

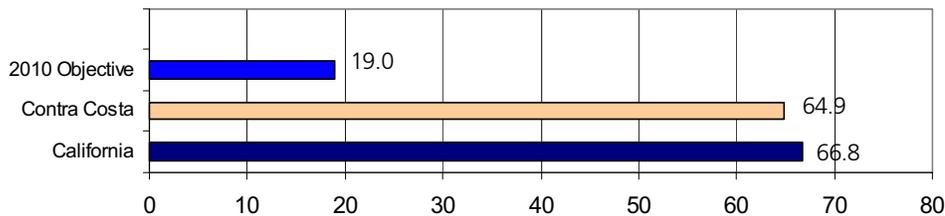
# Sexually Transmitted Diseases (STDs)

**Contra Costa has not met the Healthy People 2010 objective for gonorrhea. The rates of sexually transmitted diseases are greatest among young people age 15-24.**



Contra Costa's gonorrhea rates are not statistically different than the State's. Both Contra Costa and California have gonorrhea rates several times that of the Healthy People 2010 objective.

Table 18. Gonorrhea rate per 100,000, 2000-2002



## Young people most likely to be infected

Locally, the rates of chlamydia are greatest among young adults between the ages of 20-24 (1355.2 per 100,000) and 15-19 (1195.1 per 100,000). There are also infections among those younger than 15 years, with approximately 52 cases of chlamydia per year.

Although Contra Costa has high rates of chlamydia, the County (225.1 per 100,000) still fares better than the State (295.5 per 100,000).

Locally, the rates of gonorrhea are greatest among young adults between the ages of 15-19 (271.2 per 100,000) and 20-24 (347.2 per 100,000). There are also infections among those younger than 15, with approximately 15 cases of gonorrhea per year.

Primary and secondary (P&S) syphilis is most common among older groups (25-44 years)

in Contra Costa. Over the last four years there have been a range of between 8 and 18 early syphilis cases per year. The overwhelming majority of syphilis cases in recent years in Contra Costa have been among men who have sex with other men.

Table 65. Rates of Chlamydia, Gonorrhea and Syphilis by Age. Contra Costa, 2000-2002

	Chlamydia	Gonorrhea	Syphilis (P&S)
0 - 9	3.4	1.2	--
10 - 14	62.3	18.1	--
15 - 19	*1,195.1	*271.2	.5
20 - 24	*1,355.2	*347.2	.6
25 - 29	538.9	166.4	1.8
30 - 34	197.1	69.8	1.9
35 - 44	61.2	42.4	1.8
45 +	9.3	8.4	.6
<b>Total</b>	<b>225.1</b>	<b>64.9</b>	<b>.8</b>

\* 15-19 and 20-24 year olds had statistically higher rates of both chlamydia and gonorrhea compared to all other age groups. Note: 43 individuals were not included because their ages were unknown.

## African American and Latinos have greater rates of chlamydia

The highest rates of chlamydia are among African American women (571.7 per 100,000), then African American men (230.0 per 100,000), followed by Latina women (115.3 per 100,000) and Latino men (32.0 per 100,000). Females (335.8 per 100,000) are affected by chlamydia at greater rates than males (106.0 per 100,000). It is important to note that women are more likely to be screened as part of general reproductive health care like pap smears or pregnancy tests. [State of California, STD Report, 2001]).

Gonorrhea affects African American women (192.9 per 100,000) and men (174.0 per 100,000) at much greater rates than other racial/ethnic groups.

Syphilis (P&S) rates are highest among White men (2.1 per 100,000), followed by African American men (1.6 per 100,000) and Latino men (1.4 per 100,000). There is a higher rate among males (1.6 per 100,000) compared to females (0.1 per 100,000).

**Sexually Transmitted Diseases include chlamydia, gonorrhea and syphilis. (Also see AIDS section).** These diseases are reported to the local health department when diagnosed by a doctor. It's important to note that Race and Ethnicity are reported in only one-third of the cases.

## Sexually Transmitted Diseases are common infections

More than 15 million people in the United States become infected with one or more STDs every year.

STD is the term used to describe more than 25 infections which can pass from one person to another during sexual contact. The United States has the highest STD rate in the industrialized world - roughly half of all Americans become infected with an STD before the age of 35.

