

# Surveillance of Sexually Transmissible Infections in Victoria 1999

**Human  
Services**



**Peoplefirst**

**Public Health Division**

# **Surveillance of Sexually Transmissible Infections**

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**in Victoria 1999**

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*Public Health Division*

*December 2000*

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Public Health Division

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## **Disclaimer**

Data presented in this report relate to notifications received by the Department and do not necessarily reflect the true incidence of the disease.

# Executive Summary

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## HIV/AIDS

To the end of 1999, there was a cumulative total of 4215 cases of HIV infection diagnosed in Victoria representing 21 per cent of all reported cases of HIV across Australia.

During 1999, there were 141 new notifications of HIV in comparison with 149 received during 1998. There were 128 males, 12 females and one person for whom gender was unknown. Male-to-male sexual contact was cited as the principal exposure category for 61 per cent of males in 1999, with heterosexual exposure accounting for 18 per cent of infections. Among men citing heterosexual exposure, 35 per cent were from a high prevalence country, and a further nine per cent of cases had a partner from a high prevalence country. Injecting drug use among men who have sex with men accounted for nine per cent of infections, and a further five per cent of men cited injecting drug use alone. Amongst females, heterosexual exposure accounted for 83 per cent of infections. Of these, 30 per cent were born in a high prevalence country, and a further 40 per cent had a partner from a high prevalence country. The remaining 17 per cent of cases (two individuals) were recipients of blood transfusions.

To the end of 1999, there was a cumulative total of 1800 AIDS diagnoses notified in Victoria. There were 24 new AIDS diagnoses notified in 1999, made up of 23 males and one transgender individual. In December 1999 there were an estimated 377 people living with AIDS in Victoria.

## Chlamydia

There was a further increase in the number of cases of *Chlamydia trachomatis* notified in 1999: a total of 2952 cases, compared with 2494 in 1998. The gender distribution of notified cases was unchanged, with 60 per cent of reported infections occurring in females.

## Gonorrhoea

There is a continuing outbreak of gonorrhoea in Victoria that is concentrated in men who have sex with men. Gonorrhoea notifications doubled from 1997 to 1999, and the incidence of infection in 1999 was the highest since 1987. The highest incidence of gonorrhoea, and the greatest recent increase, affected men aged 20 to 40 years who lived in inner suburban Melbourne, and such cases were typically associated with sex with a local casual male partner.

## Syphilis

During 1999 there were 145 notifications of treponemal disease, however only two of these were cases of infectious syphilis.



# Table of Contents

<b>Acknowledgements</b>	iii	<b>Tables</b>	
<b>Executive Summary</b>	v	Table 1: HIV Diagnoses, by Sex and Exposure Category, Victoria, 1983-1999	11
<b>Introduction</b>	1	Table 2: HIV Diagnoses, by Age and Sex, Victoria, 1983-1999	12
<b>Notification Process</b>	1	Table 3: HIV Diagnoses, by Age and Exposure Category, Victoria, 1999	12
<b>Main Findings</b>	2	Table 4: HIV Diagnoses, by Country of Birth and Probable Place Infection Acquired, Victoria, 1999	12
HIV and AIDS in Victoria	2	Table 5: HIV Diagnoses, by Exposure Category and Probable Place Infection Acquired, Victoria, 1999	13
<b>Human Immunodeficiency Virus (HIV)</b>	3	Table 6: HIV Diagnoses, by CD4 Count at Time of Diagnosis, Victoria, 1995-1999	13
HIV in Victoria During 1999	3	Table 7: HIV Diagnoses, by Previous Testing History and Seroconversion Illness, Victoria, 1995-1999	13
How Are Males Infected with HIV in Victoria?	3	Table 8: HIV Diagnoses within 12 Months of a Previous Negative HIV Test and/or Seroconversion Illness, by Sex and Exposure Category, Victoria, 1999	14
How Are Females Infected with HIV in Victoria?	4	Table 9: HIV Diagnoses within 12 Months of a Previous Negative HIV Test and/or Seroconversion Illness, by Age and Sex, Victoria, 1999	14
Are These Newly Acquired HIV Infections?	4	Table 10: HIV Diagnoses, by Sex and Reason for Testing, Victoria, 1999	14
What Is the Pattern of HIV Infection Amongst Sex Workers?	4	Table 11: HIV Diagnoses, by Sex and Region, Victoria, 1999	15
What Is the Pattern of HIV Infection Amongst Injecting Drug Users?	5	Table 12: HIV Testing, by Age and Sex, Victoria, 1999	15
Where Do People with HIV Live in Victoria?	5	Table 13: HIV Testing, by Sex and Reason for Test, Victoria, 1999	15
Where Do Victorians Acquire HIV Infection?	5	Table 14: AIDS Diagnoses, by Sex and Exposure Category, Victoria, 1983-1999	16
How Many HIV Tests Are Conducted in Victoria Each Year?	5	Table 15: Deaths Following AIDS Diagnosis, by Sex, Victoria, 1983-1999	17
<b>Acquired Immune Deficiency Syndrome (AIDS)</b>	6	Table 16: Deaths Following AIDS Diagnosis, by Year of Death and Year of AIDS Diagnosis, Victoria, 1983-1999	17
AIDS in Victoria During 1999	6	Table 17: AIDS Diagnoses and Deaths, by Sex and Age, Victoria, 1983-1999	17
What Is the Trend in Deaths Following AIDS Diagnosis?	6	Table 18: AIDS Diagnoses, by Region of Residence at Time of AIDS Diagnosis, Victoria, 1983-1999	18
Is there a Changing Pattern of Illness Amongst those Presenting with AIDS in Victoria?	7	Table 19: AIDS Diagnoses, by Year of Notification and Year of Diagnosis, Victoria, 1983-1999	18
People Living with AIDS in Victoria	7	Table 20: AIDS Diagnoses, by Sex and Country of Birth, Victoria, 1983-1999	18
<b>Chlamydia</b>	8		
<b>Gonorrhoea</b>	9		
<b>Syphilis</b>	10		
<b>Specialist Clinics</b>	10		
Melbourne Sexual Health Centre	10		
Non-metropolitan STD Clinics	10		
<b>Tables</b>	11		
<b>Resources</b>	31		



Table 21: AIDS Diagnoses, by AIDS Defining Illness, Victoria, 1983-1999	19	Table 41: Notifications of Other Sexually Transmissible Infections, by Sex and Year of Diagnosis, Victoria, 1992-1999	27
Table 22: AIDS Diagnoses, by CD4 Count, Victoria, 1994-1999	19	Table 42: Clients Seen and Clinic Attendances, by Age and Sex, Melbourne Sexual Health Centre, Victoria, 1999	28
Table 23: AIDS Diagnoses, by Time between HIV Diagnosis and AIDS Diagnosis, Victoria, 1983-1999	19	Table 43: Clients Seen and Clinic Attendances, by Sex and Exposure Category, Melbourne Sexual Health Centre, Victoria, 1999	28
Table 24: People Living with AIDS, by Region, Victoria, 1999	20	Table 44: Clients Diagnosed, by Sex and Infection Diagnosed, Melbourne Sexual Health Centre, Victoria, 1999	28
Table 25: Chlamydia Notifications, by Sex, Victoria, 1990-1999	21	Table 45: Clients Seen and Clinic Attendances, by Clinic and Sex, Non-metropolitan STD Clinics, Victoria, 1999	29
Table 26: Chlamydia Notifications, by Sex and Age, Victoria, 1999	21	Table 46: Clients Seen and Clinic Attendances, by Age and Sex, Non-metropolitan STD Clinics, Victoria, 1999	29
Table 27: Chlamydia Notifications, by Sex and Reason for Testing, Victoria, 1999	21	Table 47: Clients Seen and Clinic Attendances, by Exposure Category and Sex, Non-metropolitan STD Clinics, Victoria, 1999	29
Table 28: Chlamydia Notifications, by Source Partner and Probable Place Infection Acquired, Victoria, 1999	22	Table 48: Clients Seen with Genital HSV Infection or Genital Warts Infection, by Exposure Category and Sex, Non-metropolitan STD Clinics, Victoria, 1999	30
Table 29: Chlamydia Notifications, by Sex and Country of Birth, Victoria, 1999	22	Table 49: Clients Seen with Genital Chlamydia Infection or HIV Infection, by Exposure Category and Sex, Non-metropolitan STD Clinics, Victoria, 1999	30
Table 30: Chlamydia Notifications, by Sex and Sexual Orientation, Victoria, 1999	22		
Table 31: <i>N. gonorrhoeae</i> Diagnoses, by Sex, Victoria, 1986-99	23		
Table 32: <i>N. gonorrhoeae</i> Diagnoses, by Sex and Age, Victoria, 1999	23		
Table 33: <i>N. gonorrhoeae</i> Diagnoses, by Sex, Reported Sexual Orientation and Site of Isolation, Victoria, 1999	23		
Table 34: <i>N. gonorrhoeae</i> Diagnoses, by Reported Sexual Orientation, Source Partner and Place Infection Acquired <sup>1</sup> , Victoria, 1999	23		
Table 35: <i>N. gonorrhoeae</i> Diagnoses and Rates of Infection, by Region, Victoria, 1999	24		
Table 36: Susceptibility of <i>N. gonorrhoeae</i> Isolates to Penicillin, Victoria, 1990(99)	24		
Table 37: Susceptibility of <i>N. gonorrhoeae</i> Isolates to Penicillin, Tetracycline and Ciprofloxacin, by Sex, Reported Sexual Orientation and Place Acquired Infection, Victoria, 1999	25		
Table 38: Syphilis Diagnoses, by Sex, Age and Disease Status, Victoria, 1999	26		
Table 39: Syphilis Diagnoses, by Sex and Disease Status, Victoria, 1999	26		
Table 40: Syphilis Diagnoses, by Sex and Reason for Testing, Victoria, 1999	26		

## Figures

Figure 1: Number of HIV, AIDS and Newly Acquired HIV Infections, Victoria, 1983-1999	2
Figure 2: Number of HIV Diagnoses in Males by Exposure Category, Victoria, 1983-1999	3
Figure 3: Time Between First HIV Diagnosis and Diagnosis of AIDS, Victoria, 1992-1998	6
Figure 4: Number of <i>N.gonorrhoea</i> Notifications by Sex, Victoria 1986-1999	10

# Introduction

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This is the eleventh annual surveillance report of sexually transmissible infections (STIs) in Victoria. The report incorporates data from statutory notifications to the Victorian Department of Human Services for 1999 and, where available, comparative data from earlier years. This report also contains information derived from supplementary surveillance and related research activities. Collection of this information would not be possible without the assistance and cooperation of the doctors, clinics and laboratories who see patients at risk for sexually transmissible infections in Victoria.

Included in this report are the results of surveillance for HIV, AIDS and other STIs. In addition, findings from several clinical settings, including the Melbourne Sexual Health Centre and non-metropolitan sexual health clinics, are also reported. Detailed demographic and socio-behavioural data are collected on diagnoses of human immunodeficiency virus (HIV), acquired immunodeficiency syndrome (AIDS), gonorrhoea, chlamydia and syphilis.

## Notification Process

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In Victoria information on HIV/AIDS is collected via four separate mechanisms:

1. Statutory notification of all diagnoses of AIDS
2. Laboratory and clinical reports of new diagnoses of HIV infection
3. Basic laboratory data on all HIV tests conducted in Victoria
4. Statutory notification for all new HIV diagnoses from September 1996.

For both HIV and AIDS, only coded (non-identifying) data are collected, and all data are treated as strictly confidential. All states and territories forward HIV/AIDS data to the National Centre in HIV Epidemiology and Clinical Research based in Sydney for inclusion in the national HIV/AIDS statistics.

Detailed exposure and sociodemographic data for all new HIV diagnoses are sought directly from the diagnosing doctor by partner notification officers employed by the Victorian Department of Human Services. To maintain accurate data on survival and geographical distribution of people with AIDS, annual follow-up data are collected for all people living with AIDS.

