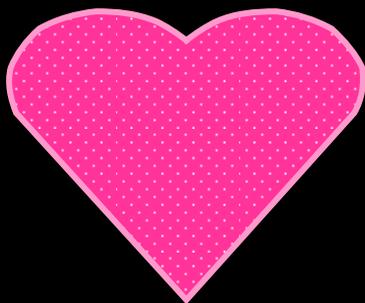


Sexual Health



**Sexual Health and
contraceptive services
available to you**

Sexual health services available to you in York

Your GP can help you with contraception and sexual health issues.

If you are under 25 and want to get tested for Chlamydia you don't necessarily have to go to a clinic. You can order a test by post or you can drop in without an appointment at **YorClinic.**

The Medical Centre on campus can also offer free condoms, contraceptive services and advice on sexual health. Alternatively, **YorClinic at Monkgate Health Centre (situated close to the university campus) is a combined STI and contraceptive service. You can make an appointment over the phone or drop in and wait to be seen. All services are free and completely confidential. The staff are specialists in all aspects of sexual health. They provide family planning (contraception services) including prescription for some contraceptive pills and free condoms, emergency contraception (morning after pill), longer lasting contraception (such as the implant and the coil), confidential advice on pregnancy and your options, STI testing and Chlamydia testing without an appointment.**

YorClinic

**Monkgate Health Centre
31 Monkgate
York
YO31 7WA**

Tel: 01904 721111

**Monday to Wednesday:
8:30 – 19:00 Drop in & appointments**

**Thursday:
12:30-19:00 Drop in & appointments**

**Friday:
8:30-15:00 Drop in & appointments**

**Saturday:
9:00 – 12:00**

NHS Direct

The NHS Direct deal regularly with sexual health queries. They can provide self care advice or suggest where you should go for further treatment, such as your local sexual health clinic.

You can visit the NHS Direct website at nhsdirect.nhs.uk or call 0845 46 47

Contraception

There are lots of forms of contraception available for you to choose. To see all your options, visit the NHS website and click on sexual health. Or you can talk to your GP/nurse about what forms of contraception are available to you.



Condoms

Condoms are a great way to help protect yourself against most sexually transmitted infections (including HIV and Chlamydia), as well as pregnancy. They are also frequently available for free from such places as sexual health clinics and most GP practices (if you're under 25). Condoms should be a matter of routine with all new sexual partners as they act as a barrier to both STIs and sperm.

But remember:

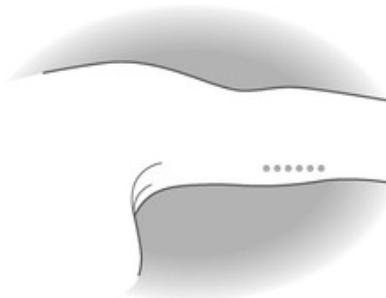
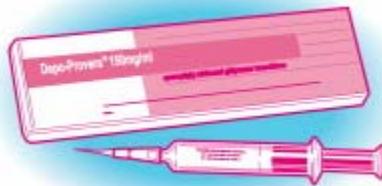
- **Condoms don't last forever. Check the use-by date.**
- **Sperm comes out well before a guy 'comes' so put a condom on before you get going.**
- **Never use a condom more than once**
- **Dispose of your condoms carefully wrapped in paper in a bin, never put them down the toilet as they can cause a blockage and never throw them away in the street or in open spaces.**
- **If you are in a long term committed relationship and want to stop using condoms, both you and your partner should get tested for any STIs.**



Contraceptive implants and injections

Contraceptive implants and injections are long-acting, effective, reversible and progestogen-only methods of contraception. They are over 99% reliable in preventing pregnancy. This means that fewer than 1 in 100 women who use the implant or injection will become pregnant each year. The injection is given every 8-12 weeks and the implant lasts up to 3 years.

The pill, implant or coil will protect you against pregnancy but not against STIs and so should be used with condoms.



