

Appendix 1

Notification of Chlamydia, Gonorrhoea & Syphilis

Medical notification

There is a legal requirement for the attending clinician to notify all cases of gonorrhoea, syphilis and chlamydia.

Notification forms and reply paid envelopes are available from:

Kerena Eckert

Sexually Transmitted Diseases Control Branch

275 North Terrace ADELAIDE SA 5000. Telephone: 8226 6025

Purpose of notification is twofold

- to enable epidemiological analysis for control activities and
- to facilitate contact tracing which reduces spread of disease in the community and probability of reinfection in the treated patient. Clinicians indicate on notification forms whether they wish the STD Control Branch to undertake contact tracing or whether they would prefer to investigate the case themselves.

Laboratory notification

There is a legal requirement for laboratories to notify positive laboratory tests for gonorrhoea, syphilis and chlamydia. The Sexually Transmitted Diseases Control Branch is notified of the patient's name, doctor's name and phone number.

The purpose of this system is to monitor medical notification and to contact the attending doctor rapidly when such notification is not forthcoming. The objectives of notification cannot be achieved by laboratory notification alone.

STD Control Branch

The STD Control Branch aims to reduce the impact of STD in the community by

- reducing the incidence of disease
- reducing the duration of infection
- reducing the complications or anxiety associated with infection or by decreasing the nett costs of managing individual cases.

To facilitate these goals, the service operates a walk-in clinic (no appointment is necessary) at Clinic 275 (275 North Terrace) which is open from:

10.00 a.m. to 4.30 p.m. Monday, Thursday and Friday,

12.00 noon to 7.00 p.m. Tuesdays and Wednesdays.

A full consultation service is available to all clinicians by contacting the Director, Dr Gavin Hart on 8226 6025.

Role of general practitioners

Important requirements for providing adequate investigation and management of patients who may have STD include

- access to laboratory testing for the most common STD - gonorrhoea, chlamydia, NSU, genital herpes, syphilis, hepatitis B, hepatitis C, trichomoniasis and bacterial vaginosis
- an interest in STD and a sensitivity to the psycho-social needs of patients with STD
- familiarity with appropriate systematic approaches to investigating patients for STD
- consultation is always available to assist clinicians with investigation and management. Alternatively, clinicians may wish to refer some or all patients to Clinic 275 for investigation and management.

Notification of HIV infection

Medical notification

There is a legal requirement for medical officers to notify all cases of HIV infection. Notification forms and reply paid envelopes will be sent with laboratory results. Notification forms are also available from:

*Therese Davey (HIV epidemiologist)
Sexually Transmitted Diseases Control Branch
275 North Terrace
Adelaide SA 5000 Telephone: 82266025*

Purpose of HIV notification:

- To enable surveillance of the disease in relation to risk behaviour
- To facilitate contact tracing/partner notification
- Medical officers reporting the infection can either initiate the contact tracing and send relevant information to the HIV epidemiologist or after consultation with the patient request the HIV epidemiologist to investigate the case.

Laboratory notification

There is a legal requirement for the laboratory (IMVS) to notify positive HIV test results to the HIV epidemiologist. The patient's name and the doctor's name and telephone number are reported.

The purpose of this system is to monitor medical notification and to contact the attending doctor rapidly when such notification is not forthcoming. The objectives of notification cannot be achieved by laboratory reporting alone.

STD Control Branch

The STD Control Branch aims to reduce the impact of all STDs in the community by:

- reducing the incidence of disease
- reducing the duration of infection where possible
- reducing the complications or anxiety associated with infection and
- decreasing the nett costs of managing individual cases.

To facilitate these goals, the service operates a free walk-in clinic (no appointment is necessary) at Clinic 275 (275 North Terrace) which is open from:

10.00 a.m. to 4.30 p.m. Monday, Thursday and Friday
12.00 noon to 7.00 p.m. Tuesday and Wednesday.

A full consultation service is available to all clinicians by contacting the Director, Dr Gavin Hart on 8226 6025.

Notification of hepatitis C infection and hepatitis B infection

Medical notification

There is a legal requirement for medical officers to notify all cases of hepatitis C and hepatitis B infection. Notification forms and reply paid envelopes will be sent to the medical practitioner where applicable. Notification forms are also available from:

*Surveillance Unit
Sexually Transmitted Diseases Control Branch
275 North Terrace
Adelaide SA 5000 Telephone: 82266025*

The notification system enables disease surveillance which facilitates statewide prevention and control activities. Current priorities are to determine the magnitude of the problem and dynamics of disease transmission.

