

## 2. Clinical Spectrum of RTIs/STIs

Clients suspected of having RTIs/STIs usually present with one or more of the following complaints:

- (i) Vaginal or urethral discharge;
- (ii) Vesicular and/or non-vesicular genital ulcers;
- (iii) Inguinal bubo;
- (iv) Lower abdominal and/or scrotal pain; and
- (v) Genital skin conditions.

The following table depicts presenting symptoms, signs, clinical conditions, and causative organisms.

Table 2.1: Causative organisms and presenting symptoms & signs of specific RTIs/STIs

RTI/STI	Causative Organism	Symptoms/Signs
<i>Presenting symptoms: Vaginal/Urethral Discharge and or burning micturition</i>		
Gonorrhea	Neisseria gonorrhoea	<p>Women</p> <ul style="list-style-type: none"> <li>• Purulent (containing mucopus) vaginal discharge</li> <li>• Pain or burning on passing urine (dysuria)</li> <li>• Inflamed (red and tender) urethral opening</li> </ul> <p>Men</p> <ul style="list-style-type: none"> <li>• Pain or burning on passing urine (dysuria)</li> <li>• Purulent (containing mucopus) urethral discharge (drip).</li> <li>• Infection of the epididymis (coiled tube leading from the testis to the vas deferens)</li> <li>• Urethral abscess or narrowing (stricture)</li> </ul>
Trichomoniasis	Trichomonas vaginalis	<ul style="list-style-type: none"> <li>• May produce few symptoms in either sex</li> <li>• Women often will have a frothy (bubbly), foul-smelling, greenish vaginal discharge</li> <li>• Men may have a urethral discharge</li> </ul>
Chlamydia	Chlamydia trachomatis	<p>Women</p> <ul style="list-style-type: none"> <li>• Produces few symptoms, even with upper genital tract infection (silent PID)</li> <li>• Purulent cervical discharge, frequently a “beefy” red cervix which is friable (bleeds easily)</li> </ul>

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		<p><i>Men</i></p> <ul style="list-style-type: none"> <li>• Most frequent cause of non-gonococcal urethritis (NGU)</li> </ul>
Bacterial vaginosis	Overgrowth of anaerobes (e.g., Gardnerella vaginalis)	<ul style="list-style-type: none"> <li>• Not necessarily sexually transmitted</li> <li>• Vaginal discharge with fishy odor, grayish in color</li> </ul>
Candidiasis	Candida albicans	<p><i>Women</i></p> <ul style="list-style-type: none"> <li>• Curd-like vaginal discharge, whitish in color</li> <li>• Moderate to intense vaginal or vulval itching (pruritus)</li> </ul> <p><i>Men</i></p> <ul style="list-style-type: none"> <li>• Itchy penile irritation (balanitis)</li> </ul>
<i>Presenting symptoms: Genital Ulcers and Bubo</i>		
Chancroid (Soft chancre)	Haemophilus ducreyi	<ul style="list-style-type: none"> <li>• Painful, “dirty” ulcers located anywhere on the external genitalia.</li> <li>• Development of painful enlarged lymph nodes (bubo) in the groin.</li> </ul>
Syphilis	Treponema pallidum	<ul style="list-style-type: none"> <li>• Occurs in 3 stages: primary and secondary and late</li> </ul> <p>Primary syphilis</p> <ul style="list-style-type: none"> <li>• Initially, painless ulcer (chancre): in women on the external genitalia (labia), in men on the penis; in both sexes oral and anal ulcers and enlarged rubbery lymph nodes</li> </ul> <p>Secondary (disseminated) syphilis</p> <ul style="list-style-type: none"> <li>• Several months’ later non-itchy body rash, headaches, muscle aches, weight loss, low-grade fever. The rashes may disappear spontaneously</li> </ul> <p>Late syphilis</p> <ul style="list-style-type: none"> <li>• Develops in about 25% of untreated cases and is often fatal due to involvement of the heart, great blood vessels and brain</li> </ul>
Lymphogranuloma venereum (LGV)	Chlamydia trachomatis (serovars L1, L2, L3)	<ul style="list-style-type: none"> <li>• Small, usually painless papules (like pimples) on the penis or vulva, followed by</li> </ul>

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		<ul style="list-style-type: none"> <li>Buboes in the groin which ultimately breaks down forming multiple fistulae (draining openings)</li> <li>If untreated, the lymphatic system may become blocked, producing elephantiasis (swelling of the genitals or extremities)</li> </ul>
Granuloma inguinale (Donovanosis)	Calymmatobacterium granulomatis	<ul style="list-style-type: none"> <li>An uncommon cause of ulcerative genital tract infection</li> <li>Typically, the infected person develops lumps under the skin which break down to form “beefy” red, painless ulcers</li> </ul>
Genital herpes	Herpes simplex virus	<ul style="list-style-type: none"> <li>Multiple painful vesicles later forming shallow ulcers which clear in 2 to 4 weeks (first attack) and may be accompanied by watery vaginal discharge in women</li> <li>Recurrent (multiple episodes) more than 50% of the time.</li> </ul>
<i>Presenting symptoms: Lower Abdominal Pain</i>		
Pelvic Inflammatory Disease (PID)	<ul style="list-style-type: none"> <li>Neisseria gonorrhoea</li> <li>Chlamydia trachomatis</li> <li>Anaerobes</li> </ul>	<ul style="list-style-type: none"> <li>Lower abdominal pain, fever, vaginal discharge, menstrual irregularities like heavy irregular vaginal bleeding, dysmenorrhoea, dyspareunia (pain during sexual intercourse), dysuria, tenesmus, low backache</li> <li>Temperature &gt; 39°C</li> <li>Vaginal/cervical discharge, congestion or ulcers</li> <li>Lower abdominal tenderness or guarding</li> <li>Uterine/adnexal tenderness, cervical movement tenderness, presence of a pelvic mass</li> </ul>
<i>Presenting symptoms: Acute scrotal pain and /or swollen scrotum</i>		
Epididymitis/ Orchitis	<ul style="list-style-type: none"> <li>Neisseria gonorrhoea</li> <li>Chlamydia trachomatis</li> </ul>	<ul style="list-style-type: none"> <li>Acute: severe pain in one or both testes, sudden swelling of the testes.</li> </ul>

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<i>Presenting symptoms: Genital Skin Conditions</i>		
Genital warts (Condyloma acuminata)	Human papilloma virus	<ul style="list-style-type: none"> <li>• Single or multiple soft, painless, “cauliflower” growth which appear around the anus, vulvo- vaginal area, penis, urethra and perineum</li> </ul>
Moluscum contagiosum	Pox virus	<ul style="list-style-type: none"> <li>• Multiple, smooth, glistening, globular papules of varying size from a pinhead to a split pea can appear anywhere on the body. Sexually transmitted lesions on or around genitals can be seen.</li> <li>• Not painful except when secondary infection sets in.</li> </ul>
Pediculosis pubis	Pthirus pubis	<ul style="list-style-type: none"> <li>• There may be small red papules with a tiny central clot caused by lice irritation.</li> <li>• General or local urticaria with skin thickening may or may not be present.</li> </ul>
Scabies	Sarcoptes scabiei	<ul style="list-style-type: none"> <li>• Severe pruritis (itching) is experienced by the client which becomes worse at night.</li> <li>• The burrow is the diagnostic sign. It can be seen as a slightly elevated grayish dotted line in the skin, best seen in the soft part of the skin.</li> </ul>