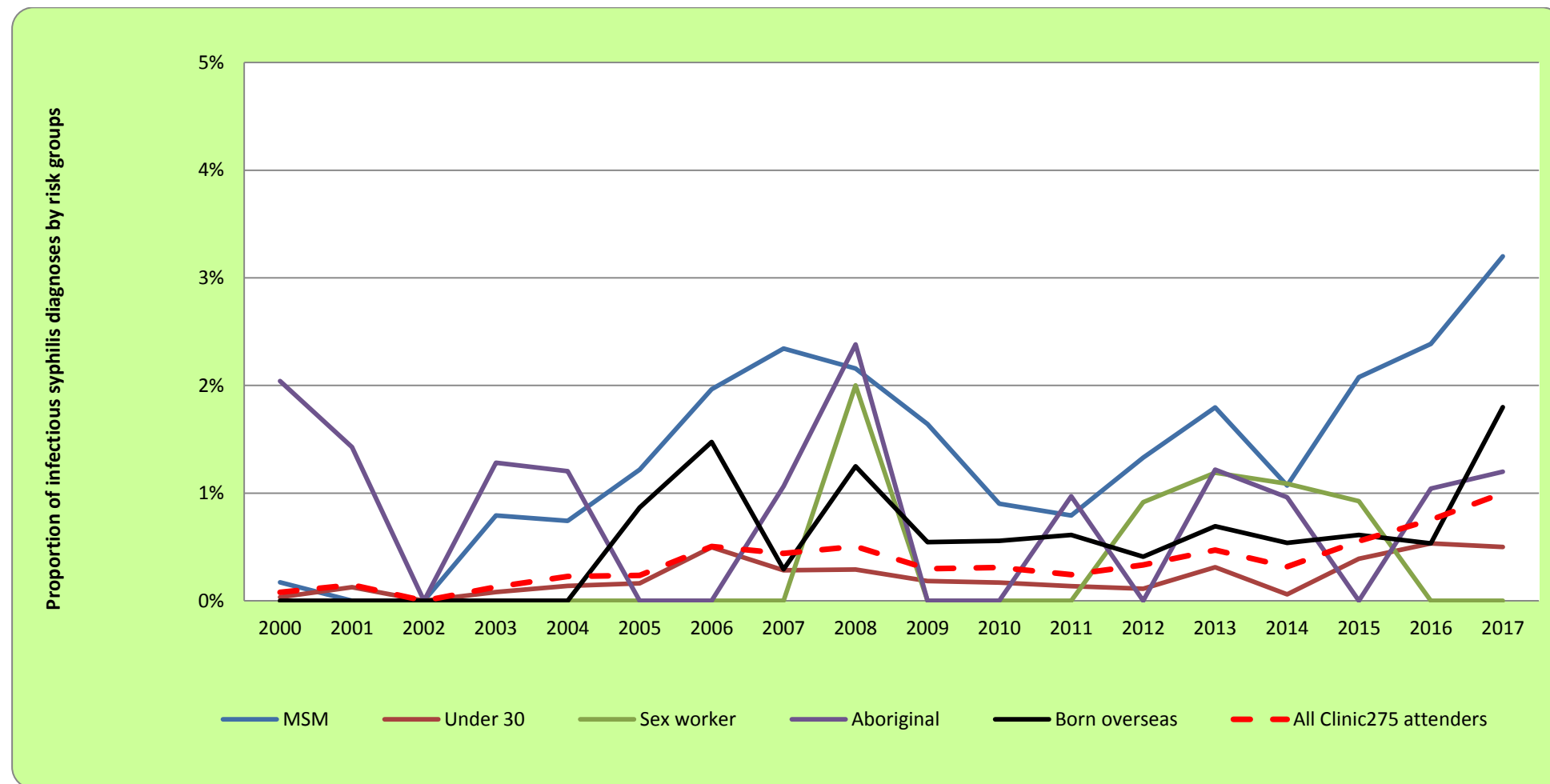
*: Denominator is episodes of care

Figure 15 Proportion of gonorrhoea diagnoses among relevant risk groups compared with all clinic attenders by episode of care, 2000-2017



