Introduction
The aims of this book is to shed light into how STIs that affect men, their sexual health and well-being. We hope to use this book as a guide to educate our readers on the symptoms of STIs.

It is important to go for screening if you develop symptoms. Being diagnosed and treated early helps prevent future complications.

We always believe in promoting greater sexual health knowledge, so that the community at large can take charge and make informed decisions for their sexual well-being.

While running a clinic that is part of the MOH anonymous HIV screening program, it is inevitable that I end up conducting a fair bit of HIV screening. In the course of my work I have noticed the rising rates of people contracting HIV.

We also have a forum (www.askdrtan.com) for Sexual Health, STIs, HIV & AIDS prevention and treatment. The materials in this book should be used as a guide.

Many STIs do NOT cause symptoms and symptoms can be mild. Please visit your physician or our doctors at Dr. Tan and Partners clinic at Robertson Quay (Approved Anonymous HIV Screening Clinic) for more guided tests.

Dr. Tan

Remember: HIV and most STIs have no signs or symptoms – get tested regularly (at least once a year).

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 Sexual Transmitted Infections

Microorganism such as viruses, bacteria, parasites and protozoa are the cause of the infections. These infections are then transmitted from one person to another person during sexual intercourse and other sexual activities. Hence, They are called Sexual Transmitted Infections.

Syphilis
It is a serious disease that can lead to blood vessel and brain damage. The initial symptom is a painless ulcer that can be in the anus and therefore not easily seen. Early detection can lead to a complete and early cure.

Gonorrhea
Gonorrhea bacteria can grow in the warm, moist areas of the reproductive tract, the urethra (the tube that carries urine from the bladder to outside the body) in men. The bacteria can also grow in the mouth, throat, and anus.

Chlamydia
It is the most common STD in Singapore. Aside from screening the Penis, MSM who have anal sex should also test for this STD from the Anus/Rectum. You can still get chlamydia even if your partner does not ejaculate.

Viruses
Human Immunodeficiency Virus (HIV)
It is the virus that weakens part of our immune system. Our immune system protects us from infection, disease and cancer. And HIV is the cause of AIDS over a period of time if left untreated.

Genital Herpes
It is caused by two types of viruses. The viruses are called herpes simplex type 1 and herpes simplex type 2. Fluids found in a herpes sore carry the virus, and contact with those fluids can cause infection.

Hepatitis A, B and C
The prevalence of Hepatitis A, B and C among MSM is high. These diseases affect the liver and have different symptoms. Vaccination is a very cost effective way to prevent such infections. If you already have been vaccinated, speak to your Doctor about doing a serologic test to ensure the antibodies are enough.

Human papilloma virus (HPV)
It cause Peri-Anal Warts - A wart is a small, rough growth on the skin resembling a cauliflower or a solid blister. There is no blood or urine test for this. Doctor will have a check on your peri-anal area carefully for the presence of warts.

Certain strains of HPV will not cause warts but might increase the risk of Anal Cancer. This is more so in MSM who also suffer from HIV. Speak to your Doctor about doing an anal swab for cancer causing HPV and anal cancer.

HPV vaccines are now available for men to protect you against warts and cancers.

Pubic lice (“crabs”)
They are parasitic insects found in the pubic or genital area of humans. Pubic lice usually spread through sexual contact and are most common in adults. They can infect people who frequent bathhouses.

Scabies
It cause a skin rash composed of small red bumps and blisters and affects specific areas of the body. Direct skin-to-skin contact is the mode of transmission.
What is HIV

Human Immunodeficiency Virus (HIV) is a virus that weakens our immune system. Our Immune system protects us from infections, cancer and disease. There is no vaccine or cure yet for HIV infection but with early screening and detection and treatment people living with HIV can still lead normal lives.

When our immune system is so weakened by a HIV infection that is not treated, it can lead to Acquired Immune Deficiency Syndrome (AIDS).

How is HIV Transmitted

HIV is transmitted by body fluids of a HIV +ve person. These body fluids can be transmitted via sexual intercourse, blood transfusion, sharing of infected needles or breastfeeding and therefore HIV infection..

These body fluids are:
- Blood
- Semen (cum)
- Pre-semenial fluid (pre-cum)
- Rectal fluids
- Vaginal fluids
- Breast milk

For transmission to possibly occur, these body fluids must come into contact with damaged tissue or mucous membrane. Mucous membranes are the soft, moist areas just inside the rectum, the opening of the penis, and the mouth.

Understanding Window period

The window period is the time between potential exposure to HIV infection and the point when the test will give an accurate result. During the window period a person can be infected with HIV and be infectious but have a negative HIV test.

Our 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. The HIV 4th Generation Test is also called the Combo test or the Duo test can detect most HIV infections as early as 4 weeks.

Remember: HIV and most STIs have no signs or symptoms – get tested regularly (3 - 6 months).
The Signs & Symptoms of STI

Many STDs can infect you and yet show no symptoms. Or they may stay in your body for months to years before they show any symptoms.

You cannot determine that your partner has no STDs just because he also has no symptoms. If you have been infected with an STD and show no symptoms you can still pass it on to your partner.

Chlamydia
This is the commonest STD in Singapore. Unfortunately, 40% to 60% of people do not show any symptoms. Even when symptoms do appear, they are often mild and disappear quickly. The common symptoms are pain passing urine, discharge from the penis or anus.

Gonorrhea
The symptoms can occur as early as 2 days after exposure but in some people it might take months to show symptoms. In 10% of people there are no symptoms at all. The common symptoms are pain passing urine and a discharge from the penis or anus.

NSU
It very commonly causes no symptoms at all. The common symptoms are mild discomfort passing urine or a mild discharge.

Herpes
It can infect a person for years without showing any symptoms. Sometimes the symptoms are so mild they go unnoticed. For people who do get symptoms, the first time is the worst.

The common symptoms are painful blisters that burst to form painful ulcers. This is usually preceded by a flu-like illness, itching, tingling and pain in the genital area. The first episode is usually very painful and can last up to 3 weeks without treatment.