All positive test results for chlamydia, gonorrhoea and syphilis are required to be notified to the Victorian Department of Human Services by both the treating doctor and testing laboratory. In an effort to improve the demographic data collected on these diseases, a form requesting further epidemiological data is forwarded by the testing laboratories to the doctor for completion. Epidemiological data include sex, age, postcode of residence, site of isolation and reported sexual orientation, type of sexual encounter, and place of acquisition. The Microbiological Diagnostic Unit (MDU) at the University of Melbourne maintains the gonorrhoea notification database for Victoria and also performs antibiotic sensitivity testing of gonococcal isolates.

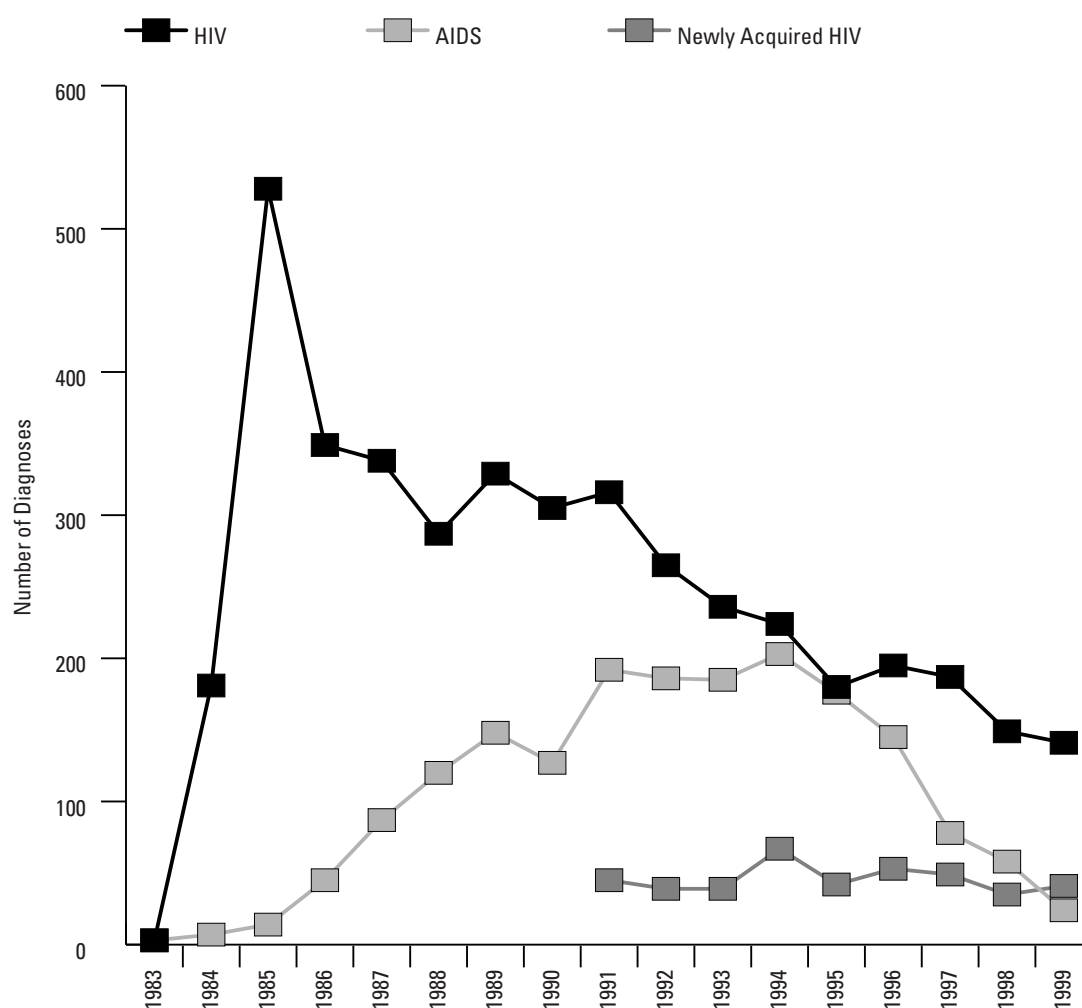
# Main Findings

## HIV and AIDS in Victoria

To the end of 1999, there was a cumulative total of 4215 HIV diagnoses in Victoria. This represents 21 per cent of Australia's total. The annual number of HIV diagnoses in Victoria peaked in 1985 with 528 diagnoses, and has since decreased to 141 individuals diagnosed during 1999. Males account for 3960 diagnoses (94 per cent), and females 214 (five per cent). The annual number of newly acquired infections during 1999 was 41 (29 per cent). The proportion of annual HIV diagnoses that are classified as newly acquired has remained relatively constant at approximately 25 per cent since 1994.

To the end of 1999, there was a cumulative total of 1800 AIDS diagnoses notified in Victoria. The pattern of AIDS diagnosis in Victoria has followed the national trend peaking at 203 diagnoses in 1994. There has been a dramatic decrease in AIDS diagnoses since 1994, with 24 new AIDS diagnoses in 1999. The use of highly active anti-retroviral therapies (HAART) which became widely available in Australia during 1996 has probably contributed to this marked decline in AIDS diagnoses.

Figure 1: Number of Diagnoses of HIV, AIDS and Newly Acquired HIV Infections, Victoria, 1983-1999



# Human Immunodeficiency Virus (HIV)

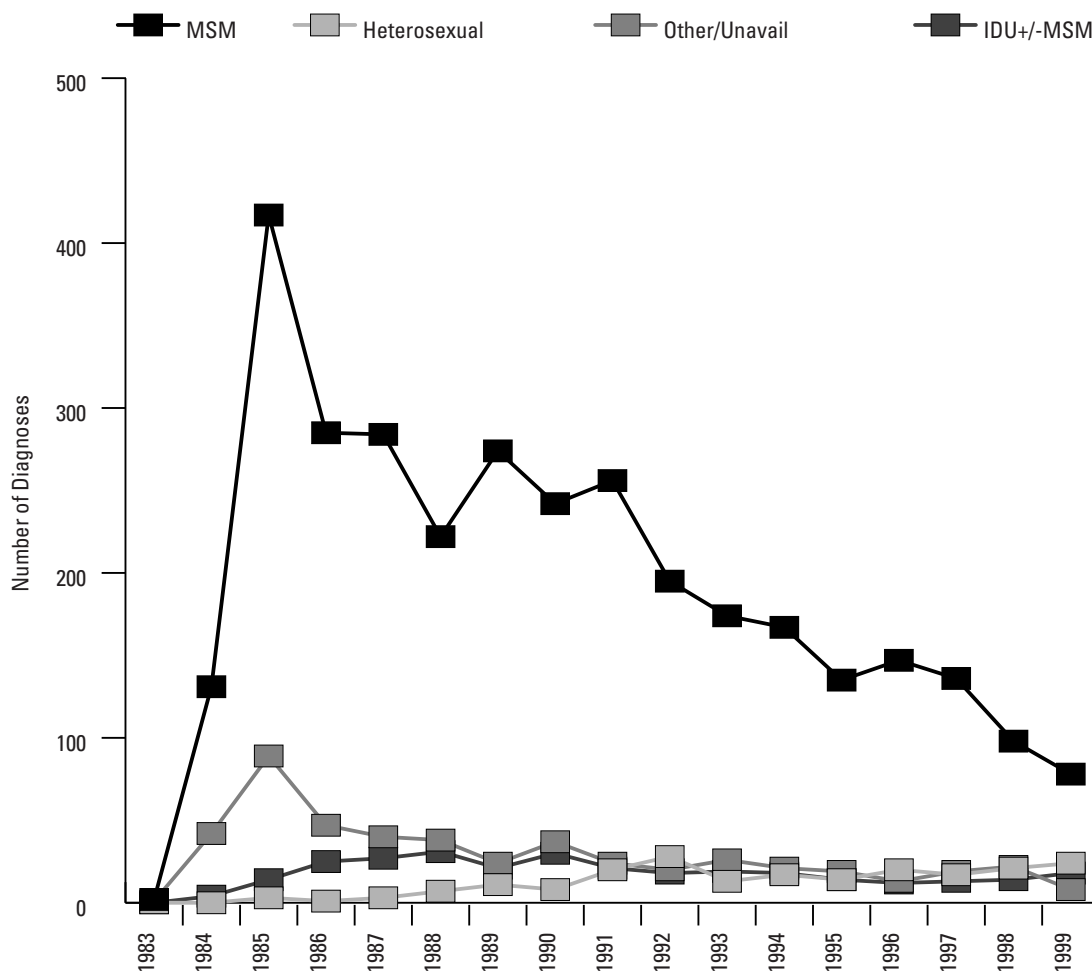
## HIV in Victoria During 1999

During 1999 there were 141 new notifications of HIV in Victoria: 128 males (91 per cent), 12 females (nine per cent) and one individual for whom no sex was specified. The median age of diagnosis was 35 years for males and 33 years for females. The median age amongst males has gradually increased from 31 years in the 1980s to 35 in 1999. Although the majority (69 per cent) of diagnoses were amongst individuals aged between 20 and 40 years in 1999, five (four per cent) were aged under 20 years and six (four per cent) were aged 60 years or older.

## How Are Males Infected with HIV in Victoria?

There were 128 new HIV infections notified in males in Victoria during 1999. Of these 128 new infections, male-to-male sexual contact (homosexual and bisexual) was cited as the principal exposure category for 78 males (61 per cent), heterosexual exposure for 16 males (12 per cent) and eight males (six per cent) diagnosed were born in a high prevalence country<sup>1</sup>. Injecting drug use and homosexual contact accounted for infections in 12 males (nine per cent), and injecting drug use alone for six males (five per cent). Of the other eight infections in males, exposure for one was

Figure 2: Number of HIV Diagnoses in Males by Exposure Category, Victoria, 1983-1999



<sup>1</sup> High prevalence countries include those in Sub Saharan Africa, the Carribean and specified countries in South-East Asia (Cambodia, Myanmar and Thailand), where HIV is transmitted predominantly by heterosexual contract.

related to a haemophilic or coagulation disorder, one reported exposure through a blood transfusion, five cases (five per cent) remain under investigation, and exposure for the remaining case was not established.

The proportion of infections amongst males attributable to male-to-male sexual contact (homosexual and bisexual) has declined from over 80 per cent during the 1980s to 61 per cent in 1999. Conversely, the proportion of infections attributable to heterosexual contact has increased from less than one per cent in 1985 to 12 per cent in 1999. The proportion of people for whom injecting drug use was cited as the principal exposure mechanism has remained consistent, at between three and five per cent. The proportion of notifications amongst males originating from a high prevalence country has increased more recently. Notifications in 1999 amounted to 6.3 per cent, compared with 3.5 per cent in 1998 and 1.7 per cent in 1997, amongst males originating from a high prevalence country.

## **How Are Females Infected with HIV in Victoria?**

There were 12 females notified with HIV infection in Victoria during 1999 and heterosexual contact was cited as the principal exposure mechanism for seven infections (58 per cent). Of these seven, four (57 per cent) had a partner from a high prevalence country. A further three cases (25 per cent) originated from a high prevalence country. The remaining two cases (17 per cent) were related to receipt of blood transfusions, one of which was received in 1983. None of the cases of HIV notified in females during 1999 was attributed to injecting drug use.

Amongst the 214 females diagnosed with HIV in Victoria between 1983 and 1999, heterosexual contact has been the principal exposure category, accounting for 61 per cent of infections. Injecting drug use has been reported as the exposure category for 16 per cent of infections. HIV infection related to birth in a high prevalence country accounted for 11 per cent of infections. Blood transfusion was a leading cause of infection amongst women during the mid 1980s, and has accounted for seven per cent of infections. The

remaining five per cent of infections are attributed to vertical transmission (six cases) and three are still either under investigation or information remains unavailable.