Purpose of hepatitis C notification

- To enable epidemiologic analysis and inform policy decisions by:
 - determining the level of ongoing transmission
 - assessing the burden of chronic liver disease
 - monitoring the level of hepatitis C testing in the community
- To facilitate investigation of cases where exposure to hepatitis C virus is unclear
- To detect, follow up and define the epidemiology of new infections
- To identify unusual modes of transmission that may require specific public health interventions.

Purpose of hepatitis B notification

- To define hepatitis B infection (both acute clinical cases and chronic carriers) for epidemiologic analysis.
- To follow up individuals with acute infection.

Laboratory notification

There is a legal requirement for laboratories to notify the STD Control Branch of positive hepatitis C and hepatitis B test results. The patient's name, doctor's name and telephone number are reported.

The purpose of this system is to monitor medical notification and to contact the attending doctor when such notification is not forthcoming. The objectives of notification cannot be achieved by laboratory reporting alone.

STD Control Branch

The STD Control Branch aims to reduce the impact of all STDs in the community by

- reducing the incidence of disease
- reducing the duration of infection where possible
- reducing the complications or anxiety associated with infection and
- decreasing the nett costs of managing individual cases.

To facilitate these goals, the service operates a free walk-in clinic (no appointment is necessary) at Clinic 275 (275 North Terrace).

A full consultation service is available to all clinicians by contacting the Director, Dr Gavin Hart on 8226 6025.

The Sexually Transmitted Diseases (STD) Control Branch

Services provided

Organization and role

Services provided by STD Control Branch

Clinical services

Free and confidential advice, testing, treatment for all STD (including HIV infection) at:

Clinic 275
275 North Terrace (1st Floor)
ADELAIDE 5000

Clinic Hours

Monday, Thursday, Friday 10.00 a.m. - 4.30 p.m.

Tuesday, Wednesday 12.00 noon - 7.00 p.m.

No appointment necessary; telephone 8226 6025 for advice or discussion at a personal or general level on STD; country callers only: 1800 806 490 (toll free).

Training and education

- Workshops for all levels of health workers (doctors/nurses/social workers); all workshop participants receive regular updated literature on STD and may borrow teaching materials from STD Resource Centre; enquiries, bookings and materials, contact the surveillance unit, telephone 8226 6025.
- Publications
 - Annual epidemiologic and quarterly surveillance reports describing the epidemiologic patterns of STD, HIV/AIDS, hepatitis B (HBV) and hepatitis C (HCV) in South Australia
 - Technical bulletins on various aspects of STD
 - Contact the surveillance unit, telephone 8226 6025, regarding mailing list.
- Clinical training is offered to all medical practitioners and nurses at both undergraduate and postgraduate levels.
For further information, contact Dr Gavin Hart, telephone 8226 6025.

Consultant services

- Advice and support with all aspects of individual client management
 - Epidemiologic and statistical information
 - Health promotion and other STD control activities
- Contact Dr Gavin Hart on telephone 8226 6025.

Organization and role of STD Control Branch

The STD Control Branch operates as an integrated service combining clinical and public health activities. The Branch provides a centre of excellence for clinical care, epidemiology and contact tracing of STDs including HIV and hepatitis B. The STD control program has been developed in accordance with principles outlined in 'Control of Sexually Transmitted Diseases' World Health Organization, 1985.

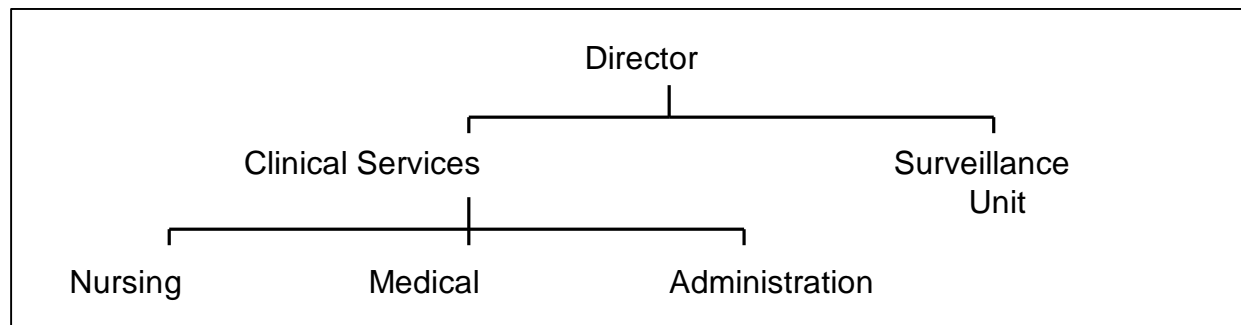
The role of the STD control program is to reduce the impact of STD in the community by:

- reducing the incidence of disease
- reducing the duration of infection
- reducing the complications and the anxiety associated with infection
- decreasing the nett costs of managing individual cases.