Despite the prevalence of STDs, studies show that **many people are unaware of their risks for contracting an STD or the serious, and sometimes deadly, health consequences** that may result from an untreated infection.

Table 66. Rates of Sexually Transmitted Diseases by Race and Gender. Contra Costa 2000-2002

	Chlamydia		Gonorrhea		P&S Syphilis	
	Female	Male	Female	Male	Female	Male
African American	571.7*	230.0*	192.9*	174.0*	0.7	1.6
Hispanic/Latino	115.3*	32.0*	7.5	8.2	--	1.4
Asian/PI	60.4	19.9	4.9	9.6	--	--
White	52.3	13.5	8.0	8.2	--	2.1
County wide	335.8	106.0	72.3	56.6	0.1	1.6

[\*] Indicates that the rates of racial/ethnic and gender groups specified are statistically important using comparisons described in the text above.

Some STDs, **such as gonorrhea or chlamydia, may cause no symptoms.** People who do not know they are infected risk infecting their sexual partners and, in some cases, their unborn children. If left untreated, these diseases could cause debilitating pain or may destroy a woman's ability to have children. Some STDs can be cured with a single dose of antibiotics, but some, such as acquired immunodeficiency syndrome (AIDS), herpes or hepatitis, are incurable. People with these diseases remain infectious to others for their entire lives.

**Those most at risk for contracting STDs are people who have unprotected sex.**

This includes people who have sex without using a latex condom. Having multiple partners may also increase someone's risk of getting an STD.



**Chlamydia is the most reported communicable disease in California**

Chlamydia accounted for the majority of reported STD cases in the state. Increases in the number of cases are due in part to expanded screenings and better testing methods.

**Men who have sex with men (MSM) are also at greater risk**

In California between 1997 and 2001, men

who have sex with men (MSM) comprised an increasing proportion of chlamydia cases. It is unclear if this was due to greater infection or due to the fact that these men could be making better use of available screening programs such as HIV testing.

**People are often infected with BOTH gonorrhea and chlamydia**

The State of California STD Report for 2001 reports that the proportion of gonorrhea cases that were co-infected with chlamydia remained relatively high (greater than 30%), indicating a need to consider treating both diseases at one time.

According to recent State reports, syphilis (P&S) has been on the rise - primarily due to outbreaks among men who have sex with men (MSM) throughout all regions of California.

**How to calculate the rate of Sexually Transmitted Infections (STDs)**

A rate controls for differences in population size and is a good summary statistic for comparing health problems, like STDs, across populations of different sizes.

The rate is calculated by dividing the number of individuals diagnosed with a particular infection that occur within a specific race/ethnic group or county/State population, by the total number of individuals in that population, multiplied by 100,000.

Multi-racial individuals or those recorded as "other" were not included in this analysis due to their small numbers of cases.

### Confidence intervals are available

You may download and view all detailed tables with 95% confidence intervals, at...  
[http://cchealth.org/health\\_data/hospital\\_council/](http://cchealth.org/health_data/hospital_council/)

## Data sources

In the analysis above, local data about the number of STD cases is from Contra Costa Health Services' Epidemiology, Surveillance and Health Data unit.

For more information about STD in Contra Costa, contact Juan Reardon, MD, MPH, Director, Epidemiology, Surveillance and Health Data Unit, [jreardon@hsd.co.contra-costa.ca.us](mailto:jreardon@hsd.co.contra-costa.ca.us) or staff Martin Lynch by phone at (925) 313-6323. You can also visit the unit's page at [http://www.cchealth.org/health\\_data](http://www.cchealth.org/health_data).

Information about the number of cases at the State level is from the California Department of Health Services, STD Control Branch. Additional reference information is from the report, "STD - Sexually Transmitted Disease in California, 2001," DHS and tables from DHS, STD section. Denominator data was derived from Department of Finance estimates.

Statistics prepared by Contra Costa Health Services' Community Health Assessment, Planning & Evaluation Group: 7/04. Any analyses, interpretations or conclusions of the data, unless specified, have been reached by the author and are not from the CA Department of Health Services, Center for Health Statistics.

For more information about content in this report, please email Contra Costa Health Services' Community Health Assessment, Planning and Evaluation (CHAPE) group at [chape@hsd.co.contra-costa.ca.us](mailto:chape@hsd.co.contra-costa.ca.us) or phone (925) 313-6171.