Emergency Contraception

Appointments for emergency contraception are available at YorClinic, doctor's surgeries & some pharmacies. Please note, if you have come to the Medical Centre for emergency contraception, the receptionist will need to be made aware of this. This may be done in private if you require.

Emergency contraception should not be used as a form of regular contraception. It will not protect you from pregnancy during the rest of your menstrual cycle. Using it repeatedly can severely disrupt your natural menstrual cycle. It does not protect against STIs.

There are two types of emergency contraception pill.

Levonelle – This can be taken up to three days (72 hours) after unprotected sex and is available free of charge on prescription or can be bought from your local pharmacy. It does not interfere with your regular method of contraception.

ellaOne – This can be taken up to five days (120 hours) after having unprotected sex. It is only available on prescription. It is thought to be more effective than Levonelle, but may prevent other types of hormonal contraception from working for a week after use. It is not recommended for use more than once per menstrual cycle.

The effectiveness of the emergency contraceptive pill decreases over time. If it is taken within 24 hours of having unprotected sex, it prevents 95% of pregnancies.

There is also the copper intrauterine device (IUD). This is a small T-shaped contraceptive device made from plastic and copper that fits inside the womb. It can be used as a method of emergency contraception up to five days after unprotected sex, or up to five days after the earliest time you could have released an egg (ovulation). The emergency IUD has to be fitted by a specially trained doctor or nurse. It is best to contact your GP or local contraception/sexual health clinic to find out where is the best place for you to go if you want an emergency IUD. The IUD stops sperm from reaching an egg and fertilising it. It is the most effective method of emergency contraception and prevents up to 99% of pregnancies.

Unplanned pregnancy

If you unexpectedly become pregnant, you will be able to talk to a GP or nurse about your choices. It is important to do this early. If you need someone to talk to there are places you can ring, such as Brook on 0808 802 1234 or FPA 0845 122 8690 who are there for help and advice on unexpected or unwanted pregnancies.

STIs

If you are sexually active, it is important to have regular sexual health check ups. STIs are very common and it is important to use a condom to prevent them. If you suspect you have an STI, don't be afraid to talk to your GP about it. There can be serious side affects (such as infertility) if they are left untreated. Remember: some STIs have no symptoms so it is important to get checked regularly.

Sexually transmitted infections (STIs) are spread through vaginal, anal and oral sex, as well as through genital contact with an infected partner. Common STIs in the UK include Chlamydia, genital warts and Gonorrhoea.



Chlamydia

Chlamydia is one of the most common STIs in the UK and is really common in under 25 year olds. Most people do not have symptoms but some may notice

In women:

- **A vaginal discharge that is different than usual**
- **The need to pee more often or pain when peeing**
- **Pain during sex**
- **Pain in the lower abdomen**
- **Irregular bleeding between periods or after sex**

In men:

- **A discharge from the tip of the penis**
- **Pain and/or burning when peeing**
- **Irritation at the tip of the penis**
- **Painful swelling of the balls (testicles)**

Because most people experience no symptoms, it is important to be checked regularly. Tests are simple and can be done without a GP or nurse. If your test comes back positive, you can be treated simply by antibiotics. You will also be asked to avoid all sex for 7 to 14 days. It is really important that your sexual partner gets tested too. Chlamydia can be easily passed on so it is likely that anyone you may have had sex with may have the infection too. If your current sexual partner is not treated at the same time as you may get the infection back. If you know that someone you have had sex with (even with a condom) has Chlamydia, it is advised that you get tested as soon as possible.

Genital warts

Genital warts are the second most common STI in the UK. They often look like small fleshy growths, bumps or skin changes that appear on or around the genital or anal area. Genital warts are usually painless and people may carry the virus without having any symptoms. While they do not pose a serious threat to a person's health, they can appear unsightly and be distressing.