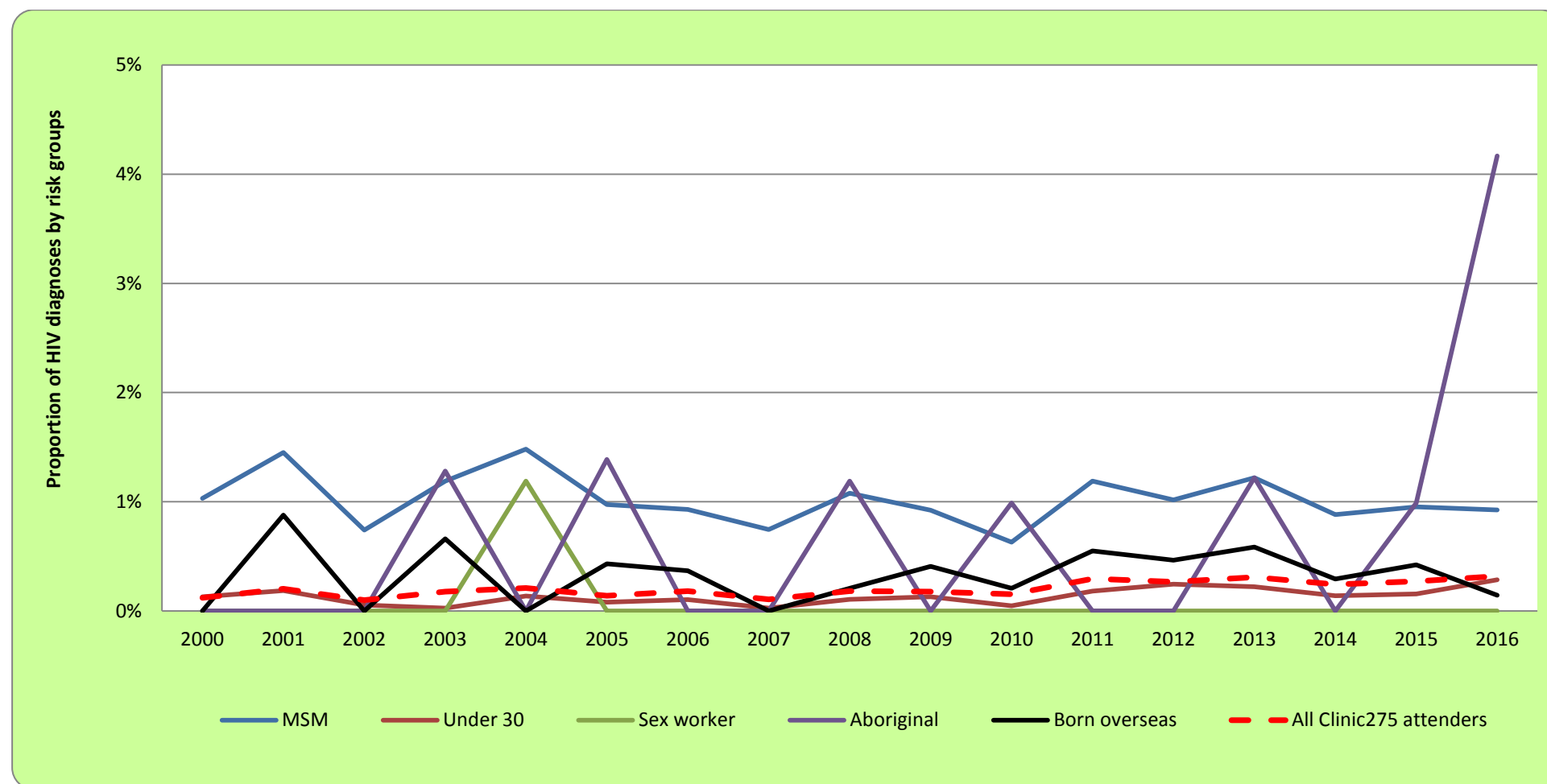
*: Denominator is episodes of care

Figure 16 Proportion of infectious syphilis diagnoses among relevant risk groups compared with all clinic attenders by episode of care, 2000-2017