## **Are These Newly Acquired HIV Infections?**

On the basis of a previous negative HIV test, and/or a seroconversion illness within the 12 months preceding HIV diagnosis, we can identify individuals with newly acquired HIV infection. Newly acquired infections represent incident infections, and provide us with a picture of who is presently being affected by the HIV epidemic. Of the 852 HIV notifications since 1995, 220 (26 per cent) have been identified as newly acquired infections-with 41 newly acquired HIV infections notified during 1999. Males represented 90 per cent of all newly acquired infections during 1999, and male-to-male sexual contact has accounted for 76 per cent of the newly acquired infections amongst men. Gay identified males are however, more likely to be diagnosed with newly acquired infection, as they are more likely to serially test for HIV and to attend a gay or specialist medical practice in which the doctors are familiar with the clinical presentation of a seroconversion illness.

## **What Is the Pattern of HIV Infection Amongst Sex Workers?**

During the period 1983 to 1999 24 individuals, 16 males and eight females were diagnosed HIV positive who had reported a history of sex work. The exposure category for the males was male-to-male sexual contact, with or without injecting drug use. Four of the ten women originated from high prevalence countries; two reported a history of injecting drug use; and the remaining two women cited heterosexual contact only as their exposure category. In 1999 there were two males and one female diagnosed with HIV who had reported a history of sex work.

## **What Is the Pattern of HIV Infection Amongst Injecting Drug Users?**

During 1999 18 males were diagnosed with HIV who had a history of injecting drug use. Of these, 12 men reported a history of male-to-male sexual contact, and six males cited injecting use only as their exposure mechanism. None of the females diagnosed with HIV during 1999 had a history of injecting drug use.

Until the end of 1999, 334 people (35 females and 299 males) had been diagnosed with HIV and reported injecting drug use as an exposure mechanism. This represents eight per cent of all infections in Victoria. Amongst males reporting injecting drug use, 64 per cent also reported male-to-male sexual contact. The proportion of infections attributable to injecting drug use without male-to-male sexual contact has remained relatively stable at about three to four per cent of all diagnoses. Injecting drug use without male-to-male sexual contact accounts for three per cent of diagnoses amongst males, and 16 per cent of HIV diagnoses amongst females. Those with a history of injecting drug use without male-to-male sexual contact tend to be younger than all others diagnosed with HIV (an average of 28 years compared with 35 years amongst all others with HIV).

## **Where Do People with HIV Live in Victoria?**

As residential postcode has only been routinely collected as part of HIV notification since 1996, our data regarding people living with HIV across Victoria is limited. However, during 1999, 86 per cent of all notifications provided a valid postcode.

About three-quarters of individuals diagnosed with HIV during 1999 lived in metropolitan Melbourne with the largest number residing in the Southern Metropolitan Region. There were 17 people living in non-metropolitan Melbourne diagnosed with HIV during 1999.

## **Where Do Victorians Acquire HIV Infection?**

The probable place of acquiring infection was reported as within Australia for 98 (70 per cent) individuals diagnosed in 1999 and overseas for 32 (23 per cent) individuals. There were a further 11 people (eight per cent) for whom this information was unavailable. Approximately 87 per cent of the infections attributable to male-to-male sexual contact, and about 48 per cent of heterosexually acquired infections were reported to have been acquired in Australia.

## **How Many HIV Tests Are Conducted in Victoria Each Year?**

The annual number of HIV tests performed in Victoria peaked in 1994, with over 135,000 tests conducted. During 1999 there were 122,847 HIV tests undertaken in Victoria. This represents a 0.5 per cent decrease from 1998 HIV testing data. Approximately 42 per cent of the tests were from males and 44 per cent from females, and the gender was unavailable for the remaining 14 per cent. About 65 per cent of those tested were aged between 20 and 40 years. The reasons for testing included sexual contact or injecting drug use for 11 per cent and screening purposes (includes antenatal, immigration and insurance screening) for 14 per cent. There was no information available for 67 per cent of those tested.

# AIDS

## AIDS in Victoria During 1999

In Victoria during 1999, there were 44 people (43 males and one transgender person) notified with AIDS. Unfortunately, there is often a time delay between AIDS diagnosis and its subsequent notification to the Victorian AIDS Registry. As a result of this time delay, only 24 of the 44 people had actually been diagnosed with AIDS during 1999; the remaining 20 individuals had being diagnosed prior to 1999. Of these 24 individuals, 23 were males and one was transgender.

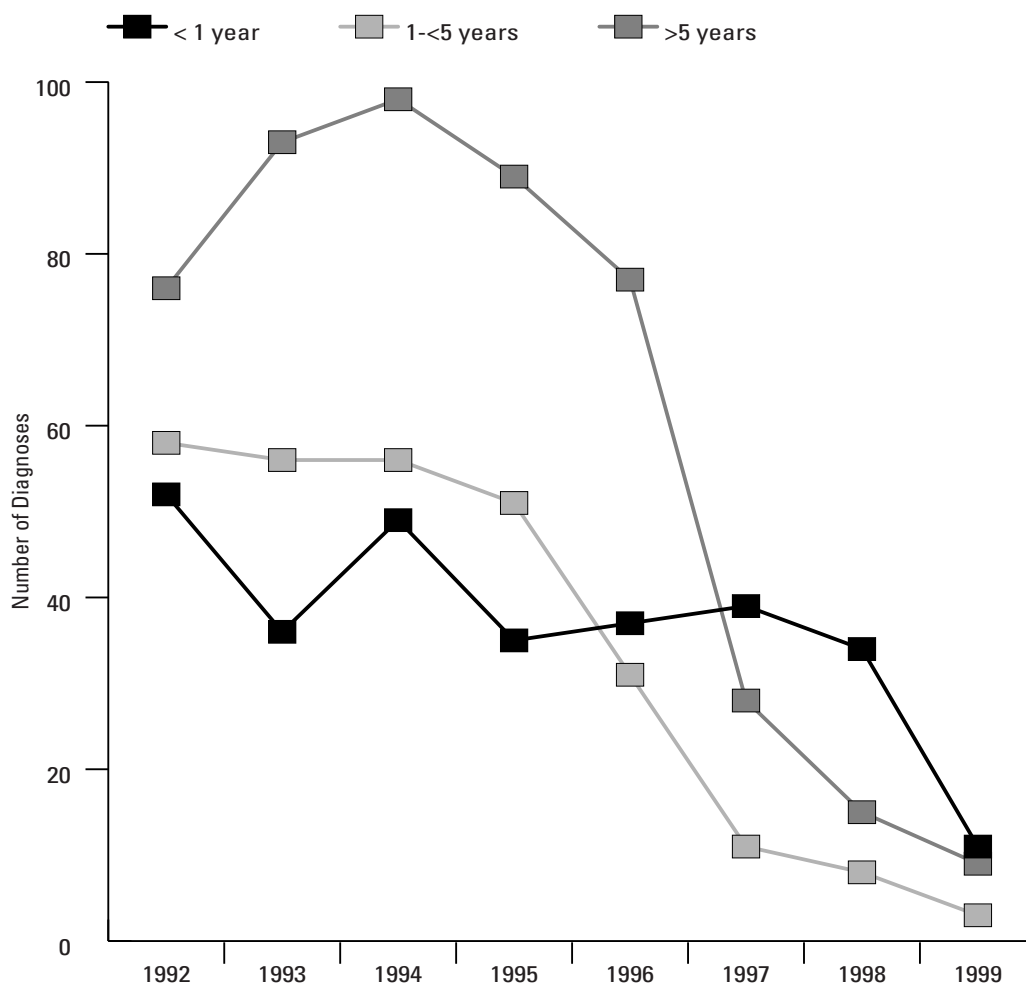
The proportion of AIDS diagnoses in which the exposure mechanism was reported as male-to-male sexual contact (homosexual and bisexual), has fallen from 81 per cent in 1996 to 63 per cent in 1999. The

proportion of AIDS diagnoses in which heterosexual contact was cited as the exposure mechanism has remained stable, accounting for 21 per cent of diagnoses in 1999. The median age for males diagnosed with AIDS during 1999 was 45 years compares with 43 years in 1998, and 38 years in 1997. The proportion of cases presenting with AIDS within one year of their first positive HIV diagnosis has fallen for the first time in three years from 59 per cent in 1998, to 46 per cent in 1999.

## What Is the Trend in Deaths Following AIDS Diagnosis?

There have been a total of 1403 deaths following AIDS diagnosis between 1983 and 1999 in Victoria

Figure 3: Time Between First HIV Diagnosis and Diagnosis of AIDS, Victoria, 1992-1998



(1345 males, 52 females and six transgender persons). The annual number of deaths peaked in 1993 and 1994, with 174 deaths notified in both years. This figure has since decreased markedly to 32 deaths in 1999. This is most likely attributable to the increased use of combination anti-retroviral therapies, following the introduction of the protease inhibitors in Australia in 1996. The survival time from AIDS diagnosis till death has increased to 3.6 years in 1999 from 2.9 years amongst those who died in 1998, and 1.5 years for those who died in 1994.

## **Is There a Changing Pattern of Illness Amongst Those Presenting with AIDS in Victoria?**

Approximately two-thirds of people diagnosed with AIDS each year in Victoria present with CD4 counts of less than 100 per  $\mu$ . This has been a consistent pattern over the last seven years. In Victoria during 1999, 14 people (58 per cent) had a CD4 count of less than 100 per  $\mu$ .

*Pneumocystis carinii* pneumonia (PCP) was an AIDS-defining illness in 29 per cent of cases diagnosed in 1999. This has decreased from 38 per cent of cases in 1998. The proportion of AIDS defining illness attributable to Kaposi's sarcoma has decreased from nearly 20 per cent in 1991 to eight per cent in 1999. Oesophageal candidiasis was responsible for 21 per cent of all AIDS defining illness in 1999.

## **People Living with AIDS in Victoria**

At the end of 1999 there were an estimated 377 people known to be living with AIDS in Victoria. Of these, 313 (83 per cent) reside in metropolitan Melbourne, and 39 (ten per cent) live in non-metropolitan Melbourne. The Southern Metropolitan Region of Melbourne has the largest number of people living with AIDS.



# Chlamydia

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*Genital chlamydia*, caused by the organism *Chlamydia trachomatis*, became a notifiable disease in Victoria in 1990. The number of chlamydia notifications has doubled since the early 1990s, and it is now the most commonly reported sexually transmissible infection in Victoria. This may be attributable to enhanced surveillance activities, the use of improved testing methods, increased awareness and/or increased testing. However, it may also be due to increased prevalence in the community.

During 1999 there were 2952 chlamydia notifications: 1767 females, 1182 males and three people for whom no gender was recorded. This represents an 18 per cent increase on the 1998 figures, and an 84 per cent increase on the 1996 figures. Although 60 per cent of notifications in 1999 were in women, the proportion of infections in males has increased over the last few years. The majority of infections (59 per cent) were in men and women aged between 20 and 29 years.

Additional demographic and behavioural information was available for 1712 (58 per cent) of notifications received during 1999. Of these, 82 per cent of males and 99 per cent of females identified as heterosexual, and 16 per cent of males identified as homosexual. Males were more likely to present with symptoms (74 per cent, compared with 44 per cent amongst females), and females were more likely to be diagnosed as a result of a STI screen (26 per cent, compared with nine per cent amongst males). Over 62 per cent of women believed that they had become infected from their regular partner, compared with 36 per cent of males. In comparison with females, males were more likely to state that they had acquired their infection from a casual partner.

# Gonorrhoea

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Gonorrhoea is a sexually transmissible infection caused by the bacterium *Neisseria gonorrhoeae*. Gonorrhoea typically causes a urethritis or cervicitis, but infection can also involve the rectum, pharynx or conjunctiva.

Cases of gonorrhoea included persons from whom *Neisseria gonorrhoeae* was isolated from one or more anatomic sites by a Victorian diagnostic laboratory, from a specimen collected in 1999. Multiple isolates from one or several anatomic sites of the one person within a month were regarded as a single episode of infection.

There is an ongoing outbreak of gonorrhoea in Victoria that is mainly concentrated amongst men who have sex with men. There were 702 gonorrhoea notifications in 1999 (14.9 per 100,000 population), the highest incidence since 1987. Six hundred and seventy cases (95 per cent) were male, and 32 (five per cent) were female. The increase in gonorrhoea notifications began suddenly in the second quarter of 1998, and was entirely due to an increase in cases affecting men.

