STDs

This section discusses: 1) sexually transmitted infections (STIs) which are transmitted by microbes like bacteria, viruses, or protozoa 2) sexually transmitted diseases (STDs) which are not caused by microbes, and 3) male genital diseases or conditions that may not be contagious.



Figure 1Pubic lice visible on eye lashes. https://commons.wikimedia.org/wiki/File:Pubic_lice_on_eye-lashes.jpg KostaMumcuoglu at the English Wikipedia, CC BY-SA 3.0 <http://creativecommons.org/licenses/by-sa/3.0/>, via Wikimedia Commons

1) Crabs:

This contagious disease is caused by <u>Lice</u>, which may be detected by the presence of their tiny white egg sacks on the pubic hair. Lice are tiny but visible **insects** that cause intense itching and the feeling of something moving your hair.

2) Scabies: This contagious disease is caused by tiny arachnids (8 legs) called <u>Mites.</u> They burrow into the host's skin and lay eggs. This creates a tiny red spot that itches.

3) Molluscom Contagiosum: This contagious disease is caused by a <u>virus</u>. It may be diagnosed by the small round skin bumps with a **dimple** in the middle.

4) Jock Itch: Like Athletes Foot, Jock Itch is caused by a contagious <u>fungus</u> and can be treated like one.

5) Warts: Warts are caused by a family of contagious viruses called <u>Human Papilloma</u> <u>Virus (HPV)</u>. Some strains can cause cancer of the cervix or throat, so treatment should be immediate. Better yet, **prevent infection by getting vaccinated** while you are young. (Many people are exposed to HPV early in life, so the expensive vaccines are not recommended for people over 40 without consulting a doctor). Treatment of warts is usually by burning, freezing, or cutting the warts off. Once you get the virus in a skin cell, it's in that cell's DNA until the cell dies or is removed. However, most people quickly develop antibodies to their particular wart viruses, and live wart-free lives without infecting others. Warts typically look like small

brownish or pink raised **bumps that feel rough to the touch**. Buschke Lowenstein tumors are also caused by HPV, but can grow much larger. They are often slightly pink or flesh colored and have the texture of cauliflower. They grow slowly and rarely metastasize but are considered malignant.

6) Lymphogranuloma venereum: LGV is caused by a contagious <u>bacterium</u>. It produces a painful ulcer and may produce abcesses near lymph nodes. Curable with antibiotics.

7) Chancroid (pronounced "**shank** royd": Caused by the contagious <u>bacterium</u> Haemophilus ducreyi. Symptoms (**painful ulcer**) like LGV. Curable with antibiotics.

8) Syphilis: Caused by a contagious bacterium. Earliest symptom is a painless ulcer called a chancre (pronounced shang kr). Easily treated early with Penicillin. Disastrous if not treated early.



9) Herpes: Caused by a contagious <u>virus</u> that lives in the sensory nerve ganglia. Occasionally, the virus wakes up, makes more virions, ships them along the nerve axon, and small painful blisters appear, create an ulcer that crusts over, and heals. Definitely contagious when blisters are present and bursting. Not contagious after the ulcer heals.

10) Chlamydia: Caused by contagious <u>bacteria</u>. If symptoms appear, they resemble Gonorrhea: vaginal or penile discharge and burning pain during urination. Like most bacterial STDs, Chlamydia is easy to treat with antibiotics, but <u>you must be tested</u> between partners, because you may not yet have experienced symptoms. Chlamydia may permanently damage female reproductive organs so that first symptoms may not be observed until pregnancy is attempted or achieved.

11) Gonorrhea: Caused by contagious <u>bacteria</u>. Symptoms are probable, and consist of vaginal or urethral discharge and pain during urination. Some strains are difficult to treat due to drug resistant bacteria.

14) Candidiasis: Caused by a contagious yeast called candida albacans, which is a <u>fungus</u>. In women, it causes irritation, redness, burning, and pain in vulva and vagina. In men, it is most common under the foreskin. It appears as shiny red spots or patches. It is treated with prescription antifungals.

