WHAT'S YOUR NUMBER A men's guide to STIs and good sexual health.

INTRODUCTION

This booklet aims to provide basic information on the common Sexually Transmitted Infections (STIs) that affect men who have sex with men (MSM), who may be gay, bisexual, or even married. By knowing more about STIs and how to protect yourself, you can take charge and make informed choices when it comes to your sexual health.

This booklet should be used as a guide only. Remember, many STIs do NOT cause symptoms and if they do, symptoms may be mild. Get a check-up if you think that you have an STI, or if you have not had a check-up before or in the past year. By getting tested, you can remain active and stay in the pink of health.

Acknowledgements

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Disclaimer:

We have attempted to provide full, accurate and up to date information in this booklet, based on current medical evidence and opinion. However, information and advice may vary from different sources, and over time. If you have any further questions, see your doctor or healthcare provider.

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WHAT ARE SEXUALLY TRANSMITTED INFECTIONS?

Security Transmitted Infections (STIs) are infections which can be transmitted (passed from one person to enother) through sexual intercourse or activity, or close body contact with enother person who is infected with an STI. STIs can be caused by becteria, viruses or personness.

BACTERIA	BACTERIA VIRUSES	
Chlamydia Gonorrhoea Syphilis	Herpes simplex virus (HSV-1 and HSV-2) — genital herpes Human papilioma virus (HPV) — genital werts Hepatitis A, B and C Molluscum contaglosum virus (MCV) — molluscum	Public Rice {"crabs") Scables

Pieces refer to the table on page 11 or the OSC metalle www.duc-clinb.ug for more detailed information on each 51).

Generally, men who have sex with men (MSM) have a higher chance of getting STIs and HIV. For example, MSM seen at the STI clink in Singapore (DSC Clink) are about 25 times more likely to be diagnosed with infectious syphilis, and 4 times more likely to have gonorrhoes, compared to heterosegual men. HIV infection and other viral STIs also more frequently affect MSM. This increased risk for STIs and HIV is common to all MSM in cities of developed countries around the world.

The good news is that HIV and many other STIs can be prevented by using condoms and being vaccinated. In fact, most STIs can be treated or cured. Being diagnosed and treated early helps prevent future complications and loses you healthy.

HOW DO I KNOW IF I HAVE AN STI OR HIV?

Most people with an STI, including HIV, have no symptoms. Often, you can only find out if you have an infection by getting tested.

Signs or symptoms may include:

- Unusual discharge or pus coming from your penis;
- Pain when passing urine or irritation inside the tip of the penis;
- Blisters, sores, or lumps on your penis, acrotum, anus or the surrounding skin;
- Itchiness or rashes in the genital or anal area;
- Favar, swollen glands, flu-lika illness, body rash or unexplained weight loss;
- Discharge or pain in the rectum

See your doctor if you have any symptoms, and swold having sex until you have been tested. If you've engaged in any sexual activity, have a check-up even if you don't have symptoms.



Maters on the pents from the surly stage of gusted herper. There can occur anywhere over the gusted and area.



Warts on the peak. These can occur envelope over the genital and and area.

WHY SHOULD I GET TESTED FOR HIV?

Knowing that you are HIV negative means you know to continue safe sex practices and condom use to avoid becoming infected.

KNOWING IF YOU HAVE HIV IS USEFUL BECAUSE:

- You know to take care of your health and seek medical care.
- You are able to start HIV treatment early before you become unwell, and stay healthy.
- You are able to help protect your sex partners from being infected by practicing safer sex and using condoms.
- You know to inform sex partners to get tested which can further help prevent HIV being transmitted.
- You can advise partners of the availability of HIV post-exposure prophylaxis (PEP) if you think you may have exposed them to HIV, such as if a condom breaks. For more information on PEP, look in the HIV section under "Prevention".

THE RELATIONSHIP BETWEEN STIS AND HIV

HAVING AN STI INCREASES THE CHANCES OF BEING INFECTED WITH HIV

if you are HIV negative, the inflammation caused by an STI (even when you do not have symptoms) increases your risk of getting HIV by making it easier for the virus to enter your body. If an ulcer (an open sore) is present, the risk is even greater.



Rask over the body from secondary syphilis.

A similar rash can occur in new HIV infectious so both HIV and syphilis should be tested for.

