Methods Between June 2010 and 2012, self-collected (SVS) and clinician-collected vaginal (CVS) swabs were obtained from 79 young reproductive age women attending the Prerana Reproductive Health Clinic in Mysore, India. The study was explained to each participant and a brochure illustrating how to collect vaginal swabs was handed to them. The Gram-stained smears and saline wet mounts prepared from the SVS and CVS were examined by a trained microbiologist and the clinician. Vaginal pH was recorded for each swab. kappa coefficient was used to quantify agreement between the two sets of results.

Results When compared with the CVS, the ability of the self-obtained Gram stain to diagnose bacterial vaginosis had a sensitivity of 100%, specificity of 98%, positive predictive value of 100% and negative predictive value of 100%. Only one pair was discordant in the results where the SVS showed the BV status as negative while the CVS found it to be intermediate stage BV. There was substantial agreement (kappa = 0.97) between the two collection methods in the ability to determine the grade of vaginal flora.

Conclusion As compared with clinician collected vaginal smears, self-collected smears have substantial agreement in the diagnosis of bacterial vaginosis. With adequate education and instructions using simple visual illustrations, it is possible to have women sample and self collect vaginal swabs for diagnosis of lower genital tract infections.

Background In Poland, among STIs syphilis and gonorrhoea are reportable since 1947, non-gonococcal genital infections (NGU) from reports of the National Institute of Public Health and the former Institute of Venereology, Poland.

Results Gonorrhoea. The average incidence rate was 1.24 per 100,000 inhabitants during 2000–2011. Culture of Neisseria gonorrhoeae remains the mainstay of diagnosis and ceftriaxone is the recommended first-line treatment. Syphilis. The mean incidence rate from 2000 to 2011 was 1.91 per 100,000 inhabitants. The number of serological tests for syphilis (STS) performed gradually diminished from 1,200,000 in 2000 to less than 100,000 in 2011. In the same period, 637 cases of syphilis in pregnancy or at delivery and 119 cases of congenital syphilis were diagnosed. The number of notified NGU decreased from 1981 in 2000 to 484 in 2011, that of genital herpes declined from 418 to 173 in respective years, and that of reported AGWs fluctuated (range from 400 to 1400 cases per year). Since the start of testing in 1985, 16,314 cases of HIV infection and 2,848 AIDS cases have been diagnosed until 2013. About 20% of all HIV infections were related to risky heterosexual intercourse. The incidence of notified HIV infection in Poland is increasing, while the incidence of the remaining reportable STIs is declining.

Conclusions The increasing HIV incidence and decreasing number of STS along with presence of congenital syphilis cases are of major concern. The reporting system of STIs in Poland is suboptimal.