



National Public Health
Service for Wales

Gwasanaeth Iechyd Cyhoeddus
Cenedlaethol Cymru

HIV and STI trends in Wales

Annual Surveillance Report, 2005

Key points

- This report presents data up to the end of December 2004.
- The latest data from genitourinary medicine (GUM) clinics in Wales indicate that rates of STIs are still increasing. Between 2003 and 2004 the number of new cases of gonorrhoea, anogenital chlamydia, herpes and warts diagnosed in GUM clinics in Wales all increased. This trend is confirmed by data on laboratory diagnoses of STI.
- The number of cases of HIV infection newly diagnosed in Wales in 2004 was similar to the previous year at around 100 new diagnoses per year.
- However, the prevalence of HIV/AIDS in Wales continues to increase, partly due to continuing transmission in gay men, partly due to immigration of people who have acquired their infection overseas, and partly due to better survival of those infected with HIV in the past. The total number of people newly diagnosed HIV positive in Wales for 2004 stands at 101.
- After increasing in recent years, new cases of infectious syphilis seen in GUM decreased slightly, from 50 in 2003 to 39 in 2004. Cases are still predominantly in men who have sex with men, although around a quarter of all cases are reported in heterosexual men and women.
- Whilst rates of sexually transmitted infections in Wales have increased dramatically in recent years, it is important to note that they still remain lower than those observed in many parts of the United Kingdom. In 2004, 24 new cases of gonorrhoea were seen in GUM clinics in Wales per 100,000 population, compared to 42 per 100,000 in England. The rate for England outside London for 2004 is 31 per 100,000.
- In 2004, there was a 13% increase of uncomplicated chlamydia infection from 3126 episodes in 2003, to 3541 episodes in 2004. This represents a continuation of the recent trend in increasing rates of diagnoses, partly reflecting increased awareness and improved diagnostic techniques.
- There are still barriers to effective surveillance of STI in Wales. KC60 data are not timely and neither laboratory nor KC60 data can provide data on the incidence of STI in Local Health Board resident populations. As part of the sexual health modernisation programme being led by the Welsh Assembly Government an initiative is underway to improve surveillance of STIs in Wales, through the collection of more timely, person-based, residence-based incidence data.

1. Introduction

This report brings together latest data on sexually transmitted infections (STIs), including HIV/AIDS, in Wales. The report is based on data available at the time of publication. Please note that recent data are provisional and may be liable to change.

The report has been prepared by NPHS Communicable Disease Surveillance Centre (CDSC) with assistance from a small editorial team (Appendix 1). Any comments or queries relating to this report or requests for further information should be directed to NPHS CDSC at: surveillance.requests@nphs.wales.nhs.uk. Further data may be available from the NPHS (www.nphs.wales.nhs.uk) and Health Protection Agency (www.hpa.co.uk) websites.

2. Suggested citation

National Public Health Service Communicable Disease Surveillance Centre. HIV and STI trends in Wales: 2005 Annual Report. Cardiff: National Public Health Service. March 2006.

3. Sources of data

- Results of screening blood donated in Wales to the Welsh Blood Service and National Blood Service (Merseyside and North Wales)
- Clinical reporting of newly diagnosed HIV to Health Protection Agency (HPA) Centre for Infection HIV and STI Department
- Results of the National Public Health Service for Wales (NPHS) Communicable Disease Surveillance Centre 'HIV denominator Surveillance Scheme' The results of clinical testing for HIV infection reported by the NPHS Microbiology laboratories at Cardiff, Swansea, Bangor and Rhyl and the NHS laboratories at Hereford and Royal Glamorgan Hospital, Llantrisant
- Results of the HPA 'Survey of Prevalent HIV Infections Diagnosed' (SOPHID) Scheme
- KC60 diagnostic statistics submitted by departments of genitourinary medicine (GUM) in Wales to NPHS on behalf of the Welsh Assembly Government
- CoSurv laboratory reports of STI from all clinical diagnostic laboratories in Wales. These data exclude laboratory reports of *Neisseria gonorrhoea* and anogenital chlamydia from Royal Gwent, Wrexham and Royal Glamorgan hospitals
- Results of 'Enhanced Surveillance of Syphilis' scheme in Wales: Clinical reports of infectious syphilis to NPHS CDSC from GUM clinics