Hepatitis A, B and C
Some people never develop any symptoms. Or the symptoms are so mild that they go unnoticed. The common symptoms are nausea, loss of appetite, fever, itching, yellowing of the skin or eyes. Smokers sometimes lose their urge to smoke.

Syphilis
Its symptoms can be so mild that they go unnoticed.

The first sign occurs between 9 to 90 days after exposure. It is a painless ulcer where the Syphilis entered the body. It can be on the penis, vagina, rectum, tongue or lips. The ulcer disappears without any treatment which gives patients a false sense of security.

Years later it will surface again as a rash all over the body and fever. If at the time it is still not treated it will affect the brain and major blood vessels of the body causing severe illnesses.

Molluscum Contagiosum
It commonly appears as discrete pearly round lesions on the skin. They are completely painless but might be itchy.

HPV
It commonly appears as skin colored cauliflower like lumps on the skin.

Scabies and Lice
It commonly causes a lot of itching especially at night. Under good lighting and magnification you can actually catch the Scabies which look like translucent tiny insects.
### The Signs & Symptoms of HIV and AIDS

#### Stage 1: Acute-Retroviral Syndrome
(2 to 6 Weeks after infection)

**Symptoms:**
- General – Fever, Sweats, Lethargy, Malaise, Swollen lymph nodes, Weight Loss
- Skin – Rash, Ulcers, Sore throat
- Digestive – Nausea, Diarrhea, Loss of Appetite
- Neurological – Headache
- Musculo-Skeletal – Muscle aches, Joint aches

Not everyone will develop all these symptoms. These symptoms can develop in varying combinations.

The most common symptoms are fever, sore throat, rash and swollen lymph nodes.

#### Stage Two: Chronic HIV Infection
(After 6 Weeks or longer)

**Symptoms:**
- Experience no HIV-related symptoms, or only mild ones.

Early detections and treatments can help slow or stop the progress of HIV to AIDS.

#### Final Stage: AIDS (Acquired Immunodeficiency Syndrome)
Transition from the clinical latency stage to AIDS.

**Symptoms:**
- Rapid weight loss
- Recurring fever
- Profuse night sweats
- Extreme and unexplained tiredness
- Prolonged swelling of the lymph glands in the armpits, groin, or neck
- Diarrhea that lasts for more than a week
- Sores of the mouth, anus, or genitals
- Pneumonia (Lung Infection)
- Red, brown, pink, or purplish blotches on the skin or inside the mouth or nose
- Memory loss
- Depression

You are also considered to have progressed to AIDS if you develop one or more opportunistic illnesses, regardless of your CD4 count.

Without treatment, people who progress to AIDS typically survive about 8 - 10 years.

Each of these symptoms can be related to other illnesses. The only way to know for sure if you are infected with HIV is to get tested.
STI symptoms for TOP

STD symptoms you can get if you insert your penis into your partner’s anus.

<table>
<thead>
<tr>
<th>Classification</th>
<th>The Symptom</th>
<th>The Cause</th>
<th>When it appears</th>
</tr>
</thead>
<tbody>
<tr>
<td>Urinary</td>
<td>Pain passing urine</td>
<td>Chlamydia</td>
<td>about 2 - 30 days</td>
</tr>
<tr>
<td></td>
<td>Discharge</td>
<td>Gonorrhea</td>
<td>Gonorrhea usually presents the earliest.</td>
</tr>
<tr>
<td></td>
<td>Pain or discomfort in the testis</td>
<td>Ureaplasma</td>
<td>90% of people will get symptoms by 7 days.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Urealyticum</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Mycoplasma Hominis</td>
<td></td>
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<tr>
<td></td>
<td></td>
<td>Other NSU bacteria</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Trichomonas</td>
<td></td>
</tr>
<tr>
<td>Skin</td>
<td>Ulcers</td>
<td>HPV</td>
<td>80% of people infected with Chlamydia will not show any symptoms at all.</td>
</tr>
<tr>
<td></td>
<td>Blisters</td>
<td>Herpes</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Growths</td>
<td>MCV</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Syphilis</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Scabies and Lice</td>
<td></td>
</tr>
<tr>
<td>General</td>
<td>Fever</td>
<td>HIV</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Swollen lymph nodes</td>
<td>Syphilis</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Hepatitis</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Herpes</td>
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**Urinary Symptoms** (commonest STD symptoms)

Pain or discomfort when passing urine – This is usually felt in the urine tube within the penis (urethra) or at the tip of the penis. Some people describe it as ‘burning’ some describe it as an itch. Gonorrhea usually causes more pain. Chlamydia less pain or hardly any pain at all, just a weird sensation. Trichomonas causes more itching.

Discharge from the penis - Yellow, white or clear liquid coming out from the tip of the penis. Gonorrhea usually causes more yellow and high volume discharge. In fact enough to make a whole mess of your clothes. Most of my patients with Gonorrhea have to put a tissue around the tip of the penis to collect the discharge. Chlamydia and NSU causes a discharge of much less volume and also less yellow.

Pain or discomfort in the testis - This is a symptoms quite classical of Chlamydia. The discomfort can range from being very mild to quite severe. There might even be some swelling of the scrotum but this is rare.

**Skin Symptoms**

Ulcers - Do not mistake ulcers for lumps or pimples on the skin. Ulcers are actual breaks or craters on the skin. They are always wet looking. If the ulcers are painful, small (3mm to 5mm), multiple (3 to 5 at least) and are surrounded by red skin, it is likely to be Herpes. If there is only 1 ulcer, it is painless and rather big (8mm or bigger) it is likely to be Syphilis. If it is 1 ulcer, big and very painful with very swollen and painful lymph nodes along your groin crease, it is likely to be a Chancroid.

Growths - What we are talking about here are lumps and bumps on the skin. If the lump is skin colored and looks like a cauliflower, it is likely a wart caused by HPV. If the lumps look like little pearls stuck onto the skin, it is likely to be Molluscum Contagiosum Virus.