Sexual orientation was reported for 626 male cases: 64 per cent were homosexual, four per cent bisexual, and 32 per cent heterosexual. Thirty out of the 32 female cases were reported to be heterosexual. Eighty-four per cent of cases with data on country of birth were born in Australia. Apart from two reports of gonococcal eye infection affecting children, all other notifications were persons aged 15 years or older. The mean age of female cases was 27 years; and the mean age of male cases was 32 years. Three-quarters of male cases were aged 20 to 39 years.

Cases of gonorrhoea were intensely concentrated in the inner southern, inner northern and inner western local government areas of metropolitan Melbourne. A third of all cases were from Port Phillip, Yarra or Stonnington.

Among heterosexual men, almost all isolates of *N. gonorrhoeae* were cultured from urethral swabs, whereas among homosexual and bisexual men, 71 per cent of isolates were from the urethra, 18 per cent the rectum and 11 per cent the pharynx. Among women, most isolates were from cervical or vaginal swabs. Isolates were cultured from two or more anatomic sites of 33 cases.

Adequate data on the reported sources of infection were available for 82 per cent of cases. Local casual sexual partners were most often cited as the source of infection for both heterosexual men and men who had sex with men (homosexual and bisexual men). Among women, the most commonly reported source of infection was a regular sexual partner.

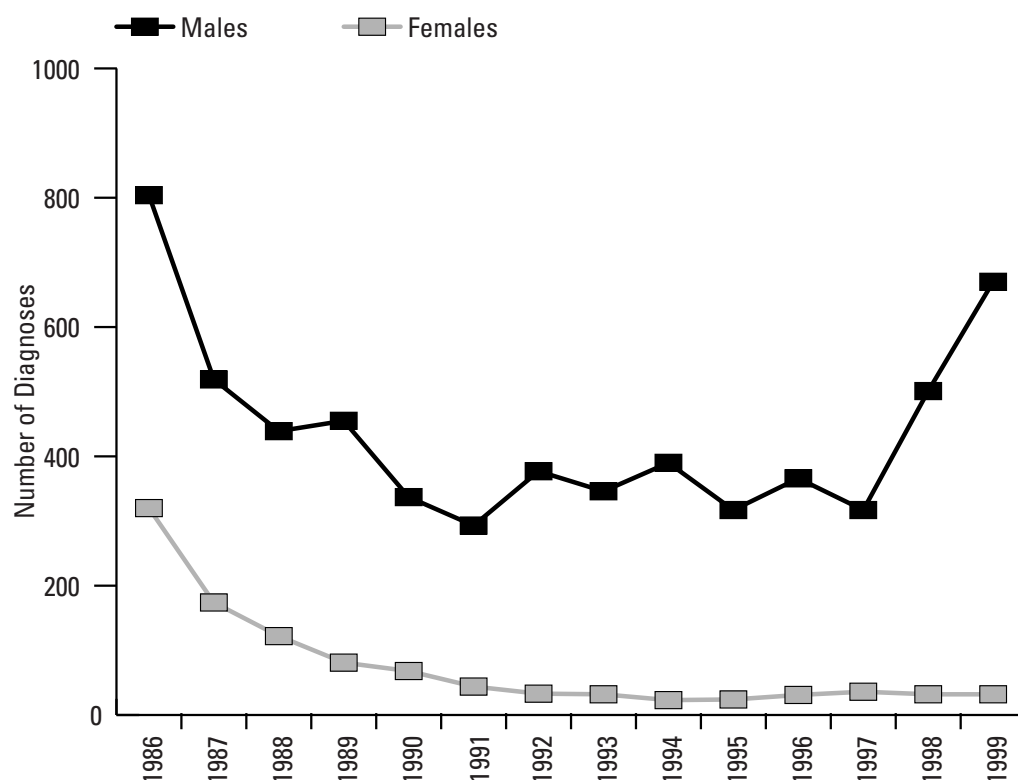
At least ten per cent of infections appeared to represent a second episode of infection within two years. All such cases were male and were more common among men who had sex with men (12 per cent) than heterosexual men (five per cent).

Isolates of *N. gonorrhoeae* fully sensitive to penicillin were uncommon, and 17 per cent of isolates were resistant to penicillin. Penicillinase-producing gonococci comprised seven per cent of isolates and were frequently acquired overseas, particularly heterosexually.

Ciprofloxacin resistance was detected in five per cent of isolates. This was relatively more common among overseas-acquired isolates (23 per cent) than Australian-acquired isolates (three per cent). This level of resistance was mostly associated with heterosexually-acquired infections.

During 1999 there emerged locally acquired isolates of *N. gonorrhoeae* demonstrating moderately reduced sensitivity to ciprofloxacin. These strains almost exclusively affected men, particularly men who had sex with men. These 'less sensitive' isolates should not be associated with treatment failure from an appropriate therapeutic dose of ciprofloxacin, but may represent a stage in the evolution of more resistant strains.

Figure 4: Number of *N.gonorrhoeae* Notifications by Sex, Victoria 1986-1999



## Syphilis

During 1999 there were 145 notifications of syphilis in Victoria. Of these, two were infectious syphilis, 77 non-infectious syphilis and 66 unspecified. No cases of congenital syphilis were notified in 1999.

## Specialist Clinics

### Melbourne Sexual Health Centre

During 1999, 13,977 people were seen at the Melbourne Sexual Health Centre (MSHC), with a total of 25,187 consultations. This represents an average of 1.8 per person. Forty-eight per cent of those attending were aged under 30 years, and more males than females attended (the male-to-female ratio was 1.3:1). The majority of people attending the MSHC reported heterosexual contact (59 per cent).

Approximately 22 per cent of males reported homosexual contact, and about 11 per cent of females reported a history of sex work. Genital warts was the most frequently diagnosed infection, with 55.6 infections per 1000 clients seen.

### Non-metropolitan STD Clinics

During 1999 there were 4398 visits by 2242 individual clients to the non-metropolitan STD clinics located in Ballarat, Bendigo, Geelong, Traralgon and Wodonga. Over four times as many females as males attended the clinics. The majority of clients were aged less than 30 years. Exposure category was unavailable for 70 per cent of clients seen, and of the remainder, over 26 per cent of clients identified as heterosexual. Another one per cent identified as homosexual. One per cent of clients reported a history of sex work, and a further one per cent reported injecting drug use. Two males and two females were found to be HIV positive, giving a rate of infection of 1.3 per 1000 clients amongst those attending these non-metropolitan STD clinics.

# Tables

## 1 HIV Infection in Victoria

Table 1: HIV Diagnoses, by Sex and Exposure Category, Victoria, 1983-1999

		Year of Diagnosis									Total	% Total
		<= 1991	1992	1993	1994	1995	1996	1997	1998	1999		
Total cases		2638	265	236	224	180	195	187	149	141	4215	100
Total males		2510	243	213	205	168	180	172	141	128	3960	94.0
Total females		92	21	21	19	12	15	14	8	12	214	5.1
Total transgender		12	1	1	0	0	0	0	0	0	14	0.3
Total sex unspecified		24	0	0	1	0	0	1	0	1	27	0.6
Males (%)		95	92	90	92	93	92	92	95	91	94	
Median age (years)	M	32	32	33	34	34	33	34	35	35	32	
	F	29	30	31	29	30	29	38	30	29	33	
<b>Males (exposure category)</b>											<b>% Males</b>	
Homosexual		1964	172	167	143	119	127	119	86	71	2968	74.9
Bisexual		139	23	6	24	16	20	17	12	7	264	6.6
Homosexual/bisexual and												
injecting drug use		113	11	10	12	7	10	8	9	12	192	4.8
Injecting drug use <sup>1</sup>		60	7	9	6	7	2	5	5	6	107	2.7
Heterosexual contact		39	25	11	9	10	10	14	16	16	150	3.8
Person from specified country		14	3	2	8	4	9	3	5	8	56	1.4
Haemophilia/coagulation disorder		98	0	0	0	0	0	0	1	1	100	2.5
Receipt of blood/tissue		16	1	2	0	0	0	0	0	1	20	0.5
Vertical transmission		1	0	0	0	1	0	0	0	0	2	0
Other/under investigation		0	0	0	1	0	1	0	0	5	7	0.3
Unavailable		66	1	6	2	4	1	6	7	1	94	2.3
<b>Females (exposure category)</b>											<b>% Females</b>	
Injecting drug use		22	2	3	2	1	2	2	1	0	35	16.4
Heterosexual contact		48	15	16	14	6	11	7	6	7	130	60.7
Person from specified country		5	2	1	2	4	2	4	1	3	24	11.2
Haemophilia/coagulation disorder		1	0	0	0	0	0	0	0	0	1	0.5
Receipt of blood/tissue		10	2	0	0	0	0	1	0	2	15	7.0
Vertical transmission		3	0	1	1	1	0	0	0	0	6	2.8
Other/under investigation		1	0	0	0	0	0	0	0	0	1	0.5
Unavailable		2	0	0	0	0	0	0	0	0	2	0.9

<sup>1</sup>Excludes males who also reported a history of male-to-male sexual contact

**Table 2: HIV Diagnoses, by Age and Sex, Victoria, 1983-1999**

Age Group (years)	1999				1983-99			
	Male	Female	Total	%	Male	Female	Total <sup>1</sup>	%
0-12	3	1	4	2.8	34	10	44	1.0
13-19	1	0	1	0.7	99	11	111	2.6
20-29	39	4	44	31.2	1444	91	1551	36.8
30-39	48	5	53	37.6	1397	54	1458	34.6
40-49	21	1	22	15.6	593	25	620	14.7
50-59	10	1	11	7.8	221	14	235	5.6
60+	6	0	6	4.3	71	8	79	1.9
Unavailable	0	0	0	0	101	1	117	2.8
<b>Total</b>	<b>128</b>	<b>12</b>	<b>141</b>	<b>100</b>	<b>3960</b>	<b>214</b>	<b>4215</b>	<b>100</b>

<sup>1</sup> Includes persons for whom sex was reported as transgender

**Table 3: HIV Diagnoses, by Age and Exposure Category, Victoria, 1999**

Exposure Category	Age Group (years)							Total
	0-12	13-19	20-29	30-39	40-49	50-59	60+	
Male Homosexual/Bisexual	0	0	29	28	12	6	3	78
IDU: Male Homosexual/Bisexual	0	1	4	6	1	0	0	12
IDU: Other	0	0	2	2	2	0	0	6
Heterosexual Contact	0	0	4	11	3	3	2	23
Person from specified country	0	0	3	5	1	2	0	11
Haemophilia/Coagulation disorder	1	0	0	0	0	0	0	1
Receipt of blood/tissue	1	0	0	1	1	0	0	3
Other/Unavailable	0	0	0	0	1	0	0	1
Under Investigation	2	0	2	0	1	0	1	6
<b>Total</b>	<b>4</b>	<b>1</b>	<b>44</b>	<b>53</b>	<b>22</b>	<b>11</b>	<b>6</b>	<b>141</b>
<b>%</b>	<b>2.8</b>	<b>0.7</b>	<b>31.2</b>	<b>37.6</b>	<b>15.6</b>	<b>7.8</b>	<b>4.3</b>	<b>100</b>

**Table 4: HIV Diagnoses, by Country of Birth and Probable Place Infection Acquired, Victoria, 1999**

Country of birth	Probable Place Infection Acquired				Total	% Total
	Australia	Overseas	Unavailable	Total		
Australia	83	6	2	91	64.5	
Other Oceania (incl. New Zealand)	1	2	1	4	2.8	
United Kingdom and Ireland	5	1	1	7	5.0	
Other Europe	4	3	2	9	6.4	
Africa	1	6	1	8	5.7	
Asia	2	12	0	14	9.9	
North America	0	1	0	1	0.7	
Middle and South America	1	0	0	1	0.7	
Unavailable	1	1	4	6	4.3	
<b>Total</b>	<b>98</b>	<b>32</b>	<b>11</b>	<b>141</b>	<b>100</b>	
<b>%</b>	<b>69.5</b>	<b>22.7</b>	<b>7.8</b>	<b>100</b>		