The functions of the Control Branch, the headquarters of the control program, are:

- improving clinical care
- improving laboratory diagnosis
- developing programs for training health care personnel
- performing operational research
- implementing control strategies such as health promotion, contact tracing and screening.

Figure 1 Organizational Structure of the STD Control Branch, 1 January, 1998.



Clinical services

The primary role of Clinic 275 (the central STD clinic) is to facilitate the functions of the STD Control Branch. It provides an environment for developing clinical protocols, assessing the performance of laboratory tests, training health care workers, and collecting epidemiologic information.

Specific activities of Clinic 275 include:

- providing a clinical training resource for education/professional training
- development of diagnosis and management guidelines for all STD (available to all clinicians on request)
- providing information for analysis by the surveillance unit
- providing statewide consultation to clinicians on diagnosis and management of STD
- in addition to the above activities, high quality care is provided for an estimated 30% of episodes of notifiable STD in metropolitan Adelaide
- whereas Clinic 275 operates predominantly as a public service, private care is available by appointment on referral from general practitioners
- counselling to reduce risk taking among clientele which is a major strategy for reducing reinfection with all STD
- periodic immune assessment of clients infected with HIV
- counselling and referral service for HIV positive and AIDS clients
- periodic assessment of liver function for clients with HCV/HBV infection
- clinical trials for treatment drugs and vaccines.

STD Clinic Resource Utilization (SCRU) System

Since 1 January 1987 a standardized casenotes system (form STD.M.1) has operated. A key element of this system is aggregating attendances to episodes of illness and assigning such episodes to individual clients. This provides more meaningful statistics than systems which merely analyse data in terms of attendances, thereby producing a marked bias when a few clients account for a disproportionate number of attendances.

Surveillance unit

The surveillance unit is responsible for the collection and analysis of epidemiological data, education/professional training, clinical trial activities and operation of statewide notification systems.

Epidemiology

The role of this section is to analyse data on STD (including HIV infection, hepatitis B and hepatitis C infection) as a basis for control strategies or guidelines for medical practitioners; to conduct research for these same purposes and to implement control strategies.

Special activities include:

- operation and analysis of clinic records
- operation of the statewide chlamydia, gonorrhoea, syphilis, HIV/AIDS, hepatitis B and hepatitis C notification systems
- participation in sentinel HIV surveillance in STD clinics; this project involves collaboration between the National Centre in HIV Epidemiology and Clinical Research, public STD clinics in the five Australian states and the National Venereology Council of Australia
- liaison with community groups with a particular interest in STD control
- contact tracing on index cases referred from both C275 and from medical practitioners outside the central STD clinic
- the epidemiology section publishes an annual epidemiologic report and quarterly surveillance reports.

Education/professional training

The major emphasis is to provide training on STD to major groups of health professionals, particularly medical undergraduates and nursing graduates. Such training is conducted predominantly at Clinic 275.

Specific activities include:

- training of medical students - seminars, self-learning programs and clinical experience
- training of doctors - seminars and clinical experience
- supervision and training of medical trainees at Clinic 275 (RMOs from RAH and FMC)
- training of specialist STD counsellors/contact tracers
- in-service training of all Clinic 275 staff
- training of STD educators
- production of client information pamphlets, guidelines for doctors and STD educational material for educators
- dissemination of STD information to health professionals and libraries

- production of slides, video and written training materials for health professional training
- consultancy service for STD training activities conducted by other agencies
- supervision of school groups and others visiting Clinic 275.
- publication of information on an internet site.

Clinical trials

The STD Control Branch participates in national and international therapeutic and vaccine trials.

Notification system

In South Australia there is a dual notification system which involves information from both laboratories and medical practitioners.

Medical notification

There is a legal requirement for the attending clinician to notify all cases of syphilis, gonorrhoea, chlamydia, HIV/AIDS, hepatitis B and hepatitis C infection. Computer analysis is performed on all medical notifications.