Blisters - Blisters are small fluid filled sacs on the skin. They look like little bubbles on the skin. These are almost always caused by Herpes.

Itch - This is typical of lice and scabies. The itch is usually very bad and persistent. It can be a lot worse at night. Under good lighting, the lice can actually be seen on the skin. It usually hides in dark hair bearing areas like underneath the scrotum.
General Symptoms
These symptoms are called general symptoms because they can be caused by a variety of illnesses and not necessarily by STDs.

Fever - Basically anything and everything causes fever. From your common cold to HIV. So if you do develop a fever after a sexual exposure, see your doctor but there is no reason to panic.

Rash - Again a terribly non-specific symptom. Could be caused by an allergy or HIV or Syphilis. The HIV rash looks like measles and usually appears 3 weeks from exposure. The Syphilis rash looks like red spots with flaky skin around them. Classically they appear on the palms and soles which is rare for other rashes. They can appear anytime from 2 to 6 months after infection.

Swollen Lymph Nodes - The lymph nodes are part of the body’s natural defenses. When one part of the body is infected, the lymph nodes surrounding it will swell and sometimes become painful. This is the way the body fights the infection. Swollen lymph nodes occur all the time. Even the common cold can cause lymph nodes to swell. If the lymph nodes along the groin crease (inguinal lymph nodes) are swollen, this can suggest infections like Herpes, Gonorrhea, Chlamydia, Chancroid. If other lymph nodes like on the neck or under the armpits are swollen, this is too general to know if they are caused by STDs or not.

Loss of appetite, feeling weak, loss of interest in smoking - I put these symptoms here because they can be caused by Hepatitis. But I’m sure you can appreciate that almost any illness, even anxiety, can cause these symptoms.

Prostatitis and Bareback
The most common cause of Prostatitis especially in young men is Infection. These are frequently Sexually Transmitted Infections (STIs) such as Chlamydia, Gonorrhea and NSU organisms such as Ureaplasma and Mycoplasma. Urinary Tract Infections (UTIs) such as E. Coli, Klebsiella can also cause Prostatitis. Tuberculosis is a rare cause of Prostatitis.

MSM who are the "top" in anal sex are at a higher risk of contracting prostatitis.

What are the symptoms of Prostatitis?
Symptoms of Prostatitis vary greatly. Patients can suffer from systemic symptoms of infection including fever, chills and rigors. This is especially when the infection of the prostate is quite severe and caused by an Infection.

More localized symptoms include pain when passing urine, erectile dysfunction, discharge from the penis, a heaviness or dragging sensation in the scrotum and pain at the tip of the penis. Other symptoms include a constant need to go to the toilet to pass urine, low back pain, muscles aches, poor flow when passing urine or pain during ejaculation.

What do I do if I suspect I have Prostatitis?
The examination might involve a Digital Rectal Examination (DRE). This is done by the Doctor gently inserting a lubricated gloved finger into your rectum to feel for your prostate. The process itself is not painful. However, you might feel some pain when the Doctor presses on your prostate gland.

What are the treatments for Prostatitis?
Treatment for Prostatitis depends on the cause. Infections are treated with antibiotics, nerve stabilizers and anti-inflammatories. Doctor might also ask you to have repeat visits for prostatic massage.

Electro Shock Wave treatment to the prostate induces inflammation and has been used successfully in the treatment of Chronic Prostatic Pain. This is a painless procedure where a machine is used to send Shock Waves into the prostate.
Chlamydia trachomatis (CT)

Chlamydia trachomatis (CT) is the commonest STD that can infect both men and women.

The incidence is 2-3 times that of gonorrhoea. You can get CT by having anal, vaginal or oral sex with someone who has Chlamydia. Occasionally, you can also get CT infection in your eyes (conjunctivitis) from spread by the fingers from the genitals to the eye. Also, if you are pregnant, you can pass on Chlamydia to your baby during childbirth which could cause eye infection or lung infection in your newborn.

Risk factors:
Multiple sex partners or a new sexual partner
Younger age group (age 15-24 years)
Unprotected sex
History of previous sexually transmitted disease (STD) or current co-infection with another STD.

Symptoms:
Most individuals with Chlamydia have no symptoms, with up to 50% of infected males and 80% of infected females remaining asymptomatic. As a result, diagnosis is usually delayed. Even when Chlamydia causes no symptoms, it can still damage your reproductive system.

If you do have symptoms, they may appear several days to weeks after having sex with an infected partner.
- Penile discharge (usually yellow thick discharge from the urethra)
- Pain or burning sensation when urinating
- Itch or discomfort around the penis
- Pain and swelling in one or both testicles (less common)
- Fever

Treatment:
Chlamydia can be easily cured with the right antibiotics. Sexual partners also should be tested and treated.

After treatment of Chlamydia it is recommended to get tested again to avoid treatment failures (rare), relapse or re-infection. Re-infection is very common and is usually related to non-compliant of medications, non-treatment of infected sexual partners or acquisition from a new partner; hence it is important that all sexual partners should be tested and treated.

You should refrain from having sex until both you and your sex partner have completed treatment or as advised by your doctor.

The use of latex condoms can help minimize the chances of re-infection.

Complications:
Chlamydia can cause epididymitis (infection in the tube that carries sperm from the testicles) causing pain and fever. Rarely, it causes infertility in men.

Also, untreated Chlamydia may increase your chances of getting other STDs, especially gonorrhoea.

Patients with Chlamydia also have a higher frequency of getting Reiter syndrome (inflammation of the urethra, eyes (conjunctivitis) and joints).

Untreated chlamydia is also linked with an increased risk of cervical cancer and also HIV infection. If you think you are at risk of contracting chlamydia, it would be advisable to get tested as it is an easy and quick urine test and chlamydia is easily treated.
STI Symptoms and Oral Sex
STI symptoms you can get if you use your mouth on your partner’s genitals.

