

Being Safer Sexually

**Preventing Sexually
Transmissible Infections**

STIs

Being safer sexually can mean:

- using a condom to stop blood or sexual fluids passing between sexual partners. These fluids may carry STIs.
- planning and talking with sexual partners
- showing concern and respect for your sexual partners and yourself.

Safer sex can include:

- using condoms or an oral dam (a latex square – ask your pharmacist) during vaginal, oral, or anal sex with every partner, every time
- having one sexual partner and using condoms until you have both been tested for STIs and you are sure you are each other's only partner
- masturbating by yourself or with a partner
- kissing, licking, stroking, rubbing, cuddling, hugging and petting
- body massage.

Talk to your doctor or someone at a sexual health clinic about getting tested.

Condoms can protect you and your partner from most STIs.

Some STIs are transmitted by skin-to-skin contact, and a condom or oral dam might not prevent this.

The more sexual partners you have without using condoms, the higher your risk of getting an STI.

Alcohol and drugs can stop you making clear decisions about your sexual behaviour.

Being safer sexually means discussing safer sex with your sexual partner.

Most people know that condoms can help protect them from getting an STI.

People don't use condoms because they:

- feel awkward about buying or carrying them
- find them too expensive (you can get them cheaper on prescription)
- are persuaded to have sex when they're not expecting to
- are drunk or stoned and have less control
- see condoms as a barrier to intimacy
- think their partner is safe (in fact, no one can tell without testing)
- are scared of losing an erection (if this is a problem, it can be overcome with practice)
- are afraid to talk about using condoms in case their partner gets angry and abuses or leaves them.

If any of these reasons apply to you, talk to your doctor, practice nurse, Family Planning or local sexual health clinic. Unless you are in an established relationship with one partner, where neither partner has been or is having sex with anyone else, you need condoms to protect against STIs.

Early treatment of STI.

If you think you may have an STI, see your doctor or sexual health clinic. Symptoms include:

- unusual vaginal discharge
- urethral discharge
- lower abdominal pain
- pain or frequency in passing urine
- pain during sexual intercourse.

Condoms

A condom is a rubber sheath which fits over the penis to catch sperm when the man ejaculates (comes).

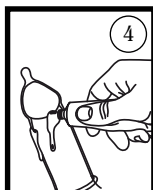
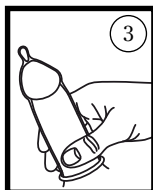
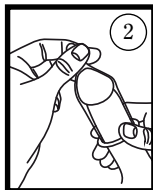
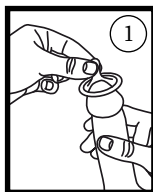
Condoms are available in different sizes for a comfortable fit. The right size is less likely to slip off or split.

Polyurethane condoms for male and female use are available. They are an option if you are allergic to latex. Some medications applied to the vagina or penis may affect the safety of condoms. Check with your pharmacist.

Getting it on – using condoms properly

To help protect against STIs, cover the penis with the condom before it touches the partner's vagina, mouth or anus. Use a new and lubricated condom each time you have sex.

- Check the expiry date on the condom packet. If this date has passed, throw the condom away and use one that hasn't expired.
- Open the packet carefully. Fingernails, rings and teeth can tear the condom.
- Before the condom comes into contact with the penis, check that the condom is the right way up (figure 1). Do this by pinching the top of the condom and rolling it down a little. It's the right way up if it rolls down easily (figure 2).
- Continue pinching the top of the condom and roll it onto the hard penis, all the way down to the base (figure 3).
- Apply a water-based lubricant (eg, K-Y® Jelly, Wet Stuff, Sylk® or Top Gel) to the condom.
- Oil-based lubricants such as Vaseline® can damage condoms.
- After ejaculating (coming) and when withdrawing, prevent semen from being spilt by holding the condom onto the base of the penis. Remove the used condom from the penis and wrap it in tissue or toilet paper. Put it in the rubbish.



Look after your condoms

- Store in a cool, dry place and keep away from heat.
- Keep away from sunlight.
- Check expiry or use-by date before use.
- Use a water-based lube. Don't use Vaseline®, petroleum jelly, oils or body lotion – these weaken the rubber.

All condoms available in New Zealand must pass quality control tests.