HAVING AN 5TI INCREASES THE CHANCES OF TRANSMITTING HIV

If you are HIV positive, having an STI may increase your HIV viral load and make it easier to transmit HIV to your sex partners.

HAVING AN STI AND BEING HIV POSITIVE

if you are HIV positive and have an STI, not only is the risk of passing HIV to your sex partner higher, but the STI may be more severe or difficult to treat. If you are sexually active, make sure that you have regular sexual health checks.

THE SEXUAL HEALTH CHECK-UP

During the sexual health check (or STI screen or STI testing), you will be asked questions about your sexual history. This is to assess your likelihood or risk of various STIs and HIV, and will help decide which tests are necessary. The information you provide is kept private and confidential so it is best to be honest with your doctor so that an accurate assessment can be made. A full STI check-up will usually include the below tests.

THE ROUTINE STI CHECK-UP (No symptoms)

Physical examination looking for signs of STIs, and the following tests:

BLOOD TESTS	URINE SAMPLE	SWABS
HIV Syphilis Hepatitis A and B* (if you have not been vaccinated or infected in the past)	Gonorrhoea Chlamydia	Anal swab • Gonorrhoea** • Chlamydia Throat swab • Gonorrhoea
Other blood tests Hepatitis C (if you have hIV or have ever injected recreational drugs) HSV-1 and HSV-2 (may be considered depending on your symptoms and exposure)		

^{*} If blood results show you are not immune to hepatitis A or B, vaccination is recommended to help protect you against these viral infections.

THE STI CHECK-UP IF YOU HAVE SYMPTOMS

The tests from a routine check-up will be performed along with extra tests which may include:

- Urethral (opening at tip of the penis) swab
- Ulcer swab

THE STI CHECK-UP IF YOU ARE HIV POSITIVE

Getting regular blood tests to monitor your HIV infection does not mean that you are automatically getting tested for STIs. If you are sexually active ask your doctor to include a complete STI screen, as above, or arrange to have this done at a sexual health clinic, such as DSC Clinic.

HOW OFTEN SHOULD I HAVE A SEXUAL HEALTH CHECK?

The greater number of sex partners that you have, the more often you should get tested. Have an STI and HIV check-up at least once a year if you have any sex partners (even if you only have one regular partner) and 3-6 monthly if you have more than 1 partner per month.

COMPLETE STI SCREENING EVERY 3-6 MONTHS IS RECOMMENDED IF YOU:

- Have unprotected anal sex
- Have multiple sex partners
- Attend venues, such as saunas, where you have anonymous sex
- Use recreational drugs, particularly during sexual activity
- Have a partner(s) who engages in the above activities.

If you are HIV positive and sexually active, a syphilis test should be done as part of your routine HIV monitoring, and a hepatitis C test once a year. Check with the doctor who helps with your HIV care.

^{**}Even If you don't have receptive anal sex, that is, being the "bottom" partner (your partner puts his penis into you), you can still get gonorrhoea in the anus/rectum through other activities like rimming (oral-anal sex).

I HAVE AN STI - WHAT ABOUT MY PARTNER?

INFORM YOUR PARTNER IF YOU'VE BEEN DIAGNOSED WITH AN STI

if you're diagnosed with an STI, it is important to inform recent and previous sex partners so that they know to get tested and treated. This helps prevent the infection being transmitted to more people and reduces your chances of getting infected again.



Gonorrhoes of the puris.



Rush on the points from secondary syphilis.

The same rush can appear on the soles of the fost.

Men who have sex with both men and women should also notify their female partners as some STIs can cause infertility in women, cause complications during pregnancy and even be transmitted to the baby. By telling your partners you are protecting yourself as well as helping them look after their own health.

Your doctor can help you with how best to inform your partners.

PROTECTING YOURSELF AGAINST STIS AND HIV

PRACTICE SAFER SEX

Safer sex means any sexual activity that doesn't allow sexual bodily fluids or blood to pass from one person to another. Condoms are the most effective way to prevent HIV transmission and also help prevent many other STIs. They work by preventing the transfer of infected fluids.

WBRICANTS ("WBE")

Using lubricant helps reduce the chance of the condom breaking. Only use a water based lubricant. Oil and creams weaken condoms and can cause them to break. You may need to reapply lubricant on the condom or anus saveral times when having sex.