<table>
<thead>
<tr>
<th>Classification</th>
<th>The Symptom</th>
<th>The Cause</th>
<th>When it appears</th>
</tr>
</thead>
<tbody>
<tr>
<td>Throat</td>
<td>Sore throat Painful throat Pus on the tonsils</td>
<td>HPV Gonorrhea Chlamydia Herpes</td>
<td>about 2 weeks to months to appear</td>
</tr>
<tr>
<td>Skin</td>
<td>Ulcers &amp; Blisters around the mouth</td>
<td>HPV Herpes Syphilis</td>
<td>less than a week to months to appear</td>
</tr>
<tr>
<td>General</td>
<td>Fever Swollen lymph nodes</td>
<td>Herpes Gonorrhea Chlamydia</td>
<td></td>
</tr>
</tbody>
</table>

Throat Symptoms
These symptoms are very much like any other sore throats you have had in the past. It is more suggestive of an STD if the pain is very severe or there is yellow pus on the tonsils. Most people think the tonsil is the teardrop shaped thing that hangs down in the middle at the back of the mouth. This is the uvula, it is not the tonsils. The tonsils are the 2 spongy round things you see on the sides.

Since the sore throats caused by STDs like Gonorrhea or Chlamydia can be no different from your usual sore throat, the only way to know if you have caught an STD in the throat or not is to get a throat swab.

Very painful ulcers in the throat especially if the lymph nodes in the neck are swollen and tender, is very likely to be caused by Herpes.

Although not common, you can also see warts in the mouth caused by HPV. These look like red colored growths in the mouth most commonly found on the inner lining of the cheek.

Skin Symptoms
Ulcers/Blisters - This applies mainly to Herpes. This appears as painful blisters and/or ulcers usually on the line where the lips and the skin meet (vermilion border). However, these ulcers and blisters can also happen anywhere on the face. Ulcers are breaks in the skin. They are usually wet. If the area of skin surrounding it is red, this is more suggestive of Herpes. Blisters are fluid filled sacs like bubbles on the skin. Herpes ulcers are usually painful.

If you have a single painless ulcer that is slightly bigger (> 8mm), it may be a symptom of Syphilis. This is rare in oral sex but still possible!

Growths - As discussed above, HPV can cause growths inside the mouth. These same growths can also appear around the mouth and lips although this is rare. This will look like skin colored lumps which have an uneven surface like a cauliflower.

General Symptoms
Swollen lymph nodes - Swelling of the lymph nodes is a normal and natural way the body fights off an infection. When an area is infected, the lymph nodes close to it will swell to help fight off the infection. So if there is an infection in the throat, the lymph nodes in the neck will swell. This is a very general symptom and can be caused by STDs or non-STD infections.

Fever - This is an extremely rare symptom for STDs affecting the throat and mouth. If you have a fever, chances are that it has absolutely nothing to do with your oral sex encounter.
Throat Gonorrhea and Oral Sex

It can be spread via deep kissing and oral sex. Although it can cause severe throat pain, it is frequently asymptomatic. So if you have used your mouth during a sexual contact, and your partner has Gonorrhea, the chances are you could very well have throat Gonorrhea.

What is Throat Gonorrhea?
Throat Gonorrhea (aka Gonorrhea of the Throat, The Clap) is an infection of the throat by the bacteria Neisseria Gonorrhea.

Why your Throat can be infected with Gonorrhea?
Let’s get back to basics. Gonorrhoea is a bacteria. It can and will infect any area of the body that is soft, warm and moist, namely mucosa. The 3 areas of mucosa exposed to the environment are the genital tract, anus and throat. So, if the Gonorrhoea bacteria lands on any of these areas, it will set up home and cause an infection.

Needless to say, these 3 areas of mucosa frequently come into contact during a sexual encounter. Gonorrhoea can therefore pass from one area to another as long as they come into contact. So pick any combination you want; penis-mouth, penis-anus, anus-mouth, mouth-mouth etc etc.

As long as one party has Gonorrhoea, the other has a chance of catching it.

How do I know I have it?
90% of the time, Throat Gonorrhea has no symptoms. 10% of the time, it causes a sore throat, fever and swollen neck glands. This usually happens 2 to 10 days after exposure.

How can I catch it?
Throat Gonorrhea is caught when you have unprotected oral sex with a partner who is infected with gonorrhea. It is much easier to catch Throat Gonorrhea via receptive penile oral sex (i.e. having your partner’s penis in your mouth) than through receptive anal oral sex (i.e. licking or sucking your partner’s anus).

If I have Throat Gonorrhea can I pass it to my partner?
Yes. If you have Throat Gonorrhea, you can pass it to your partner by having unprotected oral sex. If your partner develops symptoms of Gonorrhea (pain passing urine, discharge) after having oral sex with you, you should have yourself checked for Throat Gonorrhea.

How do I check for Throat Gonorrhea?
See your doctor. He will take a swab from your throat and send it to the lab for a special culture. Please let your doctor know you are worried about Throat Gonorrhea. It requires a special swab. The normal swab for Strep Throat will not detect Throat Gonorrhea.

How is Throat Gonorrhea Treated?
The commonest treatment for Throat Gonorrhea is an injection of an anti-biotic called Ceftriaxone. If you are unable to take this injection you will be given pills instead. You might need to visit the doctor again to make sure the Throat Gonorrhea is fully cured.

How can I protect myself from Throat Gonorrhea?
Always use a condom when having oral sex.

Are there other STDs associated with Throat Gonorrhea?
Yes. If you have Throat Gonorrhea you likely will have Gonorrhea in other areas such as the Urethra (urine tube) or Anus. You should ask your doctor to check for these too.

Throat Gonorrhea is also associated with other STDs such as HIV, Syphilis and Hepatitis B.
Getting HIV from Oral Sex

What you need to know:

It is possible but extremely rare. The risk is much lower than anal or vaginal sex. Scientific Data on HIV transmission in Oral Sex is not strong. The type of Oral Sex that carries the highest risk is Receptive Fellatio. Ejaculation, Gum Disease, Poor Dental Hygiene, Ulcers in the mouth and the presence of blood can increase the risk.

