sets of negative tests for TV and other STDs at one and three week intervals following treatment. Her casual consort in London was untraceable.

*Trichomonas vaginalis* is a cosmopolitan flagellate of the genital organs in adults. Transmission occurs primarily through sexual intercourse as the parasite has no resistant stage. Infection is commonly symptomless in the male and produces a severe vaginitis in the female. There is little evidence to support direct female to female transmission resulting from poor standards of sanitation and hygiene. Whittington1 showed that the *Trichomonas vaginalis* organism in vaginal exudate can survive up to 48 hours when maintained at 10°C. Hesseltine et al (1942)2 produced the clinical entity of vaginal trichomoniasis by inoculation of the human vagina with vaginal trichomonads.

We believe this is the first reported case of *Trichomonas vaginalis* infection acquired probably in a lesbian relationship transmitted from partner's vaginal exudates through masturbating fingers.

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A H De Silva
R Basu Roy
Dept of Genitourinary Medicine, Royal Victoria Hospital, Gloucester Road, Bournemouth BH7 6JF, UK

References


TO THE EDITOR, Genitourinary Medicine

Falling prevalence of *Chlamydia trachomatis* infection among female patients attending the Department of Genito-Urinary Medicine, Bournemouth

Sir,

Over the last 5 years we have noticed a significant fall in the prevalence of chlamydia infection among female patients attending our department. It has fallen from 16-57% culture positives in 1984 to 3-23% in the first six months of 1989. A national fall in the prevalence of syphilis, gonorrhoea and *trachomatis* and *Neisseria gonorrhoeae* are offered to all women attending the Department of Genitourinary Medicine at Newcastle. In a retrospective study the incidence of these two infections in women during 1985 to 1988 were compared as shown in the table. The new isolates of *Trichomonas vaginalis* and *N gonorrhoeae* declined steadily over the four year period, while the number of women screened for these two infections remained fairly stable. The incidence of *Chlamydia trachomatis* has fallen from 174/1000 in 1985 to 71/1000 in 1988. A similar decrease in gonorrhoea has already been reported in London.1 Our observations in Newcastle show a parallel trend in these two sexually transmitted infections which are acquired by unprotected penetrative sexual intercourse. These findings are suggestive of changes in sexual behaviour in women attending a genito-urinary medicine clinic.

K Sivakumar
R Basu Roy

Dept of Genitourinary Medicine, Royal Victoria Hospital, Gloucester Road, Bournemouth BH7 6JF, UK

Reference


TO THE EDITOR, Genitourinary Medicine

Declining incidence of *Chlamydia trachomatis* in women attending a provincial genitourinary medicine clinic

Sir,

Endocervical cultures for *Chlamydia*

Table

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