USING SEX TOYS

Use your own sex toys to avoid transmitting STIs and HIV from one partner to another. Always wash them with warm soapy water and dry them between partners, or use condoms on them, changing the condom after use with each partner.

More evidence is showing that hepatitis C is being transmitted during group sex when hands, toys or penises with infected blood are inserted during anal sex without being washed.

STI CHECK-UPS AND VACCINATIONS

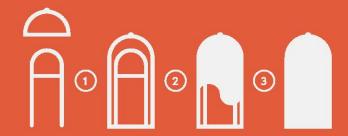
Regularly get tested for STs. If you are in a new relationship, both you and your partner should have an STI check-up first. Get treated for and cleared of STs and HIV before deciding to stop using condoms. Getting vaccinated early or if you're not immune may help prevent you catching certain infections (hepatitis A and B. HPVI.

COME TO AN AGREEMENT

If you are in an "open" relationship where one or both of you are having secoutside of the main relationship, ideally, discuss the arrangement and agree on how this will be done to protect each other. This may mean using condoms with all sex partners, or just those outside of the relationship. If your regular pertner doesn't know you are having sex with others or it hasn't been discussed, use condoms all of the time and have regular check-ups.

USE CONDOMS CORRECTLY

Use condoms every time you have sex whether you are "bottom" (your partner puts his penis into your anus) or "top" (you put your penis into your partner). Oral sex is considered low risk for HIV but some STIs (gonorrhoea, syphilis and herpes) can still be transmitted this way; consider condoms with oral sex as well.



The condom should be on the penis before there is any penetration or before there is any exchange of sexual bodily fluid.

- » Check that the condom hasn't passed its expiry date.
- When opening the packet, take care not to tear the condom.
- » If not circumcised, pull back the foreskin before putting on the condom.
- » Squeeze the air out of the tip and roll the condom all the way down on the erect penis. If it does not roll easily, it may have been put on the penis inside out. Take the condom off and begin with a new one.
- » Apply plenty of water based lubricant on the outside of the condom and the anal opening before penetration.
- » Check from time to time that the condom is intact and apply more lubricant.
- » After ejaculation, hold the base of the condom when pulling out so that it doesn't slip off. This should be done while the penis is still erect. If the penis becomes soft, the condom can slip off inside and allow semen (cum) to spill out.
- Only use each condom once and, if having sex with multiple partners, use a new condom with each person.
- » Dispose of the used condom in the bin, NOT the toilet.
- Use only one condom at a time. Using 2 at once increases the chances of the condom breaking or slipping off.

MSM AND VACCINATIONS

WHAT ARE VACCINATIONS AND HOW DO THEY HELP?

Being vaccinated is a way of making you immune (protected) against particular virus infections. Vaccination makes your immune system produce its own protective antibodies that prevent you from becoming infected if you are later exposed to the virus.

WHAT VACCINATIONS SHOULD MSM HAVE?

 Hepatitis A and hepatitis B vaccinations are strongly recommended for MSM who are not immune. Both provide over 95% protection and generally last for life.

Schedule	1st Injection	2nd Injection	3rd Injection
Hepatitis A	Day 1	At 6-12 mths	ico ca
Hepatitis B	Day 1	At 1 mth	At 6 mths

More rapid dosing schedules are available (with a booster dose after 1 year), as well as combined hepatitis A and B vaccinations; discuss with your healthcare provider.

 HPV (Human papillomavirus/genital warts virus) vaccination may be recommended or offered to some MSM particularly those aged 26 years or younger who have had no or few sex partners, or are HIV positive.
 It consists of 3 injections given over 6 months.

If you are HIV negative: Once you've completed the vaccination course against hepatitis A or hepatitis B, further blood tests for these and booster injections are not necessary. If you are HIV positive: Hepatitis B antibody levels should be checked every year and a booster dose given, if needed.

If you have another type of hepatitis (such as hepatitis C or liver disease from alcohol), get vaccinated against hepatitis A and B.