Oral sex refers to contact of the mouth to the ano-genital region.

- Receptive Fellatio (using your mouth on your partner’s penis)
- Insertive Fellatio (inserting your penis into your partner’s mouth)
- Anulingus (using your mouth on your partner’s anus)

While every one of these oral sex acts have case reports suggesting that they are possible, the only one with enough evidence to estimate a risk is Receptive Fellatio.

Therefore, it is accepted by most experts that this is the highest risk of all sex acts.

What exactly is the risk of contracting HIV from Oral Sex?

Unfortunately, no one knows for sure. Most experts would agree that risks are extremely low.

Factors that increase the risk of transmission are:

- Mouth Ulcers
- Gum Disease
- Use of Crack-Cocaine
- Presence of blood (e.g. during menses)
- High HIV Viral Load
- Ejaculation

There have been many studies done on the transmission of HIV in oral sex. The vast majority concluded that oral sex in itself is NOT a risk factor for HIV transmission.

There were however a handful of studies that found oral sex to be significantly associated with HIV infection. These studies focus on MSM (men-who-have-sex-with-men), CSWs (commercial sex workers) and people from lower socio-economic groups with a higher incidence of poor oral hygiene and mouth sores.

What serves for more scary reading are the case reports. Bear in mind that case reports are not as scientifically or statistically significant or important as clinical studies.

That said, there have been many case reports on possible Oral transmission of HIV. More notable cases include:

- Female to female transmission of HIV via oral sex
- A man who was bitten by a HIV +ve patient while trying to help him during a seizure

Studies conducted in San Francisco and London in 2000 and 2001 amongst MSM indicated that 6% to 8% of HIV +ve cases were believed to be cause by oral sex. Note that this does NOT mean the risk of getting HIV from oral sex is 6% to 8%.
So what exactly is the risk of getting HIV from oral sex?

No one really knows. A systematic review done in 2008 concluded that there was insufficient data to precisely estimate the risk. In my opinion, there are so many variable factors that there is really no way to accurately estimate the risk anyway.

However, everyone would agree that the risk is less than penetrative sex which has been estimated to be anywhere between 1% and 0.01%. So what we can say at this point in time is that the risk of contracting HIV via oral sex is less than this.

The only type of oral sex where there was any kind of risk estimation at all was receptive fellatio (the partner using his mouth) amongst MSM. The magic number given to this per-act-risk is 0.04%. Even then, some experts believe that this risk was over estimated because it was calculated from very complex mathematical models.

What is in saliva that kills HIV?

In 2008, a Swedish research team discovered that HIV –ve people produced antibodies in their saliva that can ‘kill’ the HIV virus. This provided an explanation as to why HIV transmission via oral sex is so low.

Another study found that the concentration of saliva is so low (i.e. hypotonic) that it ‘kills’ the white blood cells that carry the HIV virus. There was an experiment done in the lab (not on live patients) to show that if the volume of semen is high enough, it makes the overall environment closer to the concentration of cells (i.e. isotonic) and therefore increases the chance of cell survival and as a result increases the risk of HIV infection. This may explain why ejaculation is thought to increase HIV risk in oral sex.

There was also a study that suggested that a chemical found in saliva called Mucin can also inactivate the HIV virus.

The real problem is that there have not been any good quality studies on HIV and Oral Sex. Most are based on interviewing HIV +ve patients on their sexual practices. So there is a problem of ‘recall bias’ (i.e. they forgot or their lying).

Furthermore, most studies involve relatively few participants. Since the incidence of HIV from oral sex is so low in the first place, many studies did not even have a single case of HIV transmission so were unable to estimate the risk in anyway.

So far in the studies that have been done, the estimated risk of contracting HIV from oral sex is either zero or really close to zero. So close to zero that physicians like myself find it hard to counsel patients who are concerned about getting HIV from oral sex. On the one hand, we do not want to tell them with absolute certainty that they are not at risk, on the other hand, we do not want to unnecessarily play up the risk leading to unwarranted anxieties, tests and treatments.
STI Symptoms & Bottom

STI symptoms you can get if you allowing your partner to insert his penis into your anus, allowing your partner to use his mouth on your anus, allowing your partner to insert any objects into the anus including fingers and sex toys.

<table>
<thead>
<tr>
<th>Classification</th>
<th>The Symptoms</th>
<th>The Cause</th>
<th>When it appears</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anal</td>
<td>Discharge</td>
<td>HPV</td>
<td>about 2 - 3 days to a month to appear</td>
</tr>
<tr>
<td></td>
<td>Discomfort</td>
<td>Gonorrhea</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Bleeding</td>
<td>Chlamydia</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>It is very important to remember that most STD infections of the Anus will not show any symptoms at all.</td>
</tr>
<tr>
<td>Skin</td>
<td>Ulcers</td>
<td>HPV</td>
<td>Syphilis 9 to 90 days. Herpes can be within a week or can take months. HPV which commonly appears at 9 to 6 months post infection.</td>
</tr>
<tr>
<td></td>
<td>Blisters</td>
<td>Herpes</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Growths</td>
<td>MCV</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Syphilis</td>
<td></td>
</tr>
<tr>
<td>General</td>
<td>Fever</td>
<td>Herpes</td>
<td>Swollen lymph nodes on their own are not a symptom of STDs.</td>
</tr>
<tr>
<td></td>
<td>Swollen lymph nodes</td>
<td>Syphilis</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Gonorrhea</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Chlamydia</td>
<td></td>
</tr>
</tbody>
</table>

**Anal Symptoms**

Discharge - This is basically a liquid coming out of the anus. Very rarely it is yellow and high volume. If this is so, it is almost always due to Gonorrhea. More often than not, it is very mild and a mucus like appearance and consistency. Sometimes patients do not even see a discharge but they feel that the anus is wet all the time. Discharge from the anus is commonly caused by Chlamydia or Gonorrhea.