15) Fournier's Gangrene: Caused by various contagious <u>bacteria</u>, and indicates a lack of blood flow. Appears as dead black skin, and should be treated by a physician right away.

16) Abcess: A red swollen bump with pus indicates that potentially contagious <u>bacteria</u> are contained within. This needs medical attention.



Figure 3 Gonorrhea urethral discharge. https://commons.wikimedia.org/wiki/File:B onjour-Tropfen_Tripper_am_Tag-21_nach_ erstem_Symptom_(Gonorrhoe_Gonorrhea_S UPERBUG).jpg Sicherintim, CC BY-SA 4.0 <https://creativecommons.org/licenses/by-sa /4.0>, via Wikimedia Commons

17) Varicocele: This condition is not caused by bacteria or viruses, and is <u>not infectious</u>, but can reduce sperm & testosterone production. It presents as a lump inside the scrotum, above



the testicle, caused by an obstruction in the venous blood flow back to the body from the testicle¹.

18) Testicular Cancer: There is no easy blood test. It is found only by palpation and biopsy. It is <u>not an STI</u>.

STIs Without Symptoms in Men

19) Trichomoniasis: Trich is caused by a contagious single-celled parasitic protozoan, and causes a greenish vaginal discharge. Does not produce symptoms in men, but does in women. Men must be tested in order to know whether they have it.

20) Gardnerella: Caused by a <u>bacterium</u> and produces vaginal itching and odor. Easy to diagnose and treat. <u>Does not produce symptoms in men</u>, but does in women. <u>Men must be</u> <u>tested in order to know whether they have it.</u>

21) Ureaplasma and Mycoplasma: These <u>bacteria</u> are common and transmissible, but are not often found because they don't produce obvious symptoms in men or women. Ureaplasma produces no symptoms. Both are easy to diagnose and treat, but <u>you must be tested</u> for them in order to know whether you have them. Another view would be that these aren't diseases, just infections one lives with.

HOMEWORK

Sketch a penis and scrotum with at least 15 diseases or conditions. Describe symptoms and cause for each.

Name 4 STIs that you may have without knowing, i.e. without symptoms.

¹ The venous blood flows through a network of small veins that surround the spermatic artery. Blood in the veins cools the arterial blood flowing to the testicle. This network of veins is called the Pampiniform Plexus, and it is contained within the spermatic cord, along with the spermatic artery and the nerves for the testicle, all of which are contained within an out-pouching of the perineal membrane of the abdomen (where the testes originate embryologically). The **Cremaster muscle** that raises and lowers the testes forms a layer of muscle around the spermatic cord, yet inside a layer of fascia.

SYMPTOM / DESCRIPTION	DISEASE NAME	CAUSE
Finy white beads on pubic hair	Abcess (infection)	Bacteria
Finy red spots under skin itch	Candida	Bacteria
Small bumps with center dimple	Chlamydia	Bacteria
Pink itchy area	Crabs (Lice)	Bacteria
Rough raised bump (brownish)	Fournier's gangrene	Bacteria (Spirochete)
Painful ulcer (chancroid)	Gardnerella	Fungus
Open sore	Gonorrhea	Insects
Painless ulcer (chancre)	Herpes	Arachnids (Spiders)
Painful clear tiny blister	HIV, Hepatitus B & C	Parasite
Shiny red patch under foreskin	HPV	Usually bacterial
Dead black skin	HPV	Usually bacterial
Red swelling with pus	Jock itch	Usually bacterial
Often no symptons, but may cause	Lymphogranuloma	Virus
Often no symptons, but may cause	Molluscum	Virus
Greenish vaginal discharge.	Scabies (Mites)	Virus
Vaginal itchiness and odor.	Syphilis	Virus
Typically frozen, burned, or cut off.	Trichomoniasis	Virus
No early symptoms	Ulcer	Yeast
Whitish yuck under foreskin	Smegma	Poor hygiene

Draw lines to connect Description with correct Name, and Name with correct Cause.

You might need more practice. This is the same test, but I've mixed up the order of the elements.