STI	TRANSMISSION	COMMON SYMPTOMS	COMPLICATIONS	CAN IT BE CURED?	PREVENTION
Chlamydia Bacteria Common	Unprotected sex (anal and vaginal, rarely oral)	Often no symptoms Discharge from penis and pain when passing urine Discharge or pain in anus	Epididymitis/epididymo-orchitis (infection of tubes storing sperm and the testicle), infertility, inflammatory reaction causing eye, skin and joint problems.	Yes, with oral antibiotics	Condoms
Gonorrhoea Bacteria Common	Unprotected sex (anal, vaginal and oral), rimming	Often no symptoms Discharge from penis and pain when passing urine Discharge or pain in anus	Epididymitis/epididymo-orchitis, infertility, spread into blood, joints and skin.	Yes, with an antibiotic injection	• Condoms
Syphilis Bacteria Common	Unprotected sex (all types), skin to skin contact with infectious rash/ulcer, mother to baby, contaminated blood	Often no symptoms Ulcer on the penis or anus Skin rash Fever and swollen glands	Deformity, disability, dementia and death from damage to skin, heart, brain or nerves, pregnancy complications, infected baby if mother has syphilis.	Yes, with antibiotic injections	Condoms give some protection
HIV • Virus	Unprotected sex (anal and vaginal, rarely oral), mother to baby, contaminated blood	Often no symptoms until late May have severe flu-like illness with new infection	AIDS and death if untreated, rare cancers and infections, infected new-born baby if mother has HIV.	No, but HIV treatment can control HIV and keep you healthy	• Condoms • PEP • PrEP
Hepatitis A • Virus	Oral-faecal (getting infected faeces into the mouth) such as during rimming or oral sex	Often no symptoms Jaundice, fever, abdominal pain	Severe liver inflammation and death (rare),	No, but it will usually go away on its own	Vaccination
Hepatitis B • Virus	Unprotected sex, mother to baby, contaminated blood	Often no symptoms Jaundice, fever, abdominal pain	Liver failure, scarring and cancer.	No, but treatment can help control hepatitis B	Vaccination Condoms
Hepatitis C • Virus	Contaminated blood most commonly sharing drug injecting equipment, occasionally unprotected sex (higher risk in HIV+)	Usually no symptoms	Liver failure, scarring and cancer.	Some treatments can help some people	Avoid sharing needles/ syringes if you inject drugs
HPV (Warts) • Virus • Common	Sexual skin-to-skin contact	Often no symptoms Lumps on the genitals/anal area	"High-risk types" of HPV associated with anal cancer (more common in HIV positive people)	No, but it will usually resolve on its own. Treatment removes visible warts only	Condoms give some protection Vaccination
HSV (Herpes) • Virus • Common	Sexual skin-to-skin contact, oral sex	Often no symptoms Painful blisters or sores	Unable to pass urine, viral meningitis.	No, but treatment can control the symptoms and outbreaks	Condoms give some protection
Molluscum • Virus • Common	Sexual skin-to-skin contact	Often no symptoms Skin coloured lumps		No, but usually resolves on its own. Treatment removes the lumps	Condoms give some protection
Pubic Lice • Parasite	Close or sexual body contact	Itchiness in pubic area, lice and nits on pubic hair		Yes, with special shampoos or lotions	No real prevention
Scables • Parasite	Close or sexual body contact	Itchy lumps or rash		Yes, with special shampoos or lotions	No real prevention

HUMAN IMMUNODEFICIENCY VIRUS (HIV)

WHAT IS HIV AND WHAT IS AIDS?

Human immunodeficiency Virus (HIV) is the virus that can lead to Acquired Immune Deficiency Syndrome (AIDS) if the HIV infection is not treated. Being infected with HIV is not the same as having AIDS. In fact, many people living with HIV nowadays are well and do not develop or have AIDS, because of the available treatments.

HIV weakens or damages part of the immune system (especially the CD4 cells), that helps your body fight against infection and disease (including cancers). AIDS occurs when the immune system is so weakened that you develop illnesses that you would not normally have if your immune system was healthy.

TRANSMISSION

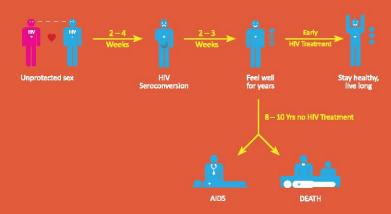
HIV is transmitted through the transfer of sexual bodily fluids (semen, pre-cum and vaginal fluid), blood and breast milk, such as from:

- Having unprotected sexual intercourse with an infected person
- · Sharing infected syringes and needles
- Mother-to-child during pregnancy, at birth or through breast-feeding (this can be almost completely prevented if the mother is on treatment)
- Transfusion with infected blood and blood products (blood donations in Singapore are screened)

If you are HIV negative, the inflammation caused by an STI (even when you don't have symptoms) increases your risk of getting HIV by making it easier for the virus to enter your body. If you are HIV positive, having an STI may increase your HIV viral load and makes it easier to transmit HIV to your sex partners.