**Table 5: HIV Diagnoses, by Exposure Category and Probable Place Infection Acquired, Victoria, 1999**

Exposure Category	Probable Place Infection Acquired			Total	% Total
	Australia	Overseas	Unavailable		
Male homosexual contact	68	6	4	78	55.3
IDU: male homosexual contact	11	1	0	12	8.5
IDU: other	3	2	1	6	4.3
Heterosexual contact	11	11	1	23	16.3
Person from specified country	0	10	1	11	7.8
Haemophilia/coagulation disorder	0	1	0	1	0.7
Receipt of blood/tissue	2	1	0	3	2.1
Under Investigation	2	0	4	6	4.3
Other/unavailable	1	0	0	1	0.7
<b>Total</b>	<b>98</b>	<b>32</b>	<b>11</b>	<b>141</b>	<b>100</b>

**Table 6: HIV Diagnoses, by CD4 Count at Time of Diagnosis, Victoria, 1995-1999**

CD4 Count	Year of Diagnosis					Total	% Total
	1995	1996	1997	1998	1999		
Less than 100 per µl	28	37	36	26	16	143	16.8
100-199 per µl	12	14	18	7	10	61	7.2
200-499 per µl	47	58	51	48	50	254	29.8
500 per µl and over	51	64	56	45	40	256	30.0
Unavailable	42	22	26	23	25	138	16.2
<b>Total</b>	<b>180</b>	<b>195</b>	<b>187</b>	<b>149</b>	<b>141</b>	<b>852</b>	<b>100</b>

**Table 7: HIV Diagnoses, by Previous Testing History and Seroconversion Illness, Victoria, 1995-1999**

Time before HIV Diagnosis		Year of Diagnosis									
		1995	%	1996	%	1997	%	1998	%	1999	%
Prior negative or indeterminate HIV test	Less than 1 year	36	20	42	22	35	19	27	18	28	20
	1 to less than 3 years	38	21	41	21	33	18	25	17	25	18
	3 years and over	17	9	23	12	36	19	18	12	23	16
No recorded prior HIV test		89	50	89	45	83	44	79	53	65	46
	Less than 1 year	21	12	27	14	34	18	19	13	26	18
	1 to less than 3 years	6	3	6	3	6	3	2	1	4	3
No recorded prior seroconversion illness	3 years and over	3	2	0	0	3	2	1	1	0	0
		150	83	162	83	144	77	127	85	111	79
	Total of all diagnoses	180	100	195	100	187	100	149	100	141	100
Total with prior negative HIV test and/or seroconversion illness within 1 year of HIV diagnosis		42	23	53	27	49	26	35	23	41	29

**Table 8: HIV Diagnoses within 12 Months of a Previous Negative HIV Test and/or Seroconversion Illness, by Sex and Exposure Category, Victoria, 1999**

Exposure Category	Males	Females	Total	%
Homosexual	27	-	27	65.9
Bisexual	1	-	1	2.4
IDU: homosexual/bisexual	4	-	4	9.8
Heterosexual	2	2	4	9.8
Person from specified country	2	1	3	7.3
IDU: other	1	0	1	2.4
Receipt of blood/tissue	0	1	1	2.4
<b>Total</b>	<b>37</b>	<b>4</b>	<b>41</b>	<b>100</b>

**Table 9: HIV Diagnoses within 12 Months of a Previous Negative HIV Test and/or Seroconversion Illness, by Age and Sex, Victoria, 1999**

Age Group (years)	Males	Females	Total	%
0-12	0	1	1	2.4
13-19	1	0	1	2.4
20-29	17	1	18	43.9
30-39	13	1	14	34.1
40-49	2	0	2	4.9
50-59	3	1	4	9.8
60+	1	0	1	2.4
<b>Total</b>	<b>37</b>	<b>4</b>	<b>41</b>	<b>100</b>

**Table 10: HIV Diagnoses, by Sex and Reason for Testing, Victoria, 1999**

Reason for HIV Test	Males	Females	Total <sup>1</sup>	% Total
HIV-related symptoms	17	0	17	12.1
Sexual and/or injecting risk	65	1	66	46.8
Occupational	2	0	2	1.4
Screening				
–Antenatal	0	2	2	1.4
–Blood/tissue donation	1	1	2	1.4
–Prison	3	0	3	2.1
–Immigration	7	1	8	5.7
Confirmation of earlier diagnosis	2	2	4	2.8
Other	27	5	33	23.4
Unknown	4	0	4	2.8
<b>Total</b>	<b>128</b>	<b>12</b>	<b>141</b>	<b>100</b>

<sup>1</sup> Includes one person for whom sex was not reported

**Table 11: HIV Diagnoses, by Sex and Region<sup>1</sup>, Victoria, 1999**

Region <sup>1</sup>	Males	Females	Total <sup>2</sup>	% Total
Barwon–South Western	2	0	2	1.4
Grampians	5	0	5	3.5
Loddon–Mallee	2	0	2	1.4
Hume	4	0	4	2.8
Gippsland	4	0	4	2.8
Western Metropolitan	21	0	21	14.9
Northern Metropolitan	23	5	28	19.9
Eastern Metropolitan	12	1	13	9.2
Southern Metropolitan	38	4	42	29.8
Unavailable	17	2	20	14.2
<b>Total</b>	<b>128</b>	<b>12</b>	<b>141</b>	<b>100</b>

<sup>1</sup>Victorian Department of Human Services Region

<sup>2</sup> Includes one person for whom sex was not reported

**Table 12: HIV Testing, by Age and Sex, Victoria, 1999**

Age Group (years)	Males	Females	Unavailable	Total	% Total
0-12	665	463	239	1367	1.1
13-19	2517	3673	1189	7379	6.0
20-29	16085	20525	7240	43850	35.7
30-39	14005	16322	5645	35972	29.3
40-49	8381	6202	2210	16793	13.7
50-59	4630	2688	899	8217	6.7
60+ years	4256	2725	285	7266	5.9
Unavailable	772	1044	187	2003	1.6
<b>Total</b>	<b>51311</b>	<b>53642</b>	<b>17894</b>	<b>122847</b>	<b>100.0</b>

**Table 13: HIV Testing, by Sex and Reason for Test, Victoria, 1999**

Reason	Males	Females	Unavailable	Total	% Total
Sexual contact or injecting drug use	7292	5753	12	13057	10.6
Occupational	2938	3461	32	6431	5.2
Transfusion recipient	2059	2499	0	4558	3.7
Screening					
– Blood/tissue donors <sup>1</sup>	739	1244	0	1983	1.6
– Immigration	165	121	0	286	0.2
– Insurance	2617	723	13	3353	2.7
– Pregnancy/IVF	390	6468	1824	8682	7.1
– Prison	64	4	0	68	0.1
– Surgical	1108	975	8	2091	1.7
– Other <sup>2</sup>	214	132	2	348	0.3
Other reason/unavailable	33725	32262	16003	81990	66.7
<b>Total</b>	<b>51311</b>	<b>53642</b>	<b>17894</b>	<b>122847</b>	<b>100</b>

<sup>1</sup> Universal blood screening not included

<sup>2</sup> Includes renal dialysis and symptomatic screening



## 2 AIDS in Victoria

**Table 14: AIDS Diagnoses, by Sex and Exposure Category, Victoria, 1983-1999**

	Year of Diagnosis									Total	% Total
	<=1991	1992	1993	1994	1995	1996	1997	1998	1999		
Total cases	745	186	185	203	176	145	78	58	24	1800	100.0
Total males	726	183	169	189	164	139	71	57	23	1721	95.6
Total females	16	3	14	13	11	6	7	1	0	71	4.0
Total transgender	3	0	2	1	1	0	0	0	1	8	0.4
Males (%)	97	98	91	93	93	96	91	97	96	96	
Median age (years)											
	M	37	38	38	39	37	38	38	43	45	38
	F	26	27	36	31	33	38	37	27	32	33
<b>Males (exposure category)</b>											<b>% Males</b>
Homosexual	594	131	127	144	111	100	49	28	12	1296	75.3
Bisexual	71	25	13	25	17	17	5	6	3	182	10.6
Homo/bisexual and injecting drug use	26	10	17	9	13	13	4	2	0	94	5.5
Injecting drug use <sup>1</sup>	5	1	1	1	6	0	1	2	0	17	1.0
Heterosexual contact	10	8	4	4	8	4	3	11	5	57	3.3
Person from specified country	2	1	1	2	1	1	3	0	1	12	0.7
Haemophilia/coagulation disorder	12	3	6	3	8	2	1	1	0	36	2.1
Receipt of blood/tissue	4	2	0	0	0	1	0	1	0	8	0.5
Vertical transmission	0	0	0	0	0	0	0	0	0	0	0.0
Other/under investigation	2	2	0	0	0	1	4	2	2	13	0.8
Unavailable	0	0	0	1	0	0	1	4	0	6	0.3
<b>Females (exposure category)</b>											<b>% Females</b>
Injecting drug use	1	1	2	1	2	1	2	0	0	10	14.1
Heterosexual contact	8	2	10	9	7	5	4	1	0	46	64.8
Person from specified country	2	0	0	2	1	0	1	0	0	6	8.5
Haemophilia/coagulation disorder	1	0	0	0	0	0	0	0	0	1	1.4
Receipt of blood/tissue	12	0	2	1	0	0	0	0	0	5	7.0
Vertical transmission	0	0	0	0	1	0	0	0	0	1	1.4
Other/under investigation	0	0	0	0	0	0	0	0	0	0	0.0
Unavailable	2	0	0	0	0	0	0	0	0	2	2.8

<sup>1</sup> Excludes males who also reported a history of male-to-male sexual contact

**Table 15: Deaths Following AIDS Diagnosis, by Sex, Victoria, 1983-1999**

Year of Death	Males	Females	Transgender	Total	% Total
≤1991	444	7	1	452	32.2
1992	159	3	0	162	11.5
1993	170	4	0	174	12.4
1994	164	7	3	174	12.4
1995	149	15	0	164	11.7
1996	123	5	0	128	9.1
1997	66	6	0	72	5.1
1998	41	3	1	45	3.2
1999	29	2	1	32	2.3
<b>Total</b>	<b>1345</b>	<b>52</b>	<b>6</b>	<b>1403</b>	<b>100</b>

**Table 16: Deaths Following AIDS Diagnosis, by Year of Death and Year of AIDS Diagnosis, Victoria, 1983-1999**

Year of Death	Year of AIDS Diagnosis										Total
	≤ 1991	1992	1993	1994	1995	1996	1997	1998	1999	Unavailable	
≤ 1991	452										452
1992	127	35									162
1993	68	67	39								174
1994	38	34	61	41							174
1995	14	21	36	62	31						164
1996	12	8	14	25	41	28					128
1997	3	4	5	12	17	20	11				72
1998	3	1	3	8	8	6	6	9		1	45
1999	2	1	3	5	7	2	6	5	1	0	32
<b>Total</b>	<b>719</b>	<b>171</b>	<b>161</b>	<b>153</b>	<b>104</b>	<b>56</b>	<b>23</b>	<b>14</b>	<b>1</b>	<b>1</b>	<b>1403</b>

**Table 17: AIDS Diagnoses and Deaths, by Sex and Age, Victoria, 1983-1999**

Age Group (year)	Males			Females		
	AIDS Diagnoses		Deaths Following AIDS	AIDS Diagnoses		Deaths Following AIDS
	1999	1983-99	1983-99	1999	1983-99	1983-99
0-12	0	1	1	0	3	2
13-19	0	9	4	0	1	0
20-29	2	299	161	0	20	12
30-39	8	714	551	1	28	19
40-49	4	468	403	0	5	9
50-59	7	164	165	0	11	7
60+ years	2	66	60	0	3	3
Unavailable	0	0	0	0	0	0
<b>Total<sup>1</sup></b>	<b>23</b>	<b>1721</b>	<b>1345</b>	<b>1</b>	<b>71</b>	<b>52</b>