The most common places for genital warts to develop in women are:

- **in and around the vagina, between the vagina and the anus and around the anus**

The most common places for genital warts to develop in men are:

- **on the shaft or head of the penis**
- **around the anus or scrotum**

If you think you might have genital warts you should contact your local sexual health clinic or GP practice. You shouldn't attempt to treat genital warts using over the counter medicines and creams. There are several ways to treat genital warts, including a treatment you can use at home. Your doctor or nurse will advise which is the best form of treatment for you.

Genital herpes

Genital herpes is a chronic (long-term) condition with most individuals having reoccurrences.

The first attack of genital herpes can cause several different painful red blisters that burst to leave open sores around your genitals, rectum, thighs and buttocks.

- **painful red blisters that burst to leave open sores around your genitals, rectum (back passage), thighs and buttocks**
- **vaginal discharge in women**
- **pain when you pee**
- **a high temperature (fever) of 38°C (100.4°F) or over**
- **a general feeling of being unwell, with aches and pains**

These symptoms may last for up to 20 days. However, the sores will eventually scab and heal without leaving any scarring. If you have genital herpes for the first time, you will usually receive treatment from a GUM specialist at a GUM clinic (also called sexual health clinics).

If you have a primary genital herpes infection and it is not possible for you to see a GUM specialist your GP may treat you for the condition.

Gonorrhoea:

Gonorrhoea is less common than Chlamydia but still affects thousands of people in the UK. Like Chlamydia, it is easy to treat with a single dose of antibiotics. Gonorrhoea is easily passed through unprotected vaginal, oral or anal sex, sharing vibrators or other sex toys that have not been washed or covered with a new condom each time they are used. It can also be passed from a pregnant woman to her baby.

Symptoms

Not everyone experiences symptoms of Gonorrhoea.

In women

- **an unusual discharge from the vagina, which may be thick and green or yellow in colour**
- **pain or tenderness in the lower abdominal area (this is less common)**
- **bleeding between periods or heavier periods (this is less common)**

In men

Nine out of 10 men who contract gonorrhoea experience symptoms after they are infected, which can include:

- **an unusual discharge from the tip of the penis, which may be white, yellow or green**
- **inflammation (swelling) of the foreskin**
- **pain or tenderness in the testicles or prostate gland (this is rare)**

Both men and women can also catch gonorrhoea at other sites of the body. These include:

- **infection in the rectum, which may cause pain, discomfort or discharge**
- **infection in the throat, which does not usually have any symptoms**
- **infection in the eyes, which can cause pain, swelling, irritation and discharge (conjunctivitis)**
- **pain when peeing**

Getting tested

If you think you might have gonorrhoea we recommend that you get checked at your local sexual health service as soon as possible. It is important to receive treatment for gonorrhoea as quickly as possible. It is unlikely the infection will go away without treatment and, if you delay treatment, you risk the infection causing complications and more serious health problems. You may also pass the infection onto someone else.

HIV

HIV is most commonly caught by having unprotected sex or sharing infected needles to inject drugs. HIV stands for human immunodeficiency virus. The virus weakens your ability to fight infections and disease such as cancer. AIDS is the final stage of HIV infection, when your body can no longer fight life-threatening infections. There is no cure for HIV, but there are treatments to enable most people with the virus to live a long and healthy life.

The HIV virus that causes AIDS is passed on through the exchange of bodily fluids. Normal touching or kissing cannot pass it on. The HIV virus is present in the heterosexual community, but the risk is very low for heterosexual students. For some students the risk might be higher if they have had sexual contact within the higher risk groups in society. These include intravenous drug abusers, the homosexual community, bisexuals and prostitutes. Students who have been sexually active in a country with a high prevalence of HIV infection may also be at greater risk. If you are worried about AIDS and feel that you may have been at risk, you are always welcome to discuss your concerns with the doctor or nurse.

For more information on any of these diseases and other STIs visit: www.yorsexualhealth.org.uk



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University**

Lord Mayor's Walk

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f: 01904 876411

www.yorkmedicalgroup.nhs.uk

