Many of our readers will remember a period when the HIV care community collectively woke up to patients’ ongoing need for STI testing and diagnosis. A number of published studies and audits showed that STI testing in this population was limited and sporadic, resulting in efforts to establish regular routines of testing. Since then, the need has become arguably greater, particularly for men who have sex with men (MSM): syphilis has regained its place as a commonly diagnosed condition, and lymphogranuloma venereum has become endemic in this populations, in a number of urban settings. But just how high does testing need to be, and how do we target testing?

Partner notification (PN) is a difficult topic to research, as it is so challenging to obtain observational data both on the PN consultation, and the interaction between patients and their partners. Knight et al are to be commended on a study which describes the choices patients actually made in contacting their partners. They show that while an overwhelming proportion of patients chose to contact partners themselves, electronic communications were more likely to be chosen by people with syphilis, or with more sexual partners. On a related note, there is much commentary on the role of the internet in sex seeking. Abara et al present a community survey of MSM, exploring how they used the internet in relation to their sexual risk behaviour. They emphasize the importance of well articulated operational definitions of “internet sex seeking” in such research, if it is to be meaningful in informing services.

Mucosal cytokines and their relation to STI infection status is fascinatingly discussed by Masson et al. Chlamydia and gonorrhoea in particular were associated with high levels of cytokines, but this did not correlate with plasma levels. The science of cytokines is still being worked out, and far from an intervention. But its potential importance in STI control is borne out when we consider the extraordinarily high burdens of STI still borne by many populations in the developing world, which are also reported this month by Abdool-Karim et al, from South Africa, and Geraets from Suriname.

REFERENCES