Discomfort - This can range from actual discomfort to feeling like they need to poo all the time. It is never actually painful. If it is painful, it is more likely due to piles or an anal fissure rather than an STD.

Bleeding - This is also a rare symptom of an STD infection. If we see bleeding we would more often think of piles and anal fissures.

**Skin Symptoms**

Growths - This is extremely common and is usually caused by HPV. HPV can infect the anus even if you do not have anal sex. HPV infection of the anus can cause Anal Cancer. For all these reasons you really should think about getting a HPV vaccine. This vaccine is recommended for both men and women. Remember, you can get HPV infection of the anus even if you do not have anal sex. Growths due to HPV are called warts.

They look very distinctive. They are often described as skin colored "cauliflower-like" growths. When they grow around the anus they are usually multiple (a few to a lot of them). They can even grow inside the anal canal which makes it very difficult to treat. Because you may not be able to see them, you will usually notice them when you feel soft little lumps around the anus. Another less common growth due to an STD is caused by Molluscum Contagiosum Virus. This looks like little pearls that have been stuck to the skin.

Ulcers - The 2 usual suspects are Syphilis and Herpes. Syphilis ulcers are usually single, big and painless. Herpes ulcers are usually multiple, small and painful. Because these ulcers can occur inside the anal canal, you may not see them.

Blisters - This is almost always caused by Herpes. They look like little fluid filled sacs on the skin. They do not usually appear around the anus instead would appear on the butt cheeks. They can cause the lymph nodes in the lower back to swell and cause a bit of a back pain!
General Symptoms
These symptoms are called general symptoms because they can be caused by a variety of illnesses and not necessarily by STDs.

Fever - The STDs that affect the anus almost never cause fever except for HIV. So if you do have a fever, more likely than not it is not due to an STD.

Swollen Lymph Nodes - Lymph nodes close to any area that is infected will swell as part of the body’s natural defense mechanism against an infection. If the anal canal is infected the lymph nodes in the lower back can swell and even become a little tender or painful. This can occur with Herpes, Syphilis, Gonorrhea or Chlamydia.

Rectal Gonorrhea and Anal Sex
Rectal Gonorrhea (aka Anal Gonorrhea, The Clap) is an infection of the Rectum by the bacteria Neisseria Gonorrhea. It can also infected the anus and this is called Proctitis.

How do I know I have it?
Rectal Gonorrhea can cause itching of the anus, blood or mucus when you pass motion, soreness of the anus or a constant feeling like you need to pass motion.

Sometimes, Rectal Gonorrhea causes no symptoms at all.

How can I catch it?
Rectal Gonorrhea is caught when you have unprotected anal sex with a partner who is infected with Gonorrhea.

If I have Rectal Gonorrhea can I pass it to my partner?
Yes. If you have Rectal Gonorrhea, you can pass it to your partner by having unprotected anal sex. If your partner develops symptoms of Gonorrhea (pain passing urine, discharge) after having anal sex with you, you should have yourself checked for Rectal Gonorrhea.

How do I check for Rectal Gonorrhea?
Come see us. We will take a swab from your anus and send it to the lab for a special culture. Please let your doctor know you are worried about Rectal or Anal Gonorrhea. It requires a special swab.

Please know that the symptoms of Rectal Gonorrhea can be very similar to other diseases such as Ulcerative Colitis or Crohn’s Disease. Please ask Our Doctors for more advice.

How is Rectal Gonorrhea Treated?
The commonest treatment for Rectal Gonorrhea is an injection of an anti-biotic called Ceftriaxone. If you are unable to take this injection you will be given pills instead. You might need to visit the doctor again to make sure the Rectal Gonorrhea is fully cured.

How can I protect myself from Rectal Gonorrhea?
Always use a condom when having anal sex. Although this reduces the risk of Rectal Gonorrhea, it is not 100% protective.

Are there other STDs associated with Rectal Gonorrhea?
Yes. If you have Rectal Gonorrhea you likely will have Gonorrhea in other areas such as the Urethra (urine tube) or Throat. You should ask your doctor to check for these too.

Rectal Gonorrhea is associated with HPV (Human Papilloma Virus) infection of the anus and the peri-anal region (area around the anus). This may cause you to develop warts. Certain strains of HPV
Perianal Warts and Bottom

Perianal Warts (aka Peri-Anal Warts, Condyloma Acuminata) are flesh colored, cauliflower like growths in and around the anus that is caused by HPV (Human Papilloma Virus).

How do I know I have it?
Frequently, people only find out they have Perianal Warts if it starts to bleed especially after wiping with toilet paper. (Or if their partner notices it and informs them)

You will be able to feel the growths with your fingers or see them with a mirror. Perianal Warts do not cause any pain or itch.

How can I catch it?
Perianal Warts is caused by HPV. You can catch HPV by having unprotected anal sex with a partner who is infected with HPV. It often causes no symptoms so you can catch HPV from your partner even if he appears completely well.

If I have Perianal Warts can I pass it to my partner?
Yes. If you have Perianal Warts, you can pass it to your partner by having unprotected anal sex. If your partner develops penile warts after having anal sex with you, you should have yourself checked for Perianal Warts.

How do I check for Perianal Warts?
You will be able to see flesh colored, cauliflower like growths around the anus. However, other things such as skin tags can look like Perianal Warts to the untrained eye.

See our Doctors. We will be able to determine if you truly have Perianal Warts. We might need to take a sample of the growth and send it to the lab for confirmation.

How is Perianal Warts treated?
There are many treatments available for Perianal Warts.

Aldara Cream (Imiquinod) has been found to be effective against Perianal Warts. The cream is applied onto the warts 3 to 4 times a week and left for 8 hours. It usually takes more than 6 weeks of application to fully eradicate the Perianal Warts. If too much cream is applied it can cause redness and even blistering of the surrounding skin.

We can freeze the Perinal Warts off with a special device. You might need more than 1 session of freezing to fully eradicate the Perianal Warts.