<sup>1</sup> Excludes those persons for whom sex was reported as transgender

**Table 18: AIDS Diagnoses, by Region of Residence<sup>1</sup> at Time of AIDS Diagnosis, Victoria, 1983-1999**

Region <sup>1</sup>	Year of Diagnosis										Total <sup>2</sup>	% Total
	≤1991	1992	1993	1994	1995	1996	1997	1998	1999			
Barwon-South Western	20	6	8	5	6	3	3	1	1	53	2.9	
Grampians	13	1	3	2	5	2	0	1	1	28	1.6	
Loddon-Mallee	15	2	7	9	6	3	0	4	1	47	2.6	
Hume	8	2	3	8	5	4	1	1	1	33	1.8	
Gippsland	2	4	1	3	0	6	0	3	2	21	1.2	
Western Metropolitan	77	20	19	22	15	17	10	9	5	194	10.8	
Northern Metropolitan	147	51	42	53	40	39	20	7	2	401	22.3	
Eastern Metropolitan	127	30	27	21	27	17	13	14	4	280	15.6	
Southern Metropolitan	313	58	71	75	59	46	26	13	5	666	37.0	
Unavailable	23	12	4	5	13	8	5	5	2	77	4.3	
<b>Total<sup>2</sup></b>	<b>745</b>	<b>186</b>	<b>185</b>	<b>203</b>	<b>176</b>	<b>145</b>	<b>78</b>	<b>58</b>	<b>24</b>	<b>1800</b>	<b>100.0</b>	

<sup>1</sup> Victoria Department of Human Services Region

<sup>2</sup> Includes persons from interstate notified with AIDS in Victoria

**Table 19: AIDS Diagnoses, by Year of Notification and Year of Diagnosis, Victoria, 1983-1999**

Year of AIDS Notification	Year of AIDS Diagnosis										Total
	≤1991	1992	1993	1994	1995	1996	1997	1998	1999		
≤1991	661										661
1992	46	146									192
1993	18	31	129								178
1994	8	5	36	152							201
1995	2	0	9	39	144						194
1996	4	3	6	7	26	122					168
1997	1	0	0	1	2	16	63				83
1998	3	1	5	4	2	6	11	46			79
1999	2	0	0	0	2	1	3	12	24		44
<b>Total</b>	<b>745</b>	<b>186</b>	<b>185</b>	<b>203</b>	<b>176</b>	<b>145</b>	<b>78</b>	<b>58</b>	<b>24</b>	<b>1800</b>	

**Table 20: AIDS Diagnoses, by Sex and Country of Birth, Victoria, 1983-1999**

Country of Birth	1999				1983-99			
	Males	Females	Total <sup>1</sup>	% Total	Males	Females	Total <sup>1</sup>	% Total
Australia	15	0	16	66.7	1287	53	1342	74.6
Other Oceania (incl. New Zealand)	0	0	0	0.0	49	2	53	2.9
United Kingdom and Ireland	1	0	1	4.2	101	3	105	5.8
Southern Europe	1	0	1	4.2	65	3	68	3.8
Other Europe	1	0	1	4.2	42	2	45	2.5
South East Asia	2	0	2	8.3	41	0	41	2.3
Other Asia	1	0	1	4.2	24	1	25	1.4
Africa	0	0	0	0.0	38	3	41	2.3
Northern America	0	0	0	0.0	24	2	26	1.4
Middle and South America	0	0	0	0.0	16	0	16	0.9
Unavailable	2	0	2	8.3	34	2	38	2.1
<b>Total<sup>1</sup></b>	<b>23</b>	<b>0</b>	<b>24</b>	<b>100</b>	<b>1721</b>	<b>71</b>	<b>1800</b>	<b>100</b>

<sup>1</sup> Includes persons for whom sex was reported as transgender

**Table 21: AIDS Diagnoses, by AIDS Defining Illness, Victoria, 1983-1999**

AIDS defining condition	Year of AIDS Diagnosis									Total	% Total <sup>1</sup>
	≤1991	1992	1993	1994	1995	1996	1997	1998	1999		
PCP	344	78	64	70	41	47	28	22	7	701	38.9
Kaposi's sarcoma	138	30	23	26	23	15	13	4	2	274	15.2
Oesophageal candidiasis	84	15	19	26	40	25	11	10	5	235	13.1
Herpes simplex	52	5	4	1	5	4	2	1	1	75	4.2
Toxoplasmosis	43	15	14	4	9	6	3	3	0	97	5.4
Mycobacterial Disease	48	16	23	20	20	16	12	3	3	160	8.9
Cytomegalovirus	40	7	4	8	7	14	1	3	1	85	4.7
Non-Hodgkin's lymphoma	31	9	9	14	8	16	4	4	2	97	5.4
HIV wasting disease	22	12	14	12	8	6	7	1	2	84	4.7
Cryptosporidiosis	23	2	5	8	8	3	1	3	0	53	2.9
Cryptococcus	16	3	8	12	9	2	1	3	3	57	3.2
HIV encephalopathy	9	4	4	10	3	6	3	5	0	44	2.4
Tuberculosis	0	0	0	1	0	0	2	2	1	6	0.3

<sup>1</sup> Proportion of all notifications with the AIDS defining illness. Individuals may have presented with more than one AIDS defining illness

**Table 22: AIDS Diagnoses, by CD4 Count, Victoria, 1994-1999**

CD4 Count	Year of AIDS Diagnosis											
	1994	%	1995	%	1996	%	1997	%	1998	%	1999	%
Less than 100 per µl	132	65.0	126	71.6	100	69.0	43	55.1	38	65.5	14	58.3
100-199 per µl	44	21.7	32	18.2	13	9.0	13	16.7	10	17.2	5	20.8
200-499 per µl	16	7.9	13	7.4	21	14.5	12	15.4	8	13.8	5	20.8
500 and over per µl	4	2.0	4	2.3	4	2.8	4	5.1	0	0	0	0
Unavailable	7	3.4	1	0.6	7	4.8	6	7.7	2	3.4	0	0
<b>Total</b>	<b>203</b>	<b>100</b>	<b>176</b>	<b>100</b>	<b>145</b>	<b>100</b>	<b>78</b>	<b>100</b>	<b>58</b>	<b>100</b>	<b>24</b>	<b>100</b>

**Table 23: AIDS Diagnoses, by Time between HIV Diagnosis and AIDS Diagnosis, Victoria, 1983-1999**

Time between HIV Diagnosis and AIDS Diagnosis	Year of Diagnosis										
	≤1991	1992	1993	1994	1995	1996	1997	1998	1999	Total	% Total
Less than 1 year	255	52	36	49	35	37	39	34	11	548	30.4
1 to less than 3 years	216	42	38	40	35	17	9	4	3	404	22.4
3 years to less than 5 years	90	16	18	16	16	14	2	4	0	176	9.8
5 years or more	135	76	93	98	89	77	28	15	9	620	34.4
Unavailable	49	0	0	0	1	0	0	1	1	52	2.9
<b>Total</b>	<b>745</b>	<b>186</b>	<b>185</b>	<b>203</b>	<b>176</b>	<b>145</b>	<b>78</b>	<b>58</b>	<b>24</b>	<b>1800</b>	<b>100.0</b>

**Table 24: People Living with AIDS, by Region<sup>1</sup>, Victoria, 1999**

<b>Region<sup>1</sup></b>	<b>Males</b>	<b>Females</b>	<b>Transgender</b>	<b>Total</b>	<b>% Total</b>
Barwon-South Western	7	0	0	7	1.9
Grampians	4	0	0	4	1.1
Loddon-Mallee	10	1	0	11	2.9
Hume	5	1	0	6	1.6
Gippsland	11	0	0	11	2.9
Western Metropolitan	40	3	1	44	11.7
Northern Metropolitan	86	3	0	89	23.6
Eastern Metropolitan	55	2	0	57	15.1
Southern Metropolitan	116	7	0	123	32.6
Unavailable	24	0	1	25	6.6
<b>Total</b>	<b>358</b>	<b>17</b>	<b>2</b>	<b>377</b>	<b>100</b>

<sup>1</sup>Victorian Department of Human Services Region

### 3 Chlamydia in Victoria

**Table 25: Chlamydia Notifications, by Sex, Victoria, 1990-1999**

Year of Notification	Males	Females	Total <sup>1</sup>	Male:Female Ratio
≤1992	715	1451	2166	0.5
1993	508	999	1507	0.5
1994	330	808	1138	0.4
1995	404	898	1302	0.5
1996	544	1058	1602	0.5
1997	803	1316	2221	0.6
1998	950	1542	2494	0.6
1999	1182	1767	2952	0.7
<b>Total<sup>1</sup></b>	<b>5436</b>	<b>9839</b>	<b>15382</b>	<b>0.6</b>

<sup>1</sup> Includes persons for whom sex was not reported

**Table 26: Chlamydia Notifications, by Sex and Age, Victoria, 1999**

Age Group (years)	Males	Females	Unavailable	Total	% Total
0-12	4	7	0	11	0.4
13-19	43	295	0	338	11.4
20-29	634	1099	2	1735	58.8
30-39	339	269	0	608	20.6
40-49	115	73	0	188	6.4
50-59	33	15	0	48	1.6
60+ years	13	5	0	18	0.6
Unavailable	1	4	1	6	0.2
<b>Total</b>	<b>1182</b>	<b>1767</b>	<b>3</b>	<b>2952</b>	<b>100.0</b>

**Table 27: Chlamydia Notifications, by Sex and Reason for Testing, Victoria, 1999**

Reason for Testing <sup>1</sup>	Males	Females	Total <sup>2</sup>	% Total
Symptomatic individual	542	428	971	56.7
Asymptomatic contact	116	182	298	17.4
Sexually transmissible infection screen	66	255	321	18.8
Pre termination screen	-	54	54	3.2
Abnormalities on examination	5	39	44	2.6
Other	4	12	16	0.9
Unavailable	1	7	8	0.5
<b>Total<sup>2</sup></b>	<b>734</b>	<b>977</b>	<b>1712</b>	<b>100.0</b>

<sup>1</sup> Based on the 58 per cent of notifications for whom additional information was obtained

<sup>2</sup> Includes one person for whom sex was not reported

**Table 28: Chlamydia Notifications, by Source Partner and Probable Place Infection Acquired, Victoria, 1999**

Sex	Source of infection	Probable Place Infection Acquired <sup>1</sup>			Total	% Total
		Australia	Overseas	Unavailable		
Male	Regular partner	244	14	9	267	36.3
	Casual partner	282	38	14	334	45.5
	Sex worker	6	9	1	16	2.2
	Unavailable	72	3	28	103	14.0
	Other	12	2	0	14	1.9
	<b>Total</b>		<b>616</b>	<b>66</b>	<b>52</b>	<b>734</b>
Female	Regular partner	552	28	25	605	61.9
	Casual partner	160	17	9	186	19.0
	Client	29	0	3	32	3.3
	Other	14	2	0	16	1.6
	Unavailable	101	3	34	138	14.1
	<b>Total</b>		<b>856</b>	<b>50</b>	<b>71</b>	<b>977</b>

<sup>1</sup> Based on the 58 per cent of notifications for whom additional information was obtained

**Table 29: Chlamydia Notifications, by Sex and Country of Birth, Victoria, 1999**

Country of Birth <sup>1</sup>	Males	Females	Total <sup>2</sup>	% Total
Australia	551	748	1300	75.9
Other Oceania (incl. New Zealand)	19	22	41	2.4
South East Asia	52	93	145	8.5
Other Asia	7	8	15	1.0
United Kingdom/Ireland	18	14	32	1.9
Southern Europe	6	3	9	0.5
Other Europe	22	32	54	3.2
North America	6	1	7	0.4
South/Middle America	3	4	7	0.4
Africa	7	4	11	0.6
Unavailable	43	48	91	5.3
<b>Total<sup>2</sup></b>	<b>734</b>	<b>977</b>	<b>1712</b>	<b>100</b>

<sup>1</sup> Based on the 58 per cent of notifications for whom additional information was obtained