SIGNS AND SYMPTOMS

Most people infected with HIV do not know that they have HIV. They look well and feel healthy until much later when the immune system is severely weakened or damaged. Symptoms may also occur in the early weeks after someone is first infected.



Some people, 2-4 weeks after becoming infected, experience a "seroconversion" illness (also known as primary HIV or acute retroviral syndrome) which causes a severe flu-like illness lasting 2-3 weeks. Symptoms may include fever, rash, sore throat and swollen glands.

Most people will then have no symptoms for many years. After 8-10 years without any HIV treatment, AIDS and other symptoms develop. These may include: weight loss, unexplained diarrhoea, recurrent rashes, fever or an AIDS-related illness (certain types of pneumonia, skin and other organ cancers, severe fungal infections, and infections of the brain).

Generally, you cannot tell if you have HIV based on how you feel or if someone else has HIV just by looking at them. A test is the only way to be sure.

HOW DO I GET TESTED?

Routine Blood Test

Rapid Blood Test

Rapid Oral Fluid Test

Rapid HIV tests give same-day results.

When you are infected, your immune system produces antibodies to try to fight the HIV infection. It can take between 2 weeks and 3 months for antibodies to appear in the blood (newer tests can detect most HIV infections as early as 4 weeks). This is called the "window period".



NEGATIVE HIV TEST RESULT

No antibodies were detected at the time of the test. You don't have HIV **OR** the test was taken too soon after exposure and antibodies haven't had a chance to develop. In this case, repeat the test 3 months after the sexual encounter.



POSTIVE HIV TEST RESULT

Antibodies were detected and you may be infected with HIV. It does not mean you have AIDS. Another blood test is taken to confirm that you have HIV. Counselling and support will be given and you will be referred to an HIV specialist.

Anonymous HIV testing, where no personal details are taken, is offered by some centres, such as Action For AIDS (AFA).

Other clinics for anonymous HIV Testing:

Anteh Dispensary 1 Lorong 22 Geylang #01-02 Grandview Suites, S398664 T: 67441809

Cambridge Clinic Blk 333, Kreta Ayer Road, #03-27, S080333 T:63271252

Dr Jay Medical Centre 115 Killiney Road, S239553 T: 62335196

Dr Soh Family Clinic Blk 966, Jurong West Street 93, #01-211, S640966 T:67917735

Dr Tan & Partners 11 Unity Street, #02-07 , Robertson Walk, \$237995 T:62387810

M Lam Clinic 739 Geylang Road, \$389649 T: 67481949

Dr Clinic & Surgery 305 Woodlands St 31, #01-91, \$730305 T: 62691017

Kensington Family Clinic 14D Kensington Rd, Serangoon Garden Estate, \$557265 T: 62884882 Q&M Medical & Aesthetic Clinic (Tampines Central) Pte Ltd, 10 Tampines Central 1,

#04-18/19, Tampines One \$529536 T: 67813323

TREATMENT

There is no vaccine or cure for HIV but there is treatment to control the virus and keep your immune system strong so that you stay healthy. Not everyone diagnosed with HIV needs to start treatment immediately. Your symptoms and CD4 count will help decide when treatment should begin. Regular blood tests to monitor your immune system along with other blood tests will be performed as part of your HIV care.

Starting HIV treatment (called highly active anti-retroviral therapy, HAART) before your immune system is severely weakened will help prevent symptoms and AIDS-related conditions. HAART is a combination of at least 3 anti-HIV medications taken daily on a long-term basis. It suppresses the virus and prevents further damage to the immune system. If your CD4 count is very low, specialized antibiotics are also needed to protect you from developing infections associated with HIV and AIDS.

Most people living with HIV who start the correct treatment when they need to lead productive and healthy lives.