Laboratory notification

There is a legal requirement for laboratories to notify positive laboratory tests for syphilis, gonorrhoea, chlamydia, HIV, hepatitis B and hepatitis C. The STD Control Branch is notified of the patient's name, doctor's name and phone number.

The purpose of this system is to monitor medical notification and to contact the attending doctor rapidly when such notification is not forthcoming. The objectives of notification cannot be achieved by laboratory notification alone.

Notification of gonorrhoea, syphilis and/or chlamydia

Purpose of notification is twofold

- to enable epidemiologic analysis for control activities and
- to facilitate contact tracing which reduces spread of disease in the community and probability of reinfection in the treated patient. Clinicians indicate on notification forms whether they wish the STD Control Branch to undertake contact tracing or whether they would prefer to investigate the case themselves.

Notification forms and reply paid envelopes are sent out from the unit.

Notification of HIV infection

Purpose of HIV notification:

- to enable surveillance of HIV infection in SA
- to facilitate contact tracing/partner notification. Medical officers notifying the infection can either initiate the contact tracing and send relevant information to the HIV epidemiologist or after consultation with the client, request the HIV epidemiologist to investigate the case.

Notification forms and reply paid envelopes are sent out from the unit.

Notification of hepatitis B infection

Purpose of HBV Notification:

- to define HBV infection (both acute cases and chronic carriers) in South Australia for epidemiological analysis
- to follow up individuals with acute infection

Notification forms and reply paid envelopes are sent out from the unit.

Notification of hepatitis C infection

Purpose of HCV Notification:

- to define HCV infection in South Australia for epidemiological analysis
- to follow up individuals with recently acquired infection and those whose risk factor was not stated.

Notification forms and reply paid envelopes are sent out from the unit.

Appendix 10

Publications of the STD Control Branch

- BULLETIN No. 1 Diagnosis and Management of STDs (including HIV infection)
First printed May 1988
Revised May 1990
Revised June 1993
Revised August 1996
- BULLETIN No. 2 Reducing the Impact of Sexually Transmitted Diseases including HIV
Infection
First printed 1988 (Revised 1991)
- BULLETIN No. 3 STD Training for Doctors and Medical Students
- BULLETIN No. 4 Information Systems for STD Control Programmes
- BULLETIN No. 5 Clinic 275 Operations Manual
- BULLETIN No. 6 The Epidemiology of Chlamydia and Gonorrhoea
- BULLETIN No. 7 Service Evaluation and Staff Management in an STD Clinic.

Venereologica: facts and figures from an STD clinic

Epidemiologic Reports

- Sexually Transmitted Diseases in South Australia, Epidemiologic Report No. 1 - 1987
Sexually Transmitted Diseases in South Australia, Epidemiologic Report No. 2 - 1988
Sexually Transmitted Diseases in South Australia, Epidemiologic Report No. 3 - 1989
Sexually Transmitted Diseases in South Australia, Epidemiologic Report No. 4 - 1990
Sexually Transmitted Diseases in South Australia, Epidemiologic Report No. 5 - 1991
Sexually Transmitted Diseases in South Australia, Epidemiologic Report No. 6 - 1992
Sexually Transmitted Diseases in South Australia, Epidemiologic Report No. 7 - 1993
Sexually Transmitted Diseases in South Australia, Epidemiologic Report No. 8 - 1994
Sexually Transmitted Diseases in South Australia, Epidemiologic Report No. 9 - 1995
Sexually Transmitted Diseases in South Australia, Epidemiologic Report No. 10 - 1996
Sexually Transmitted Diseases in South Australia, Epidemiologic Report No. 11 - 1997

Quarterly Surveillance Reports

- STD Control Branch, Quarterly Surveillance Report No. 1 July - September 1996
STD Control Branch, Quarterly Surveillance Report No. 2 October - December 1997
STD Control Branch, Quarterly Surveillance Report No. 3 January - March 1997
STD Control Branch, Quarterly Surveillance Report No. 4 April - June 1997
STD Control Branch, Quarterly Surveillance Report No. 5 July - September 1997
STD Control Branch, Quarterly Surveillance Report No. 6 October - December 1997
STD Control Branch, Quarterly Surveillance Report No. 7 January - March 1998
STD Control Branch, Quarterly Surveillance Report No. 8 April - June 1998
STD Control Branch, Quarterly Surveillance Report No. 9 July - September 1998
STD Control Branch, Quarterly Surveillance Report No. 10 October - December 1998