



A sensitive issue

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It must take a significant level of determination for a man to dip his penis into a jar of podophyllin. Yet this is what young Matthew had done in an attempt to rid himself of the genital warts that encircled his corona. While the doctor in the inner city sexual health centre surveyed the macerated member, Matthew tearfully explained that his mates had told him the warts would give his girlfriend cancer. He had tried dabbing the wart paint only on the visible lesions but it took too long. He'd taken more definitive action.

Matthew need not have treated his warts so aggressively, of course. In this edition of *Australian Family Physician*, Dr Stella Heley lays to rest the myth that visible warts cause cervical cancer. The types of human papillomavirus that are associated with cancer cause subclinical infections, which is what makes their diagnosis and management so difficult. But what a strong association it is, with 99.7% of cervical cancers containing human papillomavirus DNA.¹

In a major study of 19 307 people that was published in last month's *Australian New Zealand Journal of Public Health*, researchers at La Trobe University, the University of Sydney and the University of New South Wales found that Australians are having sex at a younger age and more often than their parents.² And Matthew is just one of the nearly 20% of Australians who have had a sexually transmitted infection (STI) at some time in their lives. The study found that most of these people present to their general practitioner and thus it underlines the importance of GPs being adequately trained and resourced to diagnose and treat STIs.

One of the strengths of this important study is its community focus, which is also a strength of Fox et al's 'Sex in the suburbs' article in this issue of AFP. Dr Fox and her colleagues report on the patients presenting to a suburban sexual health clinic, an interesting departure from the usual focus on inner city or hospital clinics. Parramatta is one of the most multicultural parts of Australia and the clinic's patients came from an astonishing 50 different countries of origin, yet patients who were born in Lebanon (the second commonest country of origin in the clinic's catchment area), presented at only one quarter of their expected rate. This raises significant questions for community health service planners.

Sexual health clinics are only one source of health care for people with STIs, however, and this month's themes draw attention to the central role of the GP in providing this care. Dr Jonathon Anderson provides us with a mix of clinical wisdom and hard epidemiology in recognising people with acute HIV infection. He draws attention to the subtle presentation of acute HIV and the importance of asking about risk behaviours in a sensitive way. Dr Anderson also advocates early consultation between GPs when one has little experience with HIV. It is clear that GPs have a great deal to offer patients with HIV in terms of both active listening and active treatment.

Drs Linda Dayan and Catriona Ooi give us a pair of articles on aspects of sexual health, namely pelvic inflammatory disease and the GP approach to STI screening. The importance of thorough yet sensitive history taking is emphasised,

as is thorough physical examination and investigations. Chlamydia, in particular, is a far more prevalent bacterium than many realise; its detection and eradication is vital in reducing pelvic inflammatory disease. When deciding which tests to take from a person presenting for STI screening the message is clear: consider the person, their risks and their concerns.

Apart from these theme articles on STIs, and AFP's regular features, this issue also contains an important article from Professor Brian McAvooy that provides a general practice perspective on a consultative report from the Clinical Oncological Society of Australia, The Cancer Council Australia and the National Cancer Control Initiative. The report, 'Optimising Cancer Care in Australia', contains 12 key recommendations and action items that will impact significantly on GPs. Prominent are recommendations that communications skills training for GPs and other professionals be enhanced.

The issue is topped off by one of the more 'anatomically correct' patient information sheets we have produced. No apologies for that: a properly used condom remains a vital defence against STIs for both genders.

I hope you find May's AFP relevant, reliable and readable.

References

1. World Health Organisation (WHO)/EUROGIN Joint Experts Meeting on Cervical Cancer Screening, 1996.
2. Primary Report of the Australian Study of Health and Relationships. *Aust N Z Public Health* 2003; 27(2):103-256.

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