OTHER INFORMATION ABOUT HIV

"HIV superinfection" is when an HIV positive person is infected with a different strain of HIV. This can happen through unprotected sex with another person who is HIV positive. It could mean more rapid progression of your HIV infection, or that treatment of HIV becomes less effective. If you are HIV positive, continue to use condoms and have safe sex to protect yourself as well as your sex partners, even if both of you have HIV.

For HIV positive MSM who also have female partners: Notify both your male and female sex partners. Many women may not see themselves to be at risk of HIV if they are committed to one partner. If an HIV positive woman becomes pregnant, she can infect the baby during the pregnancy and afterwards through breastfeeding. This can be almost completely prevented if the mother knows that she is HIV positive and is on the correct HIV treatment.

PREVENTION

Using condoms is the most effective way of preventing HIV transmission. Condoms also help prevent many other STIs. If you inject drugs, avoid sharing any equipment.

If you are HIV negative, giving oral sex (sucking your partner's penis) is considered low risk. If you have cuts or sores in your mouth, bleeding gums, an STI in your throat or have recently had dental work, avoid giving oral sex or letting your partner cum in your mouth.

If you think you've been exposed to HIV, there is a course of treatment called PEP that can help reduce the chance of you becoming infected. See below:

POST EXPOSURE PROPHYLAXIS (PEP)

- PEP is a 4 week course of anti-HIV medication which may prevent HIV infection.
- PEP needs to be started as soon as possible after exposure and within 72 hours, to be most effective.
- If you are HIV positive and think you may have exposed another person to HIV, let them know about PEP.
- PEP is not given to everyone because of the high risk of side-effects and may cause future drug resistance if not taken properly. It will also not help if you've had multiple exposures over a period of time or continue to be exposed to HIV. Discuss with your doctor whether or not PEP is advisable in your situation.

To get PEP or for advice about PEP, contact your doctor or DSC Clinic.

You should consider PrEP if you sometimes have sex without using a condom, especially if you have a sex partner whom you know has HIV infection or is at risk of HIV. See Below:

PRE-EXPOSURE PROPHYLAXIS (PrEP)

- . PrEP is to prevent HIV infection from taking hold before you are exposed to the virus
- PrEP is ideal for one who has ongoing risk of HIV infection especially if you have a sex partner whom you know has HIV infection or is at risk of HIV
- Several studies showed that PrEP reduced the risk of getting HIV infection, more information of these studies can be found at http://www.cdc.gov/hiv/prep
- If you are interested in PrEP, speak to your doctor to see if you are suitable. If you are assessed to likely benefit from PrEP and are agreeable, blood tests to assess your kidney and liver function in addition to a HIV test will be done
- . Taking PrEP will require you to follow-up regularly with your doctor.
- It is important that you take the medication regularly to protect you from infection,
 as PrEP does not work after you stop taking it, if you do not take the medication
 every day, there may not be enough medicine in your blood stream to block the virus
- PrEP does not protect one against other STIs like syphilis, gonorrhoea, chlamydia, warts, herpes etc.

To get PrEP or for advice about PrEP, contact your doctor or DSC Clinic

FREQUENTLY ASKED QUESTIONS

CAMES STRONG

I'm a manully active gay man. Although I always are protection for and anc. I senso are protection for and anc. State last year, I leave been being recovering where leads any month. It's just like a neuronal some which can be possiful sometimes and then your owny on its new. What STAN might I have constructed?

AND SPECIMENTS

Your mouth ulcer is not an indication of any STL You should see a doctor to find out the sause if you are concerned. If you had protested oral and anal see, the risk of STL and HTV is minimal. However, generations, herpes and syphilis can be transmitted through unprotected oral sec. The risk of HTV through oral sec is also low but if you have a sone in your mouth and the other person found inside your mouth, there may be a slightly increased risk.

CALIFORNIA

I am gofte permodel cheet tide, I had an encounter with a gay — are were both first himber off without and or end. I'm married because there are a very small older on my figuration we threat. Will I he injected?

AND BUILDING

There is no risk of getting STI and HIV through idesing (including deep wet kissing or French idesing), unless there are bleeding lips, game or utous in both parties at the same time, and even this is considered very low risk. There is no documented case of someone influcted through this mode. Cold some (harpes whus), however, can be passed on through kinsing.

DARWING NO.

