

Australian conference on STD

Report of the first national conference on STD held in Perth, Western Australia, 11-13 August 1978

Australia's first national conference on STD was held in Perth in the state of Western Australia from 11 to 13 August 1978. Four hundred participants were present, of which 100 were doctors, 40 of them coming from other Australian states. The remainder were mainly nurses, but wide interest was shown by laboratory technicians, social workers, medical students, and school teachers. This cross-section of medical and para-medical health workers gave the conference a special quality of reality.

The keynote paper reviewed the STD situation from a worldwide point of view, paying particular attention to the size of the problem and its social determinants. There were references to the situation in Australia. Apart from Western Australia, states have been slow in coming to grips with the problem. It was clear that more than just treatment of individuals with symptoms was needed. The cost of complications and preventable disability from STDs was unnecessarily high in Australia. An efficient and effective programme of STD control could be among the most cost-effective investments Australian states could make. To prove this, it was suggested that all such endeavours should have built in evaluation studies.

Demographic reports from Australia came from Dr W. A. Langsford, of the Federal Health Department, and those concerning Western Australia from Dr W. A. Newnham. These reports concentrated almost entirely on syphilis and gonorrhoea.

Reports from laboratory workers were a feature of the conference. Dr V. Blackman sketched the history of syphilis serology and described the reagin tests. Associate Professor R. Dawkins reported on the modern approach concerning the more specific test; the treponemal haemagglutination (TPHA) test was favoured. The fluorescent treponemal antibody (FTA-ABS) test was most usefully deployed as the monospecific tests—the FTA-IgG and FTA-IgM. Other laboratory papers covered culture of *Chlamydia trachomatis* (Dr P. Phillips), herpes virus studies (Mr G. Hartnett), and the laboratory diagnosis of

granuloma inguinale (Dr A. Henderson), a condition which is still regularly seen in Western Australia.

Two papers were read concerning treatment. Professor S. Goodwin discussed the philosophy of antibiotic use in STDs, while Dr L. Laden pointed out that Australia is particularly vulnerable to invasion by β -lactamase-producing gonococci. From WHO reports Australia has the third highest number of isolates after the USA and the UK. Beta-lactamase-producing gonococci have been regularly imported by Australians touring South-East Asia and the Western Pacific over the last two years. Spread to home contacts has apparently not gone beyond the first generation. Considerable anxiety about the possibility of the spread of these costly organisms came from the floor.

Clinical observations from general practitioners were reported by Dr F. McConnel and Dr J. Leavesley. It emerged from the ensuing discussion that two fifth-year medical students had undertaken a questionnaire to survey the amount of STD treated in the Perth metropolitan area. This showed that the bulk of STD work was still being dealt with in the private sector. Reports from hospital clinics emphasised the current epidemic of genital herpes. Dr M. Gollow reported the finding of herpes virus in the urethra of six men without a history or clinical evidence of the disease. Dr G. Kelly produced epidemiological evidence to show that, while syphilis and gonorrhoea were apparently being brought under control, this was certainly not the case with the five viral STDs—least of all genital herpes.

Bridging the gap between medical and social aspects, Mr Frank Hillman reported on the methods and outcome of contact-tracing in the Perth Special Clinic. Four thousand men with syphilis or gonorrhoea were persuaded to name 1500 contacts over a two-year period. Emphasis was placed on the need for general practitioners to avail themselves of this service. Also in this category was a paper entitled 'New Approaches to Health Education about the STDs' read by Mr Colm O'Doherty of the Perth Health Education Department. Some

of the audiovisual aids in daily use were demonstrated in a caravan. Dr F. Quadros and Mr Collard dealt objectively and sensitively with the size and nature of the STD problem among Aboriginal people.

The two socially orientated papers had attractive titles. The first, 'My Doctor Never Tells Me Anything', was the report of a registered nurse (Miss J. Watson) and an obstetrician (Professor P. Giles). The second paper, 'Grandmother's Risks and my Daughter's Hazards' was read by Dr Anne Troup, a general practitioner with STD experience, and by Mr R. Smith, a schoolmaster at a major high school. All four speakers were both informative and provocative. Discussion—largely promoted by non-medical delegates—was lively.

The final subject on the agenda, 'Is There a Place for STD Education in the Medical Students' Curriculum?' had two main speakers. Dr G. Hart succinctly put forward the case of need, underlining the fact that although STDs had been increasing year by year for 20 years or more, medical schools in many parts of the western world had continuously neglected them. Professor D. Allbrook, associate dean in the Perth faculty, circulated a review showing how little was done about the subject in the medical schools of Australia. Although attention in laboratory courses, and occasionally in behavioural sciences and social medicine courses, was evident, students' contact with patients with STD was everywhere virtually non-existent. Contributions to the discussion by medical students aired criticisms of the local faculty's failure in this area. Other contributors criticised the faculty's lack of appreciation of what changing attitudes and behaviour had meant to the day-to-day practice of medicine. All the contributors were clearly bent on action.

Nobody left this conference without being aware that, although Australia's entry into the field of STD control is somewhat belated, it is certainly spirited. Her growing enlightenment, led so ably by Dr W. A. Newnham and his staff in Western Australia, will certainly be welcomed by her neighbours.

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