<sup>2</sup> Includes one person for whom sex was not reported

**Table 30: Chlamydia Notifications, by Sex and Sexual Orientation, Victoria, 1999**

Sexuality <sup>1</sup>	Males	Females	Total <sup>2</sup>	% Total
Heterosexual	583	928	1512	88.3
Homosexual	113	2	115	6.7
Bisexual	11	6	17	1.0
Unavailable	27	41	68	4.0
<b>Total<sup>2</sup></b>	<b>734</b>	<b>977</b>	<b>1712</b>	<b>100</b>

<sup>1</sup> Based on the 58 per cent of notifications for which additional information was obtained

<sup>2</sup> Includes one person for whom sex was not reported

## 4 Gonorrhoea in Victoria

**Table 31: *N. gonorrhoeae* Diagnoses, by Sex, Victoria, 1986-1999**

	1986	1987	1988	1989	1990	1991	1992	1993	1994	1995	1996	1997	1998	1999
Male	804	519	439	455	337	293	377	346	390	317	366	317	501	670
Female	320	174	122	81	68	44	33	32	23	24	31	36	32	32
<b>Total</b>	<b>1124</b>	<b>693</b>	<b>561</b>	<b>536</b>	<b>405</b>	<b>337</b>	<b>410</b>	<b>378</b>	<b>413</b>	<b>341</b>	<b>397</b>	<b>353</b>	<b>533</b>	<b>702</b>

**Table 32: *N. gonorrhoeae* Diagnoses, by Sex and Age, Victoria, 1999**

Age Group (years)	Male	%	Female	%	Total	%
0-9	1	0.1	0	0.0	1	0.1
10-19	40	6.0	3	9.4	43	6.1
20-29	251	37.5	24	75.0	275	39.2
30-39	264	39.4	0	0.0	264	37.6
40-49	77	11.5	3	9.4	80	11.4
50-59	23	3.4	2	6.3	25	3.6
60+	10	1.5	0	0.0	10	1.4
Unavailable	4	0.6	0	0.0	4	0.6
<b>Total</b>	<b>670</b>	<b>100.0</b>	<b>32</b>	<b>100.0</b>	<b>702</b>	<b>100.0</b>

**Table 33: *N. gonorrhoeae* Diagnoses, by Sex, Reported Sexual Orientation and Site of Isolation<sup>1</sup>, Victoria, 1999**

Sex	Sexuality	Rectum	Urethra	Pharynx	Cervix and/ or vagina	Other	Total
Male	Heterosexual	2	197	3	-	1	203
	Homosexual or bisexual	81	320	51	-	1	453
	Unavailable	0	43	0	-	1	44
Female	Heterosexual	0	0	3	31	0	34
	Homosexual or bisexual	0	0	0	1	0	1
	Unavailable	0	0	0	1	0	1
<b>Total</b>		<b>83</b>	<b>560</b>	<b>57</b>	<b>33</b>	<b>3</b>	<b>736</b>

<sup>1</sup> Isolates include 34 isolates cultured from more than one anatomic site during a single episode of infection

**Table 34: *N. gonorrhoeae* Diagnoses, by Reported Sexual Orientation, Source Partner and Place Infection Acquired<sup>1</sup>, Victoria, 1999**

Sex	Sexual Orientation	Reported source partner	Reported location acquired	
			Australia	Overseas
Male	Heterosexual	Casual partner	95	20
		Regular partner	28	4
		Sex worker	7	15
		Client (of sex worker case)	0	0
	Homosexual or bisexual	Casual partner	305	2
		Regular partner	72	1
		Sex worker	3	1
Female	All	Casual partner	4	1
		Regular partner	15	0
		Sex worker	1	0
		Client (of sex worker case)	1	0

<sup>1</sup> Table includes data for the 576 cases (82%) with complete data on source partner, location of acquisition, and sex and sexual orientation of case



**Table 35: *N. gonorrhoeae* Diagnoses and Rates of Infection, by Region<sup>1</sup>, Victoria, 1999**

Region <sup>1</sup>	Number of Notifications	Rate per 100 000 <sup>2</sup>
Barwon-South Western	5	1.5
Grampians	3	1.5
Loddon-Mallee	8	2.9
Hume	6	2.4
Gippsland	2	0.9
Western Metropolitan	108	18.1
Northern Metropolitan	182	24.0
Eastern Metropolitan	76	7.9
Southern Metropolitan	264	24.0

<sup>1</sup>Victorian Department of Human Services Region

<sup>2</sup>Based on 1998 ABS local government area population estimates, including only cases for which a Victorian postcode of residence was provided

**Table 36: Susceptibility of *N. gonorrhoeae* Isolates<sup>1</sup> to Penicillin, Victoria, 1990-1999**

Year of isolation	Penicillin Sensitivity (Minimum Inhibitory Concentration, mcg/mL)				Penicillinase producing <i>N. gonorrhoeae</i> (PPNG)	
	Sensitive ( $\leq 0.03$ )	Less Sensitive (0.06(0.5))	Resistant ( $\geq 1.0$ )	Total Tested	PPNG	%
1990	49	264	104	417	78	18.7
1991	86	195	70	351	69	17.1
1992	237	137	84	458	65	14.2
1993	177	83	134	394	47	11.9
1994	125	186	118	429	39	9.1
1995	32	219	91	342	54	15.8
1996	64	213	137	414	44	10.6
1997	82	192	92	366	40	10.9
1998	11	348	194	553	34	6.1
1999	68	539	127	734	55	7.5

<sup>1</sup>Includes isolates cultured from more than one anatomic site during a single episode of infection

**Table 37: Susceptibility of *N. gonorrhoeae* Isolates<sup>1</sup> to Penicillin, Tetracycline and Ciprofloxacin, by Sex, Reported Sexual Orientation and Place Acquired Infection, Victoria, 1999**

Sex	Sexual Orientation	Place Infection Acquired	Ciprofloxacin Sensitivity (Minimum Inhibitory Concentration, mcg/mL)				Total Isolates Tested	
			PPNG <sup>2</sup>	TRNG <sup>3</sup>	Sensitive (<=0.03)	Less sensitive (0.06(0.5)		Resistant (>=1.0)
Male	Homosexual or bisexual	Australia	0	8	348	94	1	443
		Overseas	2	1	5	0	1	6
		Unknown	0	0	3	0	0	3
Male	Heterosexual	Australia	15	13	115	20	13	148
		Overseas	24	14	26	9	12	47
		Unknown	1	0	5	1	1	7
Male	Unknown	Australia	1	1	8	7	1	16
		Overseas	2	1	1	1	0	2
		Unknown	3	1	19	4	3	26
Female	All	Australia	7	7	27	1	3	31
		Overseas	0	0	2	0	0	2
		Unknown	0	2	3	0	0	3
<b>Total</b>			<b>55</b>	<b>48</b>	<b>562</b>	<b>137</b>	<b>35</b>	<b>734</b>

<sup>1</sup> Includes isolates cultured from more than one anatomic site during a single episode of infection

<sup>2</sup> Penicillinase-producing *N. gonorrhoeae*

<sup>3</sup> Tetracycline-resistant *N. gonorrhoeae*

## 5 Syphilis in Victoria

**Table 38: Syphilis Diagnoses, by Sex, Age and Disease Status, Victoria, 1999**

Age Group (years)	Infectious Syphilis <sup>1</sup>			Non-infectious Syphilis			Unspecified Syphilis		
	Males	Females	Total	Males	Females	Total <sup>2</sup>	Males	Females	Total <sup>2</sup>
0-12	0	0	0	0	0	0	0	0	0
13-19	0	0	0	0	1	1	0	0	0
20-29	1	0	1	3	10	13	2	3	5
30-39	0	1	1	6	1	7	6	8	15
40-49	0	0	0	7	5	12	6	1	7
50-59	0	0	0	12	1	14	7	2	11
60+ years	0	0	0	22	8	30	19	7	28
<b>Total</b>	<b>1</b>	<b>1</b>	<b>2</b>	<b>50</b>	<b>26</b>	<b>77</b>	<b>40</b>	<b>21</b>	<b>66</b>

<sup>1</sup> Includes syphilis specified as primary, secondary or early latent

<sup>2</sup> Includes persons for whom sex was not reported

**Table 39: Syphilis Diagnoses, by Sex and Disease Status, Victoria, 1999**

Disease Status	Males	Females	Total <sup>1</sup>	% Total
Primary	1	1	2	1.4
Secondary	0	0	0	0
Early latent	0	0	0	0
Late latent	9	5	14	9.7
Latent (unknown duration)	34	17	52	35.9
Neurosyphilis	1	0	1	0.7
Other late syphilis	6	4	10	6.9
Congenital syphilis	0	0	0	0
Syphilis unspecified	40	21	66	45.5
<b>Total<sup>1</sup></b>	<b>91</b>	<b>48</b>	<b>145</b>	<b>100</b>

<sup>1</sup> Includes six persons for whom sex was not reported

**Table 40: Syphilis Diagnoses, by Sex and Reason for Testing, Victoria, 1999**

Reason for Testing	Males	Females	Total <sup>1</sup>	% Total
Sexually transmissible infection screen	20	8	29	20.0
Antenatal screening	-	10	10	6.9
Blood donor screening	4	0	4	2.8
Refugee screening	2	0	2	1.4
Symptomatic individual	20	2	22	15.2
Asymptomatic contact	2	2	4	2.8
Other	2	3	5	3.4
Unavailable	41	23	69	47.6
<b>Total<sup>1</sup></b>	<b>91</b>	<b>48</b>	<b>145</b>	<b>100</b>

<sup>1</sup> Includes six persons for whom sex was reported as transgender and eight for whom sex was not reported

## 6 Other Sexually Transmissible Infections

*Table 41: Notifications of Other Sexually Transmissible Infections, by Sex and Year of Diagnosis, Victoria, 1992-1999*

Year of Diagnosis	Chancroid	Donovanosis	Lymphogranuloma Venereum	Total
1992	1	0	3	4
1993	0	0	0	0
1994	0	0	2	2
1995	2	0	1	3
1996	0	0	0	0
1997	0	0	0	0
1998	0	0	0	0
1999	0	0	0	0
<b>Total</b>	<b>3</b>	<b>0</b>	<b>6</b>	<b>9</b>
Males	2	0	5	7
Females	1	0	1	2
<b>Total</b>	<b>3</b>	<b>0</b>	<b>6</b>	<b>9</b>

## 7 Melbourne Sexual Health Centre

**Table 42: Clients Seen and Clinic Attendances, by Age and Sex, Melbourne Sexual Health Centre, Victoria, 1999**

Age Group (years)	Clients Seen				Clinic Attendances				Mean Visits/Person
	Males	Females	Total	% Total	Males	Females	Total	% Total	
13-19	151	341	492	3.5	239	511	750	3.0	1.5
20-29	2838	3358	6196	44.3	4881	5696	10577	42.0	1.7
30-39	2755	1594	4349	31.1	5284	2743	8027	31.9	1.8
40-49	1272	648	1920	13.7	2559	1086	3645	14.5	1.9
50-59	544	167	711	5.1	1292	264	1556	6.2	2.2
60+ years	249	51	300	2.1	547	74	621	2.5	2.1
Unavailable	4	5	9	0.1	4	7	11	0	1.2
<b>Total</b>	<b>7813</b>	<b>6164</b>	<b>13977</b>	<b>100</b>	<b>14806</b>	<b>10381</b>	<b>25187</b>	<b>100</b>	<b>1.8</b>

**Table 43: Clients Seen and Clinic Attendances, by Sex and Exposure Category, Melbourne Sexual Health Centre, Victoria, 1999**