We can laser the Perianal Warts off. Most times a single session of laser treatment is enough to fully eradicate the Perianal Warts.

How can I protect myself from Perianal Warts?
Always use a condom when having anal sex. That said, condoms only provide 30% protection against HPV infection. There are vaccines available for Men that can protect you against HPV that causes Perianal Warts.

Are there any other diseases and STDs associated with Perianal Warts?
Yes. Perianal Warts are caused by HPV. Certain strains of HPV can cause cancer of the anus. When treating your Perianal Warts please also speak to your doctors about checking for HPV and anal cancer.

Yes. Perianal Warts can be associated with Rectal Gonorrhea, HIV, Syphilis and Hepatitis B.
Syphilis and MSM

Why should MSM be concerned about syphilis?
Most people contracted syphilis without any display of the symptoms after a few months to a few years. The genital sores caused by syphilis in adults also make it easier to transmit and acquire HIV infection sexually.

Men who have sex with men (MSM) have at least 25 times more risk of contracting syphilis compared to heterosexual men.

What is syphilis?
Syphilis is a sexually transmitted infection caused by a type of bacteria called Treponema Pallidum. It is a curable infection, however, if left undiagnosed or untreated, can lead to very serious health complications and even mortality. Syphilis can affect both men and women equally.

How does syphilis get transmitted?
The most common route of transmission is through sexual intercourse, by direct skin or mucous membrane contact with the syphilitic ulcer (called chancre). Chancres can be found anywhere in the body, but commonly occur inside the mouth, anus or genitals. So, syphilis can be transmitted from any type of sexual intercourse including oral sex and non penetrative sex.

However, it is important to know that infection is still possible when the infected person has no symptoms. Syphilis can also be passed on from blood transfusion and sharing of needles with an infected person.

What are the symptoms of syphilis?
Often people infected with syphilis have no symptoms at all. When the symptoms are present, they vary with the stage of the disease

Infectious Syphilis

Primary syphilis
A painless ulcer (chancre) inside the mouth or on the genitals can occur as early as 10 days post exposure, while some may take up to 90 days post exposure to appear. Some people may not realize it because it is painless. After 2-6 weeks, the chancre heals up. If left untreated, the infection remains in the body.

Secondary syphilis
When primary syphilis is not treated, infection enters the blood stream and spreads to other part of the body, this is known as secondary syphilis. If symptoms occur, they typically appear as a rash over the body, palms, soles, or flu like illness (fever, muscle ache, swollen lymph nodes and sore throat). Some may notice patchy hair loss, lesions inside mouth, genital and anus. These symptoms will appear 2 to 6 months after catching the infection and they can last several months. Symptoms may go unnoticed and even disappear on their own but infection still remains if untreated.

Early latent syphilis
This condition means the person caught the infection less than 1 year’s duration without any symptoms.

Non infectious Syphilis (After 1 year, syphilis is usually no longer infectious to sexual partners)

Late latent syphilis
When last risky exposure is more than 1 year, with no symptoms and no obvious damage to body but a positive syphilis antibody is detected, the person can be assumed to have late latent syphilis. If untreated, this stage can last many years or life long and may lead to development of tertiary syphilis.

Tertiary syphilis
This stage occurs 10-30 years after catching the infection and can cause complications to the eyes, brain, nerves, spinal cord, blood vessels, skin, and heart, which may lead to disability or death.
Testing for STIs

Many STDs can infect you and yet show no symptoms. Or they may stay in your body for months to years before they show any symptoms. You cannot determine that your partner has no STDs just because he has no symptoms. If you have been infected with an STD and show no symptoms you can still pass it on to your partner. Condoms reduce the risk of catching STDs but it is not 100% safe.

<table>
<thead>
<tr>
<th>Types of STD Tests</th>
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</thead>
<tbody>
<tr>
<td>(Blood tests)</td>
</tr>
<tr>
<td>Human Immunodeficiency Virus (HIV)</td>
</tr>
<tr>
<td>Syphilis – Treponema (TP Ab, TPHA), Non-Treponemal (VDRL, RPR)</td>
</tr>
<tr>
<td>Hepatitis A</td>
</tr>
<tr>
<td>Hepatitis B</td>
</tr>
<tr>
<td>Hepatitis C</td>
</tr>
<tr>
<td>Herpes Simplex Virus (HSV) Type 1 and 2 (Swab tests also available)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>(Swab / Urine tests)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gonorrhea – Urethra, Vagina, Cervix, Throat Gonorrhea, Rectal Gonorrhea</td>
</tr>
<tr>
<td>Chlamydia - Throat Chlamydia, Rectal Chlamydia, Eye Chlamydia</td>
</tr>
<tr>
<td>Non gonococcal urethritis (NGU)</td>
</tr>
<tr>
<td>Mycoplasma</td>
</tr>
<tr>
<td>Ureaplasma</td>
</tr>
<tr>
<td>Bacterial Vaginosis</td>
</tr>
<tr>
<td>Trichomonas</td>
</tr>
<tr>
<td>Candidiasis</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>(DNA swab tests)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Human Papillomavirus (HPV) – Genitals, Peri-Anal</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Type of Test for HIV</th>
</tr>
</thead>
<tbody>
<tr>
<td>HIV RNA PCR Test</td>
</tr>
<tr>
<td>Blood</td>
</tr>
<tr>
<td>10 - 12 Days</td>
</tr>
<tr>
<td>Period of Exposure</td>
</tr>
<tr>
<td>7 days</td>
</tr>
<tr>
<td>Results</td>
</tr>
</tbody>
</table>

| Rapid Anonymous HIV Combo test |
| Blood or Saliva               |
| 28> Days                      |
| Period of Exposure            |
| 20 mins                       |
| Results                       |

| Rapid Anonymous HIV Antibody |
| Blood or Saliva               |
| 90> Days                      |
| Period of Exposure            |
| 20 mins                       |
| Results                       |
Anonymous HIV Testing

Not all clinics are allowed to conduct anonymous HIV tests. This is because according to the Infectious Diseases Act, all medical personnel are required to inform MOH of the details of any person they know or suspect of being infected with HIV.

