

HIV and STI MANAGEMENT

Urethral Discharge (Urethritis)

Patient complains of urethral discharge and painful urination

History, examine genitals for discharge and ulcers

Treat all patients for urethritis and 4 C's
Advise to return in 7 days

If ulcer present

Follow GUD chart

If no improvement, treat for trichomonas + 4C's. Advise to return in 7 days.

If no improvement, refer

Drugs for Urethritis

Ciprofloxacin 500mg tab as a single dose

Doxycyclin 100mg tab orally twice daily for 7 days

Drugs for Trichomoniasis

Metronidazole 2gm orally in a single dose

Abnormal Vaginal Discharge

Patient complains of vaginal discharge (abnormal in amount, color or odor or vulva itching)

Lower Abdominal pain (LAP)?

No → Risk Assessment
Yes → LAP Flowchart

Risk Assessment

This is positive if: Male partner has urethral discharge OR Woman answers yes to any 2 of the following:

- Unmarried
- Under 21 and sexually active
- New partner in past 3 months

Risk +ve

Treat for Cervicitis & Vaginitis & 4C's

No improvement in 7 days → Refer

Risk -ve

Treat for Vaginitis

No improvement in 7 days → Treat for cervicitis and 4 C's

Drug for Cervicitis

Ciprofloxacin 500mg tab, single dose
Doxycyclin 100mg tab orally twice daily for 7 days

Drugs for Vaginitis

Nystatin vaginal pessaries 100,000U inserted every night for 14 days
Metronidazole 2g orally in a single dose

Female Lower abdominal pain

Patient complains of Lower abdominal pain (LAP)

Take history, body temperature and examine abdomen

Are any of the following present?

- Late/missed menses
 - Recent delivery/abortion
 - Vaginal bleeding
 - Abdominal guarding
 - Rebound tenderness
- Yes → Refer
No → Perform Genital Examination

Perform Genital Examination

Are any of the following present?

- Pain on moving cervix
 - Vaginal discharge
 - Male partner has urethral discharge
 - Painful coitus
 - Temp > 38°C
- Yes → Refer if LAP is severe
No → Refer

Treat for Pelvic Inflammatory Disease (PID) + 4 C's
Review in three days

Patient has improved → Refer

Drug treatment for PID

Ciprofloxacin 500mg tab as a single oral dose
Doxycycline 100mg tab orally twice daily for 7 days
Metronidazole 400mg tab orally twice daily

Genital Ulcer Disease

Patient complains of genital sore or ulcer

Take history (sexual exposure) and examine patient.

Sore ulcers present

Yes → Group of painful blisters (often recurrent) present

Treat for GUD + 4C's
Advise to return in 7 days

Yes → Manage for Herpes + 4 C's. Advise to return in 7 days

If no improvement or clinical deterioration present, REFER

Drugs for GUD

Benzathine Penicilin G 2.4MU IM in a single session
Erythromycin 500mg tab orally 6 hourly (4 times a day for 7 days)

Drugs for Herpes

Analgesics, keep lesions dry and avoid sex during relapse.