# **GENITAL WARTS**

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#### **OVERVIEW**

- Genital warts are caused by the human papillomavirus (HPV);
  most commonly subtypes 6 and 11. Often HPV infection
  causes no visible warts, and most people will not know they
  have it. Genital warts can develop anywhere in the genital
  area, including the vulva, vagina, cervix, penis, scrotum and
  anus. Very occasionally warts can develop in the mouth.
- Genital HPV is transmitted by skin-to-skin contact; micro-abrasions in the recipient's skin allow viral access to the basal layers of the epithelium.
- Evidence suggests that the majority of individuals who are unvaccinated and have been sexually active experience one or more genital HPV infections in their lifetime. The vast majority of young women have been vaccinated, and this protects not only young females but also males through herd immunity.

The school program did not begin vaccinating boys until 2013, consequently those most at risk of HPV infection are gay and homosexually active men.

#### **SYMPTOMS**

- The first sign of genital warts are growths or lumps in the genital and/or anal area which can appear up to 3 – 12 months after infection with HPV.
- Warts are usually painless but may cause itching and occasionally bleeding.

# **TESTING**

- Genital warts are usually diagnosed based on clinical appearance and can be detected by checking for visible warts on the skin around the genitals and anus.
- No specific diagnostic test for warts is available.
   STI screening for other infections should be performed.

#### **TREATMENT**

Genital warts can be treated by the following options:

- Cryotherapy
- Cauterisation
- Application of topical paints or creams that are available on prescription:

**Podophyllotoxin** paint (0.5%) or cream (0.15%) applied by patient BD for three days, then four days off, repeated weekly for 4-6 cycles.

\* Easy and safe to use, but not to be used in pregnancy

Imiquimod (Aldara TM) 5% cream applied by patient at home. 3 times per week at bedtime until resolved (up to 16 weeks). This works as a specific immune stimulant (not tissue destruction).

\* It is relatively expensive

# **PREVENTION**

- **Condoms:** can reduce the risk of HPV transmission but are not completely effective because they do not cover all areas where the virus can be present.
- The HPV vaccine (Gardasil): protects against HPV subtypes 6, 11, 16 and 18. Young gay and homosexually active men who have had few partners should be offered vaccination.

#### **CONTACT TRACING**

Current sexual partner(s) may benefit from assessment as they may have undetected genital warts, undetected other STI, or need an explanation and advice about disease process.

Tracing of previous sexual partner(s) is not recommended.

For further information patients can be referred to : **www.thebottomline.org.au** 

#### Further information, key websites, and resources for GPs and patients:

www.hpv.org.nz // www.thebottomline.org.au // www.hpvvaccine.org.au // www.sti.guidelines.org.au // www.immunise.health.gov.au



Sexual Health Update, STI testing guidelines for MSM and more are on the revamped STIGMA webpage:

www.stipu.nsw.gov.au/stigma



Abstract of the poster presentation 'Becoming More Gay Friendly in your Practice' at the World STI & HIV Congress September 2015 in Brisbane.

# GAY FRIENDLY GP' ONLINE TRAINING: STRENGTHENING **CAPACITY OF PRIMARY CARE** IN WORKING WITH GAY MEN **AND MEN WHO HAVE SEX** WITH MEN PATIENTS

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# Introduction:

Sexually transmissible infections (STIs) including HIV remain a significant public health issue for gay men and men who have sex with men (MSM). General Practitioners (GPs) play an essential role in STI testing and management with over 50% of testing in NSW occurring within general practice settings. In 2014 the Sydney Gay Friendly GP list was updated by the STIs in Gay Men Action Group and through this process, it was identified that some GPs needed further training.

#### Methods:

A literature review was conducted mid-2014 which identified online learning as an effective modality for providing GPs with MSM relevant training. An expert committee was established including GP and community representatives to provide input and guide the development of the online learning module (OLM). Key issues around primary care experiences of MSM were identified and a 60 minute self-paced OLM was developed. The interactive OLM aims to increase the competence and confidence of GPs and other health professionals in identifying and addressing issues related to sexual health and wellbeing relevant to MSM.

#### Australian-first online module to provide 'gay friendly' training option for General Practitioners line Training: Strengthening capacity of primary care in working with gay men and who



## **Results:**

The OLM consists of three modules; towards a better understanding of gay men and MSM, discussing sexual history and testing for STIs, and issues facing this population group. As an incentive for GPs to participate, the Royal Australian College of General Practitioners' Continuing Professional Development points are allocated to those who complete the training.

# **Conclusion:**

The Gay Friendly GP OLM is Australia's first online training that promotes optimal care for MSM in general practice settings.

Responding to the needs of key populations in general practice can help bridge the gap between health professionals and the populations they serve. This training package will assist GPs to improve consumer engagement, understand sexual diversity and promote effective screening and treatment of STIs in gay men and MSM.

## **Disclosure of Interest Statement:**

located on the ACON website: Please contact Elissa Magner, ph: 9382 7444 or email: Elissa.Magner@sesiahs.health.nsw.gov.au

# A new online learning module aims to inform GPs who wish to become more 'gay friendly'.

The case-based modules explore stigma and discrimination, sexual health screening, common STIs, and specific issues faced by gay men and men who have sex with men (MSM).

**Duration:** 1 hour

CPD: RACGP 2 Category 2 QI&CPD points Target Audience: GPs, health professionals



LINK: www.stipu.nsw.gov.au/stigma/becoming-more-gay-friendly/

# **SUBSCRIBE**

We extend an invitation to GPs, practice nurses and relevant clinicians to receive this free twice-yearly newsletter and updates on sexual health. To subscribe please email your name, job title and workplace to: Jeffrey.Dabbhadatta@sesiahs.health.nsw.gov.au

# SEXUAL HEALTH SERVICES



# Sydney Sexual Health Centre

www.sshc.org.au Macquarie St, Sydney ph: 02 9382 7440

#### **Short Street Centre**

Short Street, Kogarah ph: 02 9113 2742

#### SouthZone Sexual Health Centre

Community Health Centre, Sutherland Hospital ph: 02 9113 2742

# **The Albion Centre**

www.thealbioncentre.org.au

150 Albion Street, Surry Hills ph: 02 9332 9600

#### Clinic 180

180 Victoria Street, Kings Cross ph: 02 9357 1299



## **RPA Sexual Health**

www.slhd.nsw.gov.au/communityHealth/ sexualHealth.html

> Marsden Street, Camperdown ph: 02 9515 1200



#### Clinic 16

www.clinic16.com.au

Herbert Street, St Leonards ph: 02 9462 9500







STIs in Gay Men Action Group

This newsletter is an initiative of the STIs in Gay Men Action group (STIGMA). It is written for general practitioners, practice nurses and relevant clinicians in inner Sydney.

South Eastern Sydney Local Health District, Sydney Local Health District, Northern Sydney Local Health District, Ministry of Health, ASHM NSW, Eastern Sydney Medicare Local, Inner West Sydney Medicare Local, Sydney North Shore and Beaches Medicare Local, Sydney North Shore and Beaches Medicare Local, Centre for Social Research in Health, The Kirby Institute, Australian Federation of AIDS Organisations (AFAO), Positive Life NSW and ACON.