Becautily, I had an activity with a gay man. We know each other from a social network. We district kins, porform and an increased as. However, we stid perform resonance measurization to the end, he ajmoisted on my look, I know the change of getting MIV is reinland. However, I am not so may elect other STE. In there a possibility that I might have contracted normating Min generations, chiangelie or other STE. In hower's aperional soy harning sensations when I wintered any harning sensations when I wintered any harning sensations when

AMERICAN.

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Mutual masturbation is considered safe sex and sell generally not put you at risk for STs and HIV. However, if someone has the rash associated with the second stage of syphilis on his paints/hands, then you may be at risk of syphilis. Most STIs do not have symptoms; the best way to find out, is to get tested. For generations and chiamydis, a test can be done 1-2 weeks after the sexual encounter.

STAY COOL, STAY HOT; USE CONDOMS AND GO FOR REGULAR CHECK-UPS.

Key Messages To Remember

- Most STIs including HIV have no signs or symptoms get testad regularly (at least once a year).
- Oral sex is low risk for HIV but still a risk for genorrhoea and syphilis; get tested regularly.
 - Always use condoms and always with water-based lube.
 - Get vaccinated against hepatitis A and B.
 - If you've been diagnosed with an STI, inform your sex partner(s) to get tested too.
 - Having HIV does not mean you have AIDS; early diagnosis and treatment can help keep you healthy.
- Having an STI increases your chance of getting HIV or transmitting HIV – get tested regularly and always use condoms.

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USEFUL CONTACTS AND LINKS

DSC Clinic

Outpatient clinic for STI/HIV.

screening, diagnosis and treatment,

31 Kelantan Lane Singapore 200031

T: 6293 9648 apptdsc@nsc.com.sg

General clinic hours:

Monday - Friday 8.00am-11.00am and 1.00pm-4.00pm (Monday and Friday to 6.30pm)

Closed Saturday, Sunday and Public Holidays.

Action for AIDS (AFA)

Volunteer organisation providing support. education and assistance to people living with HIV/AIDS, as well as anonymous HIV and syphilis testing.

9 Kelantan Lane #03-01

Singapore 208628 T: 6254 0212

E: info@afa.org.sg www.afa.org.sg

Counselling and Care Centre Non-government, non-profit group offering counselling services.

536 Upper Cross Street #05-241.

Hone Lim Complex Singapore 050536

T: 6536 6366 E: info@counsel.org.sg

Fridae Asia's largest LGBT portal providing news

and information of LGBT issues.

www.fridae.asia

HPB Online

Singapore Health Promotion Board's website containing information about sexual health and STIs

http://www.hpb.gov.sg/HOPPortal/persona article/Health%20Ambassador 2246

Live Life

A community portal by AFA supporting MSM in living healthly and free from discrimination.

www.livelife.org.sg

NAM

Portal for people living with HIV and AIDS providing accurate and up-to-date HIV/AIDS information. www.aidsmap.com

Oogachaga

A counselling, support and development organisation for LGBTQ individuals, couples and families.

57A Pagoda Street Singapore 059216 T: 6224 9373 www.oogachaga.com

Pinkdot

Organization supporting LGBT individuals and their families. Hold the annual "Pinkdot" event. www.pinkdotsg.blogspot.com

Pink Carpet Network x gayhealth.sg

Pink carpet network is a service run by aav identified volunteers, providing anonymous HIV/ syphilis testing and counselling for Gay/Bi men. Tuesday & Wednesday: 6.30pm-8.15pm Saturday : 1.30pm-3.15pm Closed on every last Wednesday of the month, eve of PH & PH 9 Kelantan Lane #03-01 Singapore 208628

T: 62540212

E: pinkcarpet@gavhealth.sg

Visit www.gayhealth.sq for more information on our service & what we do.

Pink Carnet Y

Drop In programme for Gay/Bi Youth 18-24 years old. For more info: pinkcarpet@gayhealth.sg

Positive Living Centre (run by AFA)

A safe and supportive place for people living with HIV (PLHIV) to meet and to learn to live positive lives. It provides training, counselling, support group activities and empowerment workshops.

Contact for details. Action for Aids T: 6254 0212

E: info@afa.org.sg

www.afa.org.sg/whatwedo/support/ coordinatedcare/plhiv/

Trevvv

Forum and social website for young gay and bisexual men.

www.trevvv.com

The Drama Down Under

Australian website for MSM providing STI and HIV information. www.thedramadownunder.info