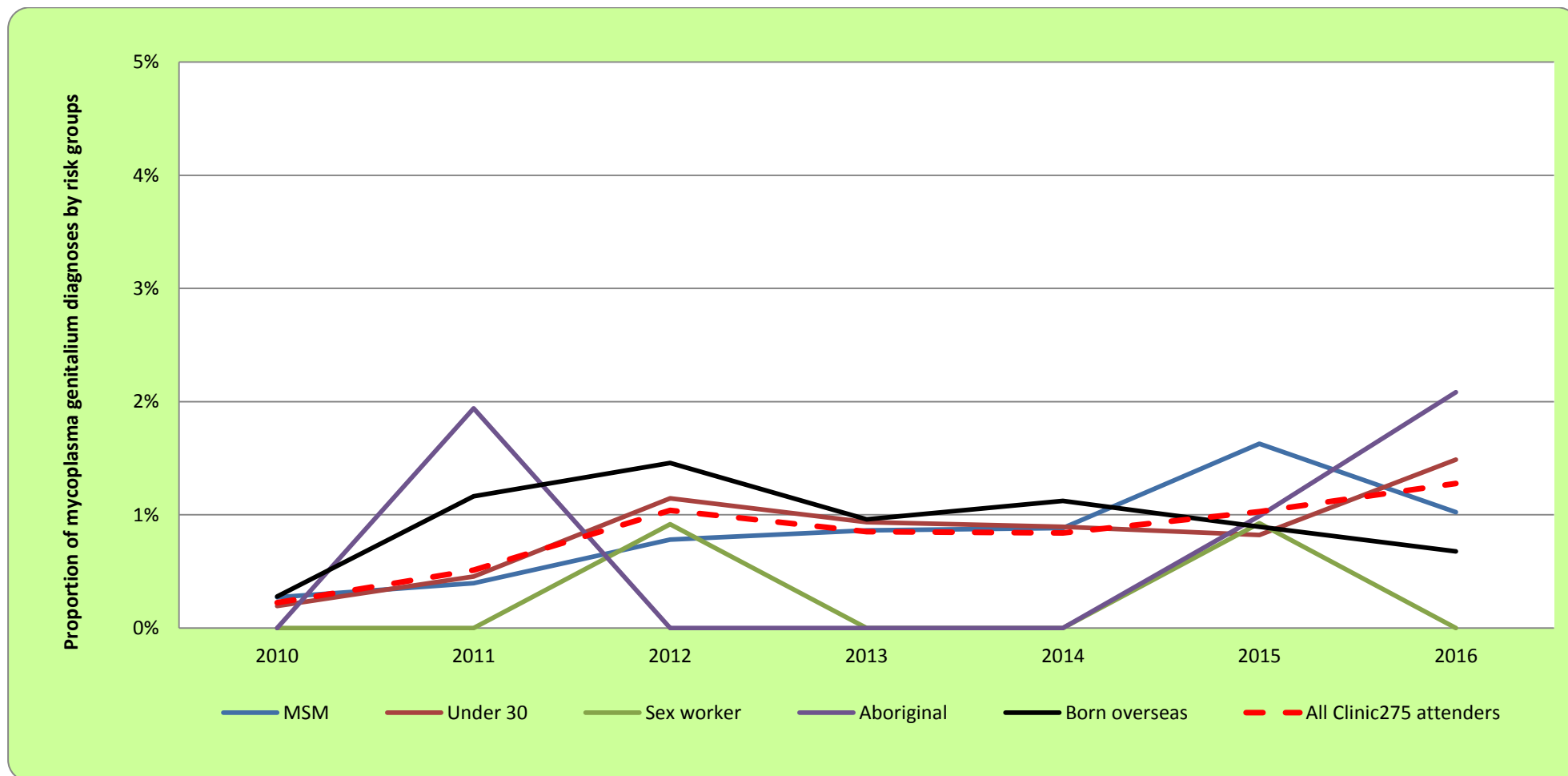
*: Denominator is episodes of care

Figure 17 Proportion of HIV diagnoses among relevant risk groups compared with all clinic attenders by episode of care, 2000-2017



*: Denominator is episodes of care

Figure 18 Proportion of *mycoplasma genitalium* diagnoses among relevant risk groups compared with all clinic attenders by episode of care, 2000-2017



*: Denominator is episodes of care