You can get condoms from supermarkets, service stations, pharmacies, Family Planning and sexual health clinics, and through doctors' prescriptions.

You can get safer sex oral dams from some Family Planning and sexual health clinics and pharmacies.

Glossary some words used in this leaflet you may want to know more about

abdominal	of or to do with the abdomen (tummy)
anal sex	penis inserted into partner's anus (sodomy)
anus	opening (arsehole) through which solid waste (faeces, poo) passes from the body
bladder	where urine (pee or mimi) is stored
blood test	sample of blood (usually from the arm) checked to detect possible disease
cervical	of the neck of the womb
condom	rubber sheath that fits over the penis
discharge	watery or thicker fluid dripping from the body (women have a normal vaginal discharge – any change in this needs to be checked out.)
ejaculation	release of semen from penis when erect or stiff (coming)
genitals	parts of reproductive system on the outside of the body
infertility	not being able to make babies
lubricant	substance that makes things slippery
masturbating	creating sexual excitement by stroking or rubbing the genitals
mucous membrane	lining of passages in the body
oral sex	stimulating male or female genitals with a partner's mouth/tongue
penis	male sex organ that becomes hard and erect when aroused; also used for urinating
pessaries	tablets inserted into the vagina for local treatment
pubic hair	hair around genitals
rectum	last part of the canal that takes waste materials to the anus
rimming	stimulating anal area with mouth/tongue
semen	fluid that spurts out of the penis when a male ejaculates (comes)
sexual fluids	semen in male and normal vaginal discharges in female
sexual intercourse	penis taken into partner's vagina or anus
sheath	another name for a condom
sperm	produced in the testes (balls) of the male to fertilise the female's egg
urethra	tube that carries urine out of the body; in males also carries semen
urine	waste fluid passed from the body (water, pee, mimi)
vagina	passage in female that connects the womb with the outside
vaginal sex	penis of male taken into vagina of female

More information

To find out more or to make an appointment if you think you may have an STI, contact any of the following:

North Island

Whangarei	09 438 6123
Auckland Central	09 630 9770
	0800 739 432
North Shore	09 443 9580
	0800 739 432
South Auckland.....	09 255 5172
	0800 739 432
West Auckland.....	09 836 0838
	0800 739 432
Hamilton	07 839 8732
Tokoroa.....	07 886 7239
Tauranga.....	07 579 8157
Whakatane.....	07 306 0804
Rotorua.....	07 349 7918
Gisborne	06 868 9005
Napier/Hastings.....	0800 303 099
	027 703 7391 or 06 834 1518 ext4240
Taupo	07 378 3895 or 07 376 0098
New Plymouth.....	Freephone 0508 739 432
Wanganui	06 348 1234 ext8334
Dannevirke/Palmerston North/Levin	06 350 8602
Masterton	06 370 5020
Lower Hutt/ Porirua/Wellington	04 385 9879

South Island

Nelson.....	03 546 5255
Blenheim.....	03 578 3044
Greymouth/West Coast.....	03 768 0499 ext2751
Christchurch	03 364 0485
Ashburton.....	03 307 8453
Timaru.....	03 687 2100 or 03 684 4000 ext87
Wanaka	03 443 1226
Queenstown.....	03 441 0500
Dunedin.....	03 470 9780
Invercargill/Gore.....	03 214 5768 or 0800 742 546

- Your general practice
- Family Planning – look under F in the phone book
- Student health service – if you are a student
- AIDS hotline – Freephone 0800 802 437 (for information on HIV/AIDS). In Auckland telephone 358 0099
- Occupational health nurse (if you work in large industry)
- Herpes Helpline – 0508 111 213

New Zealand Government

This resource is available from www.health.govt.nz or the Authorised Provider at your local DHB.

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Always use a condom • No condom No sex • BYO condom

Sexual Health STI Chart

These infections either affect the genital area or can be passed on through sexual contact.