SYMPTOM / DESCRIPTION	DISEASE NAME	CAUSE
Dead black skin	HPV	Usually bacterial
Greenish vaginal discharge.	Scabies (Mites)	Virus
No early symptoms	Ulcer	Yeast
Often no symptons, but may cause white, yellow or green discharge.	Lymphogranuloma venereum	Usually bacterial
Often no symptons, but may cause white, yellow or green discharge.	Molluscum contagiosum	Virus
Open sore	Gonorrhea	Arachnids (Spiders)
Painful clear tiny blister	HIV, Hepatitus B & C	Fungus
Painful ulcer (chancroid)	Gardnerella	Insects
Painless ulcer (chancre)	Herpes	Bacteria
Pink itchy area	Crabs (Lice)	Usually bacterial
Red swelling with pus	Jock itch	Bacteria (Spirochete)
Rough raised bump (brownish)	Fournier's gangrene	Parasite
Shiny red patch under foreskin	HPV	Bacteria
Small bumps with center dimple	Chlamydia	Bacteria
Finy red spots under skin itch	Candida	Bacteria
Finy white beads on pubic hair	Abcess (infection)	Virus
Typically frozen, burned, or cut off.	Trichomoniasis	Virus
Vaginal itchiness and odor.	Syphilis	Virus
Whitish yuck under foreskin	Smegma	Poor hygiene

1	Lice are also called	but are actually
2	Scabies is caused by	called
3 called	Small round skin bumps with a dimple in the m contagiosum.	iddle are caused by a
4 and is o	Jock itch looks like	
5	Warts are caused by (the acronym)	and can cause
6	All the bacterial diseases can be treated with	

if diagnosed early. An exception might be_____ The fungal diseases ______ also be treated. 7 A painful ulcer on the penis could be caused by 8 Chancroid Haemophilus ducreyi LGV Syphillis Gangrene Herpes 9 A painless ulcer could be caused by LGV Haemophilus ducreyi **Syphillis** Chancroid Gangrene Herpes 10` Tiny blisters could be caused by Haemophilus ducreyi Syphillis LGV Chancroid Gangrene Herpes 11 A drip from a milked penis could be Chlamydia Gonorrhea **Syphillis** Trichomoniasis Gardnerella 12 Red spots or patches under a foreskin are probably caused by a named Candida 13 Dead black skin indicates ______. 14 A swollen bump with pus is called an . 15 An extra lump in the scrotum could be Cancer Varicocele Extra testicle Hernia Pump for prosthetic penis 16 Even with no symptoms, a man can still have Ureaplasma Mycoplasma Gardnerella Trichomoniasis Chlamydia HIV

The following three pages present a typical lab analysis for ten common STDs. My clarifying annotations are in blue.

Result Status: Final

Labcorp

Patien	nt Name:	STARR, JERRY		Account Numb	er:	42216020		
Date of Birth (Age): 01/12/1950 (73		(307) 760-7227 01/12/1950 (73)			:	Analyte Health 11150 S Wilcrest Dr Houston, TX 77099-4343 (800) 579-3914		
Sex:		Male						
Referr	ring Dr (NPI #):	PATEL, K (174062	40628692) Collection Date/Time:		04/11/2023 14:33:00			
Patien	nt ID:	7FA9F75499		Received Date	/Time:	04/11/2023 00:00:00		
Specir	men ID:	10184787930		Reported Date	/Time:	04/13/2023 16:12:00		
Gener	ral Comments and Ad	Iditional Information						
SRC:U	IR							
Fastin	ng: No	Tot	al Vol:		Sourc	e: UR		
Result I	Name		Flag	Result	Range/Units	Status	s Lab	
18319	4 Chlamydia/GC Am	plification						
1	Chlamydia trachoma	tis, NAA		Negative	Negative	Final	01	
2	Neisseria gonorrhoe	ae, NAA		Negative	Negative	Final	01	
14405 3	0 HCV Antibody RF (Hepatitis C) HCV Ab	X to Quant PCR		Non Reactive	Non Reactive	Final	02	
14403	0 Interpretation:							
	Interpretation:					Final	02	
	Not infected wi	th HCV unless early or	r acute infe	ection is				
	suspected (whic	h may be delayed in ar	n immunocom	promised				
	individual), or	other evidence exists	to indicat	te HCV infection.				
01200 1	5 RPR. Rfx Qn RPR (Syphilis) RPR	/Confirm TP		Non Reactive	Non Reactive	e Final	02	
08393	5 HIV Ab/p24 Ag wit	th Reflex						
	HIV Ab/p24 Ag Scree	en		Non Reactive	Non Reactive	Final	02	
	HIV Negative							
5/6	HIV-1/HIV-2 ant	ibodies and HIV-1 p24	antigen wei	re NOT detected.				
	There is no lab	oratory evidence of HI	IV infection	n.				
				The Print of the P				