	Clients Seen				Clinic Attendances				Mean Visits/Person
	Males	Females	Total	% Total	Males	Females	Total	% Total	
Male homosexual	1238	-	1238	8.8	3031	-	3031	12.0	2.4
Male bisexual	491	-	491	3.5	1000	-	1000	4.0	2.0
IDU: male homosexual/ bisexual	64	-	64	0.5	182	-	182	0.7	2.8
IDU: female sex worker	-	8	8	0.1	-	13	13	0.1	1.6
IDU: other	140	93	233	1.7	241	160	401	1.6	1.7
Female sex worker	-	669	669	4.8	-	1180	1180	4.7	1.8
Heterosexual sex overseas	243	100	343	2.4	440	178	618	2.4	1.8
Heterosexual: other	3915	4006	7921	56.7	6588	6812	13400	53.2	1.7
Other/unavailable	1722	1288	3010	21.5	3324	2038	5362	21.3	1.8
<b>Total</b>	<b>7813</b>	<b>6164</b>	<b>13977</b>	<b>100</b>	<b>14806</b>	<b>10381</b>	<b>25187</b>	<b>100</b>	<b>1.8</b>

**Table 44: Clients Diagnosed, by Sex and Infection Diagnosed, Melbourne Sexual Health Centre, Victoria, 1999**

Diagnosis	Males	Females	Total	Rate per 1000 clients seen
HIV	12	2	14	1.0
Syphilis	7	2	9	0.6
Chlamydia	138	96	234	16.7
Gonorrhoea	64	5	69	4.9
Hepatitis B <sup>1</sup>	29	14	43	3.1
Genital herpes	192	135	327	23.4
Genital warts	546	231	777	55.6
Non-specific urethritis	359	5	364	26.0

<sup>1</sup> Includes hepatitis B acute and carrier

## 8 Non-metropolitan STD Clinics

**Table 45: Clients Seen and Clinic Attendances, by Clinic and Sex, Non-metropolitan STD Clinics, Victoria, 1999**

Clinic	Clients Seen				Clinic Attendances				Mean Visits/Client
	Males	Females	Total <sup>1</sup>	% Total	Males	Females	Total <sup>1</sup>	% Total	
Ballarat	211	1356	1577	70.3	350	1906	2285	52.0	1.4
Bendigo	27	156	184	8.2	133	307	442	10.1	2.4
Geelong	57	48	108	4.8	172	123	299	6.8	2.8
Traralgon	43	38	83	3.7	97	117	216	4.9	2.6
Wodonga	64	226	290	12.9	131	1025	1156	26.3	4.0
<b>Total<sup>1</sup></b>	<b>402</b>	<b>1824</b>	<b>2242</b>	<b>100</b>	<b>883</b>	<b>3478</b>	<b>4398</b>	<b>100</b>	<b>2.0</b>

<sup>1</sup> Includes individuals for whom no sex was reported

**Table 46: Clients Seen and Clinic Attendances, by Age and Sex, Non-metropolitan STD Clinics, Victoria, 1999**

Age Group (years)	Clients Seen				Clinic Attendances				Mean Visits/Client
	Males	Females	Total <sup>1</sup>	% Total	Males	Females	Total <sup>1</sup>	% Total	
0-12	7	8	15	0.7	13	21	34	0.8	2.3
13-19	50	621	676	30.2	88	996	1091	24.8	1.6
20-29	150	700	853	38.0	267	1309	1584	36.0	1.9
30-39	108	200	308	13.7	230	454	690	15.7	2.2
40-49	47	157	205	9.1	108	327	438	10.0	2.1
50-59	10	63	74	3.3	89	115	152	3.5	2.1
60+ years	2	17	19	0.8	10	34	44	1.0	2.3
Unavailable	28	58	92	4.1	78	222	365	8.3	4.0
<b>Total</b>	<b>402</b>	<b>1824</b>	<b>2242</b>	<b>100</b>	<b>883</b>	<b>3478</b>	<b>4398</b>	<b>100</b>	<b>2.0</b>

<sup>1</sup> Includes individuals for whom no sex was reported

**Table 47: Clients Seen and Clinic Attendances, by Exposure Category and Sex, Non-metropolitan STD Clinics, Victoria, 1999**

Exposure Category	Clients Seen				Clinic Attendances				Mean Visits/Client
	Males	Females	Total <sup>1</sup>	% Total	Males	Females	Total <sup>1</sup>	% Total	
Homosexual contact	22	4	26	1.2	100	10	110	2.5	4.2
Bisexual contact	2	1	3	0.1	10	6	16	0.4	5.3
Heterosexual contact	152	438	590	26.3	367	1453	1820	41.4	3.1
Sex worker	2	18	20	0.9	7	74	81	1.8	4.1
IDU: homosexual/ bisexual	4	0	4	0.2	22	0	22	0.5	5.5
IDU: sex worker	0	1	1	0.0	0	4	4	0.1	4.0
IDU: other	10	11	21	0.9	28	25	53	1.2	2.5
Unavailable	210	1351	1577	70.3	349	1906	2292	52.1	1.5
<b>Total<sup>1</sup></b>	<b>402</b>	<b>1824</b>	<b>2242</b>	<b>100</b>	<b>883</b>	<b>3478</b>	<b>4398</b>	<b>100</b>	<b>2.0</b>

<sup>1</sup> Includes individuals for whom no sex was reported

**Table 48: Clients Seen with Genital HSV Infection or Genital Warts Infection, by Exposure Category and Sex, Non-metropolitan STD Clinics, Victoria, 1999**

Exposure Category	Clients with Genital Warts				Clients with Genital HSV			
	Males	Females	Total	Rate <sup>1</sup>	Males	Females	Total	Rate <sup>1</sup>
Bisexual contact	1	0	1	0.4	0	0	0	0.0
Heterosexual contact	7	17	24	10.7	3	9	12	5.4
Sex worker	0	1	1	0.4	1	0	1	0.4
IDU: homosexual/ bisexual	0	0	0	0.0	1	0	1	0.4
IDU: sex worker	0	0	0	0.0	0	0	0	0.0
IDU: other	1	2	3	1.3	0	0	0	0.0
Unavailable	43	47	90	36.9	6	7	13	5.8
<b>Total</b>	<b>52</b>	<b>67</b>	<b>119</b>	<b>53.1</b>	<b>11</b>	<b>16</b>	<b>27</b>	<b>12.0</b>

<sup>1</sup> Rate per 1000 clients seen

**Table 49: Clients Seen with Genital Chlamydia Infection or HIV Infection, by Exposure Category and Sex, Non-metropolitan STD Clinics, Victoria, 1999**

Exposure Category	Clients with Genital Chlamydia				Clients with HIV			
	Males	Females	Total	Rate <sup>1</sup>	Males	Females	Total	Rate <sup>1</sup>
Homosexual contact	0	0	0	0.0	1	0	1	0.4
Bisexual contact	0	1	1	0.4	0	0	0	0.0
Heterosexual contact	0	2	2	0.9	0	2	2	0.9
Sex worker	0	0	0	0.0	0	0	0	0.0
IDU: homosexual/bisexual	0	0	0	0.0	0	0	0	0.0
IDU: sex worker	0	0	0	0.0	0	0	0	0.0
IDU: other	0	0	0	0.0	0	0	0	0.0
Unavailable	3	12	15	6.7	0	0	0	0.0
<b>Total</b>	<b>3</b>	<b>15</b>	<b>18</b>	<b>8.0</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>1.3</b>

<sup>1</sup> Rate per 1000 clients seen

## Resources

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The following resources may be of use to readers of this report. This list is not comprehensive, but merely a guide to some of the assistance available.

### **Guidelines for Treatment of STDs**

Guidelines for the treatment of STDs can be found in the Venereology Society of Victoria's publication *Treatment of Sexually Transmitted Diseases Including HIV/AIDS*.

### **Partner Notification**

Partner notification is an effective public health intervention in the control of STIs. If a person is diagnosed as having an STI, the diagnosing practitioner has a responsibility to ensure that the sexual contacts are followed up. Advice and assistance in relation to partner notification are available from the Department of Human Services through its partner notification officers, who can be contacted on (03) 9347 1899.

### **Department of Human Services**

Information and pamphlets on HIV/AIDS, STDs and other bloodborne viruses, and additional copies of this report and the quarterly STD Surveillance Reports, may be obtained through the Health Protection Services Unit, Department of Human Services on (03) 9637 4184.

### **Macfarlane Burnet Centre for Medical Research**

The Epidemiology and Social Research Unit of the Macfarlane Burnet Centre conducts surveillance for HIV/AIDS and other STIs on behalf of the Department of Human Services. Additional information about surveillance systems for these diseases can be obtained from the Unit on (03) 9282 2290.

### **Notification of STIs**

Under the Health Act 1958 and the Health (Infectious Diseases) Regulations 1990, it is incumbent upon diagnosing practitioners and laboratories to notify newly discovered cases of certain STIs. Details of the notification system may be obtained from the Manager, Surveillance and Risk Assessment Unit, Department of Human Services on (03) 9637 4121.

### **Training in HIV and Other STIs for Health Professionals**

Short, intensive training courses in the diagnosis and management of HIV/AIDS and hepatitis C are available for general practitioners and are coordinated through the AIDS Prevention and Support Unit in Dandenong. For further information contact the HIV/GP Education Program on (03) 9794 0790 or the Health Protection Services Unit of the Department of Human Services on (03) 9637 4184.

Monash University offers a postgraduate Diploma of Venereology, which is designed to give medical practitioners specialised training in the diagnosis and management of STIs. Scholarships are available to applicants from rural Victoria. For further information contact Dr Stella Heley at the Melbourne Sexual Health Centre on (03) 9347 0244.

The Centre for Social Health runs training courses for people seeking accreditation to provide pre- and post-HIV antibody test counselling. The centre also conducts courses and seminars in the prevention of HIV/AIDS and other bloodborne viruses. For further information contact the Centre on (03) 9479 3700

### **Melbourne Sexual Health Centre and Other Clinical STI Services**

The Melbourne Sexual Health Centre provides testing, diagnosis, treatment and counselling services for all STIs, including free public HIV testing. Services are free and confidential. Medical, nursing and counselling staff are available to provide advice/assistance to practitioners in the field. The centre is located at 580 Swanston Street, Carlton and



can be contacted on (03) 9347 0244 or 1800 032 017 (TTY [03] 9347 8619).

Other centres that also provide free HIV testing, clinical services and counselling in relation to STIs include the following services:

**Action Centre**

277 Flinders Lane, Melbourne  
(03) 9654 4766 or 1800 013 952

**Alfred Hospital Infectious Diseases Clinic**

Commercial Road, Prahran  
(03) 9276 6081

**Frankston Hospital Sexual Health Clinic**

Hastings Road, Frankston  
(03) 9784 7650

**Royal Melbourne Hospital, Victorian Infectious Diseases Service**

Grattan Street, Parkville  
(03) 9342 7212

**Royal Women's Hospital, Communicable Diseases Clinic, and the Chemical Dependency Unit**

132 Grattan Street, Carlton  
(03) 9344 2000

**Victorian AIDS Council/Gay Men's Health Centre, the Centre Clinic Northcote, Northcote Community Health Centre**

42 Separation Street, Northcote  
(03) 9481 7155

**Centre Clinic St Kilda**

46 Acland Street, St Kilda  
(03) 9525 5866 or 1800 134 840

**Western Hospital, STD Clinic**

Gordon Street, Footscray  
(03) 9319 6666

**Ballarat Community Health Centre**

710 Sturt St, Ballarat  
(03) 5333 1635

**Community Health Bendigo**

Seymour Street, Eaglehawk  
(03) 5434 4300

**Geelong STD/HIV Clinic, Geelong Hospital Eastern Annexe**

Geelong  
(03) 5226 7802

**Traralgon STD Service, La Trobe Community Health Services**

11 Seymour Street, Traralgon  
(03) 5174 9800

**Wodonga STD/HIV Clinic, Vermont Street Health Clinic**

4 Benson Court, Wodonga  
(02) 6056 1589

In addition to these centres, free HIV testing is available from medical practitioners outside the public hospital system for individuals who fall into one of the following groups: men who have sex with men, sex workers, IDUs, patients with a laboratory confirmed notifiable STI, homeless youths, and men and women who have unsafe sex with any of the aforementioned. For the test to be performed without charge the risk category must be specified on the pathology request form. Further information about eligibility for free HIV testing can be obtained directly from testing laboratories, or from the Health Protection Services Unit, Department of Human Services on (03) 9637 4184.