Disease	How you get it	Symptoms	Treatment	Partners
Diseases that are transmitted sexually				
Chlamydia Bacterial infection of genitals, can lead to pelvic inflammatory disease (PID) in women and infertility in men and women.	By having vaginal or anal sex without a condom with someone who has the infection; from mother to baby (eye and chest infections).	Women often have no symptoms or may have pain with sexual intercourse, lower abdominal pain, changes in bleeding pattern. Men may have no symptoms or may have watery or thick discharge from penis, pain on urinating.	Antibiotics.	Recent sexual partners need treatment. Don't have sex until 7 days after starting treatment and until sexual contacts have been treated.
Gonorrhoea Bacterial infection of genitals, throat or anus, can lead to infertility particularly in women.	By having vaginal, anal or oral sex without a condom with someone who has the infection; from mother-to-baby (eye infections).	Women usually have no symptoms, but may have pain with sex, vaginal discharge, lower abdominal pain. Men may have no symptoms or discharge from penis, discharge from anus, pain in testicles, pain on urinating.	Antibiotics.	Sexual partners must be tested and treated if positive. Avoid sex until 7 days after treatment is completed. Condoms provide some protection, but not total.
Syphilis Bacterial infection entering the body through breaks in skin or linings of the genital area; over time, goes on to damage internal organs (heart, brain, spinal cord).	By having vaginal, anal or oral sex without a condom with someone who has the infection; from mother-to-baby across placenta during pregnancy (congenital syphilis).	Painless ulcer (chancere) usually on genitals; later swollen glands, rash, hair loss.	Antibiotics with follow-up blood tests.	Sexual partners must be tested and treated if positive. Current health regulations advise no sex until you are cleared.
Genital warts <i>Human papillomavirus</i> (HPV) causes fleshy or flat lumps – may be present even if not visible.	HPV transmitted by direct skin-to-skin contact, usually during sex; from mother-to-baby. Sometimes no identifiable source of transmission.	Fleshy or flat lumps on or around genitals, anus, groin or thigh.	Visible warts can be treated, but the infection cannot be cured. On 1 January 2017, HPV immunisation became free for everyone, male and female, aged 9 to 26, including non-residents under the age of 18. Discuss vaccination with your health professional.	Condoms provide some protection, but not total.
Genital herpes <i>Herpes simplex</i> virus causes skin infection usually on mouth and lips (cold sores) or on genitals.	Close skin contact with someone with the virus; from mother-to-baby.	Painful, red blisters, little sores or ulcers, flu-like symptoms, and sometimes a discharge.	Anti-herpes drugs and pain relief can be given to treat symptoms, but the infection cannot be cured. Some may need medication to prevent further outbreaks.	Partners may or may not catch herpes. Do not have sex when open sores are present. Condoms provide some, but not complete, protection.
Non-specific urethritis (NSU) Infections that cause inflammation of the urethra.	Can be caused by chlamydia or by bacteria, viruses or other organisms.	Women usually have no symptoms. Men have discharge from the penis, pain on urinating, but sometimes there are no symptoms.	Antibiotics.	Partners need to be examined and treated.
Trichomoniasis <i>Trichomonas vaginalis</i> , a small parasitic organism, causes irritation in the vagina in women and can cause an irritation inside the penis in men.	During sexual intercourse with an infected person.	Women may have no symptoms, but there may be a yellowy-green frothy vaginal discharge. Men usually have no symptoms.	Antibiotic tablets and/or vaginal pessaries.	Treat with antibiotics to avoid re-infection. Don't have sex until 7 days after starting treatment and until sexual contacts have been treated.
Diseases that can be transmitted sexually or may be transmitted in other ways				
Hepatitis A Viral infection which affects the liver.	Mainly through contaminated food or water or not hand-washing after toilet, before food etc. Can be through anal sex and oral-to-anal contact (rimming).	Often no symptoms, or may have mild flu-like illness, or vomiting, abdominal pain, dark urine and yellowing of skin and whites of eyes.	Immunisation for prevention. Good hygiene and hand-washing. Avoid alcohol and drugs. Eat a well-balanced low-fat diet.	Immunisation for prevention and avoid anal sexual practices until recovered.