163033 HSV-2 Type Spec Ab, IgG w/Rflx 7 (Herpes Simplex Virus 2 {genital herpes})

Page 1 of 3

Result Status: Final

Labcorp

Patient Name:	STARR, JERRY		Account Number:		42216020		
Patient Phone:	(307) 760-7227				Analyte Hea		
Date of Birth (Age):	01/12/1950 (73)		Account Name:		Houston, TX (800) 579-39	77099-4343	\$
Sex:	Male						
Referring Dr (NPI #):	PATEL, K (1740628692)		Collection Date/Tim	e:	04/11/2023	14:33:00	
Patient ID:	7FA9F75499		Received Date/Time	e:	04/11/2023	00:00:00	
Specimen ID:	10184787930		Reported Date/Time	э:	04/13/2023	16:12:00	
Result Name	Flag	Re	sult	Range/Units		Status	Lab
HSV 2 IgG, Type Sp	ec	<0	.91	0.00-0.90 / in	dex	Final	02
		Negat	ive <0.91				
		Equiv	rocal 0.91 - 1.09				
		Posit	ive >1.09				
	Note: Negative indicates no HSV	-2 ant	ibodies detected.				
	Positive indicates HSV-2 antibo	dies d	letected.				

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Equivocal and low positive HSV-2 screens

(Index 0.91-5.00) may be false positive and are

reflexed to supplemental testing in accordance with

CDC guidelines.

164897 HSV Type 1-Specific Ab, IgG

8	HSV 1 IgG, Type Spec (Herpes Simplex Virus 1	<0.91	0.00-0.90 / inde	ex Final	02
	(cold sore virus - can be genital))	Negative	<0.91		
		Equivocal 0.9	1 - 1.09		
		Positive	>1.09		
	Note: Negative indic	cates no antibodies detect	ed to		
	HSV-1. Equivocal may	y suggest early infection.	If		

clinically appropriate, retest at later date. Positive

Page 2 of 3

Result Status: Final

Labcorp

Patient Name:	STARR, JERRY		Account Num	Account Number:		42216020	
Patient Phone:	(307) 760-7227				Analyte Hea		
Date of Birth (Age):	01/12/1950 (73)		Account Nam	e:		x 77099-4343	
Sex:	Male						
Referring Dr (NPI #):	PATEL, K (174062869	2)	Collection Dat	te/Time:	04/11/2023	14:33:00	
Patient ID:	7FA9F75499		Received Dat	e/Time:	04/11/2023	00:00:00	
Specimen ID:	10184787930		Reported Date	e/Time:	04/13/2023	16:12:00	
Result Name		Flag	Result	Range/U	nits	Status	Lab

indicates antibodies detected to HSV-1.

9 (Hepatitus 3) HBsAg Screen	Negative	Negative	Final	02
006734 Heb A Ab. laM 10 (Hepatitus A) Hep A Ab, IgM	Negative	Negative	Final	02

Performing Lab

01 - Labcorp Phoenix, 5005 S 40th Street Ste 1200, Phoenix, AZ 85040-2969, (800) 788-9743, Collum, Earle S MD

02 - Labcorp Phoenix, 5005 S 40th Street Ste 1200, Phoenix, AZ 85040-2969, (800) 788-9743, Collum, Earle MD

For Inquiries, the physician may contact the performing lab.

END OF REPORT

Chlamydia Gonorrhea Syphilis Hepatitus A Hepatitus B Hepatitus C HIV 1 HIV 2 Herpes 1 Herpes 2

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