Our clinic at Robertson Walk is mandated by MOH as a official Anonymous HIV Testing Clinic.

All Our Friendly Doctors are fully certified and trained in advance HIV testing.

**STEP 1: RECEPTION**
1. Just walk into our clinic Robertson Walk.
2. Let our staff you are here for the 3 step test.*
3. You will be given Anonymous HIV Test (AHT) Registration Form.
4. The form does not require any personal details from you

**STEP 2: SEE OUR DOCTORS**
5. The doctor will see you in his or her room.
6. You will have a private consultation with the doctor
7. Doctor will proceed with the HIV Test

**STEP 3: RESULT and POST-RESULTS CONSULTATION**
8. After 20 minutes your results will be ready
9. Doctor will discuss the results of the test with you

What is the Our “3 Step Test”?

- the Oraquick Advance HIV 1/2 Test, 9.5
- the Determine HIV 1/2 Test and
- the SD Bioline HIV Combo test.

Remember: HIV and most STIs have no signs or symptoms – get tested regularly (3 - 6 months).
How to Protect yourself from STIs & HIV

Use a Condom:
Condoms prevent sexual bodily fluids or blood to pass from one person to another.

With correct and consistent condom use, Latex condoms are highly effective at preventing the transmission of HIV and some other sexually transmitted diseases. “Natural” or lambskin condoms do not provide sufficient protection against HIV infection.

Sharing Needles and Syringes:
Transmission occurs when a person uses the same syringe with a HIV+ve person without first cleaning it. The reuse of a blood-contaminated needles or syringes by another person can be an effective means of transmission because a large quantity of blood can be injected directly into the bloodstream.

Although HIV does not generally survive well outside the body, it can survive for long periods of time (over 28 days) if hermetically sealed in syringe.

Regularly get tested for STIs & HIV:
Know your HIV status. Everyone should be tested for HIV at least once. If you are at increased risk for HIV, you may need to get tested for HIV more than once a year.

If you have HIV, you can get medical care, treatment, and supportive services to help you stay healthy and reduce your risk of transmitting the virus to others.

Sticking to the Right Sexual Partner
Abstain from sexual activity or be in a long-term mutually monogamous relationship with an uninfected partner.

Limit your number of sex partners. The fewer partners you have, the less likely you are to encounter someone who is infected with HIV or another STD.

Human Papillomavirus (HPV) Vaccination
HPV is a virus that is spread through direct contact. i.e. skin to skin contact, sexual contact including vaginal sex, oral sex, anal sex, even handjobs. Basically any sexual contact and condoms offer zero protection against HPV.

Among other things, it causes genital warts. For those of you who have not suffered from genital warts before, you might not fully appreciate the mental anguish and anxiety it brings. For those of you who have, you know exactly what I am talking about.

The HPV vaccine will afford protection against certain HPV-related conditions and cancers in males.

Genital warts are these really ugly fleshy looking things that can grow around your pubic area, penis, vagina, anus and basically everywhere down south. They are ugly, embarrassing and very difficult to get rid of.

Treatment usually involves multiple sessions of painful laser or freezing treatments. Even then, warts can still recur and are even deemed to be ‘incurable’.

HPV in men mostly cause warts but it can also increase the risk of anal cancer especially in HIV positive individuals. HPV has also been linked to throat, anal cancer and penile cancer in men.
HIV Post Exposure Prophylaxis (PEP)

HIV Post Exposure Prophylaxis (PEP) is a medicine given to people who are at high risk of getting HIV. They are up to 99% effective in preventing a HIV infection.

When you have been exposed to potentially HIV infected body fluids and your exposure was less than 72 hours ago, see your doctor immediately about starting PEP.

Factors that can increase the risk of HIV infection include:
• Condom Break
• Presence of Blood (e.g. Menses)
• Presence of Cuts
• Presence of Ulcers
• You are not Circumcised

These medicines have to be started within 72 hours after possible infection/exposure. They are taken twice a day for 1 month.

The side effects vary from person to person and also depend on which medicines are used.

If you are within the first 3 days of possible HIV infection please see us about PEP.

Tablets to prevent HIV – PrEP

PrEP is simply a tablet taken daily that reduces a person’s risk of contracting HIV. It’s that simple. The tablet most studied for use as PrEP contains 2 medicines and its called TRUVADA®.

We must bear in mind that like every other method of HIV prevention, PrEP is not failsafe. It is one of the many weapons in our current arsenal to reduce the burden of HIV on the world. Other prevention methods include:
• Consistent and correct condom use.
• Access to treatment. Treatment as prevention.
• Education.
• Male circumcision.

What are the side effects of PrEP?
Minor side effects such as nausea, headache and weight loss are possible. Major side effects like effects on the kidney and bone density are rare.

In my personal experience prescribing PrEP, I have not come across anything more than some minor nausea.
Hotline

Health Promotion Board (AIDS/STI Helpline)
+65 6295 2944
24-hour (pre-recorded in 4 languages)

1800 252 1324
AIDS/STI Information Hotline (to speak to a counsellor during office hours)

Life Goes On
+65 6254 0212
A self-help group that offers support to heterosexual men with HIV.

Club Genesis
+65 6254 0212
A self-help group that supports men who have sex with men.

Muslim + (M+)
+65 9835 1982
Peer support group catering to infected Malay/Muslim.

AWARE
1800 774 5935 (Mon – Fri 3pm to 930pm)
Women’s action group that provides support for women for a variety of issues.

Oogachaga
6226 2002
Counselling for the gay, lesbian, bisexual and transgender community in Singapore.

The Singapore Anti-Narcotics Association (SANA)
1800 733 4444 (Mon-Sun 7.30am - 12.00am)

Remember: HIV and most STIs have no signs or symptoms – get tested regularly (at least once a year).
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