Hepatitis B Viral infection which affects the liver.	By having vaginal, anal or oral sex without a condom with someone who has the infection; from mother-to-baby. By sharing needles, syringes, toothbrushes, razors and unsterilised instruments that pierce the skin. Blood transfusion in countries that do not pre-test blood for transfusion.	May have no symptoms or mild flu-like illness or vomiting, abdominal pain, dark urine and yellowing of skin and whites of the eyes.	Rest, exercise and avoid alcohol, drugs and smoking. Eat a well-balanced low-fat diet. Check any prescribed or over-the-counter medicines are safe to take.	Always use a condom if partner is not immunised. Protection is offered to babies on the immunisation schedule and to children under 16 years. Free immunisation is available for household and sexual contacts.
Hepatitis C Viral infection which affects the liver.	After contact with infected blood or by sharing needles and syringes or possibly through sexual contact. Blood transfusion in countries that do not pre-test blood for transfusion.	Often no symptoms or may have mild, flu-like illness or vomiting, abdominal pain, dark urine and yellowing of skin and whites of eyes.	Rest, exercise and avoid alcohol, drugs and smoking. Eat a well-balanced low-fat diet.	Sexual and needle-sharing partners can have a blood test to check for Hep C antibodies.
HIV <i>Human Immunodeficiency Virus</i> attacks the white blood cells and causes damage to the immune system so that it can be difficult to fight off infections.	HIV is transmitted through blood, semen and vaginal fluids, sharing needles and from mother-to-baby. Blood transfusion in countries that do not pre-test blood for transfusion.	Usually no obvious symptoms for many years.	No immunisation or cure available, although some secondary infections can be treated or prevented. Keeping well for longer is possible with good care. Women with HIV/AIDS need a cervical smear yearly.	Practise safer sex to prevent transmission. Partners should ask for an HIV test.
Pelvic inflammatory disease (PID) An infection of the womb and fallopian tubes that can cause infertility.	Usually by having vaginal sex without a condom with someone who has gonorrhoea or chlamydia.	Pain during sex, sore abdomen or back, heavy, irregular or painful periods, spotting, high temperature, feeling sick; sometimes no symptoms.	Antibiotics and rest.	Need to check for STIs and be treated to avoid reinfection. No sex until treatment is completed and until sexual contacts have been treated.
Pubic lice – crabs Small lice that live in the pubic hair and cause irritation.	By close body contact, usually during sex with an infected person. Can be spread via infected bedding and clothing.	Intense itching in the pubic area, small nits (eggs) on pubic hair.	Special shampoo, cream or spray applied to pubic area. Wash all clothing and bed linen.	Treat partners of the last 3 months in same way at the same time.
Scabies Small mites that burrow into the skin cause irritation.	By close body contact, sometimes during sex. Can be spread by sharing clothes or bedding.	Itching, worse at night, and a rash on the body.	Special lotion, cream or ointment. Wash all clothing and bed linen.	Treat partners of the last 3 months in same way at the same time.
Infections that are not sexually transmitted but can affect the genital area				
Thrush or candidiasis Irritation of mucous membranes from a yeast organism. It can occur in or around the vagina, and on the tip of the penis.	Yeast overgrowth may occur when antibiotics are used, during pregnancy, with diabetes, or when immunity is lowered. It can occur after sex, but also without sex.	Women have vaginal or vulval itching and a thick, whitish vaginal discharge. Men have itching and may have a red rash on the head of the penis or a discharge under the foreskin.	Creams and pessaries for local treatment. Anti-fungal tablets may be given in severe cases. Salt water baths for men are usually effective.	Need treatment only if showing symptoms.
Cystitis Bacteria cause inflammation of the bladder lining; can spread to kidneys and cause damage to kidney function.	Bacteria from around the anus getting into the urethra and bladder, not emptying the bladder properly. Much more common in women than men.	Burning sensation when urinating, needing to urinate urgently and more often than usual, cloudy, bloodstained or smelly urine, aching in lower abdomen or back.	Antibiotics after urine test if symptoms last longer than a day, drink plenty of water, use pain relief and urine alkalisers, (eg, Ural®, Citravesent®).	
Bacterial vaginosis If the control of the normal bacteria in a healthy vagina fails, an overgrowth of certain bacteria can occur. The acid/alkaline balance is upset and irritation results.	It may be brought on by anything that changes the balance in the vagina, eg, new sexual partners, increased sexual activity.	Greyish white, smelly vaginal discharge.	Oral tablets and/or vaginal pessaries.	