4. HIV in Wales

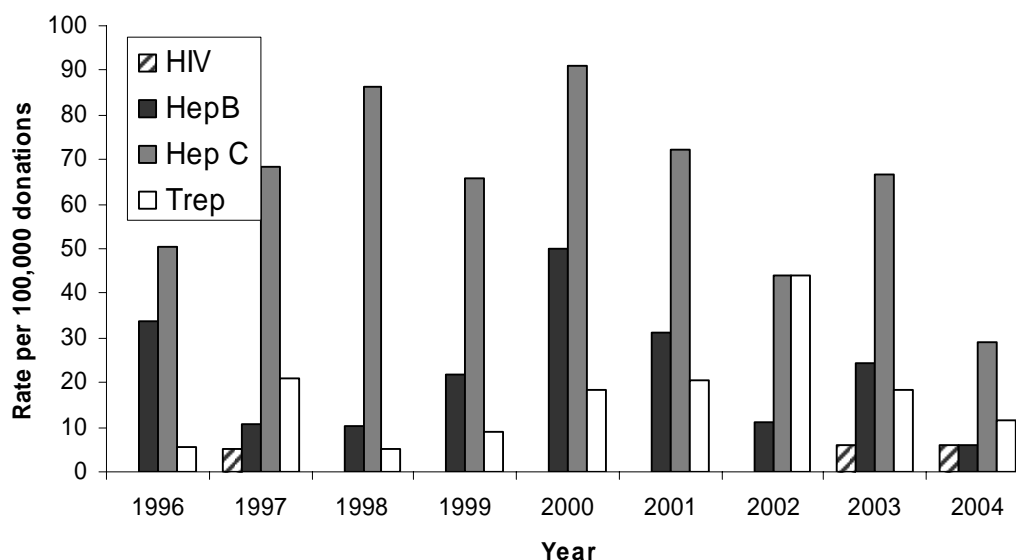
4.1 HIV continues to be one of the most important communicable diseases in the UK. It is an infection associated with serious morbidity, high costs of treatment and care, significant mortality and high number of potential years of life lost. Further information about the epidemiology of HIV/AIDS in the UK can be obtained from the Health Protection Agency website: http://www.hpa.org.uk/infections/topics_az/hiv_and_sti/hiv/hiv.htm

4.2 Surveillance of the HIV epidemic in Wales is carried out using: Results of screening blood donated in Wales to the Welsh Blood Service and National Blood Service (Merseyside and North Wales), newly diagnosed HIV reported to HPA Centre for Infection HIV and STI Department, the results of all clinical testing for HIV infection reported by the NPHS Microbiology laboratories and NHS laboratories at Hereford and Royal Glamorgan Hospital (NPHS CDSC HIV denominator surveillance scheme) and results of the HPA 'Survey of Prevalent HIV Infections Diagnosed' (SOPHID) Scheme

4.3 Blood donations are routinely screened for HIV infection. Blood from donors who are screened positive does not enter the blood supply. Such donors are removed from the donor panel and are not called for donation again

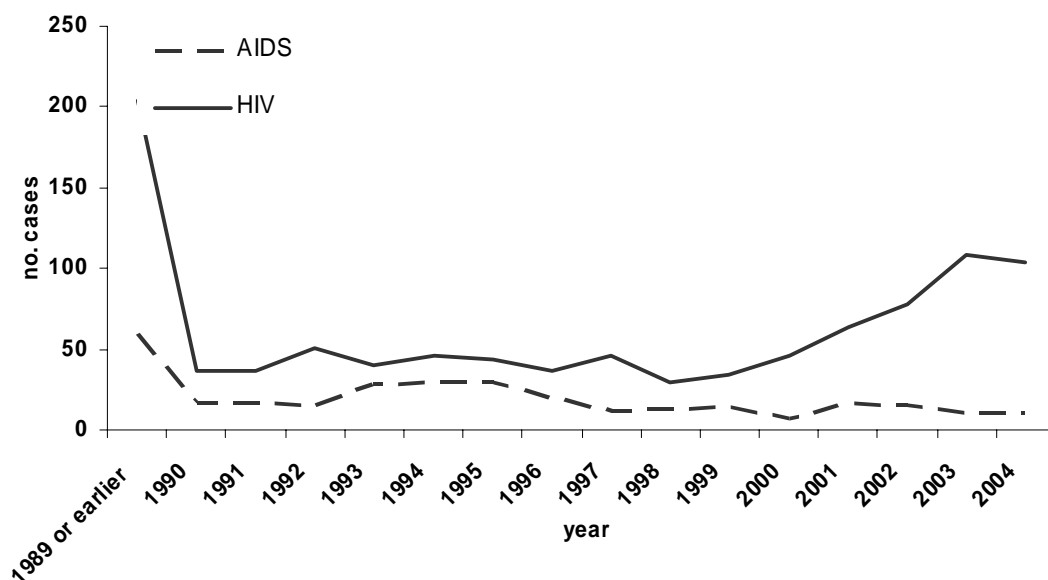
4.4 One prospective new blood donor was screened positive for HIV in 2004 (Table 1). This is the second new donor in two years screened HIV positive. Previous to 2003 no new donor had screened positive since 1997 (Figure 1).

Figure 1. Rates (per 100,000 donations per year) of HIV, hepatitis B, hepatitis C and treponemal infection in prospective new blood donors in Wales, 1996-2004



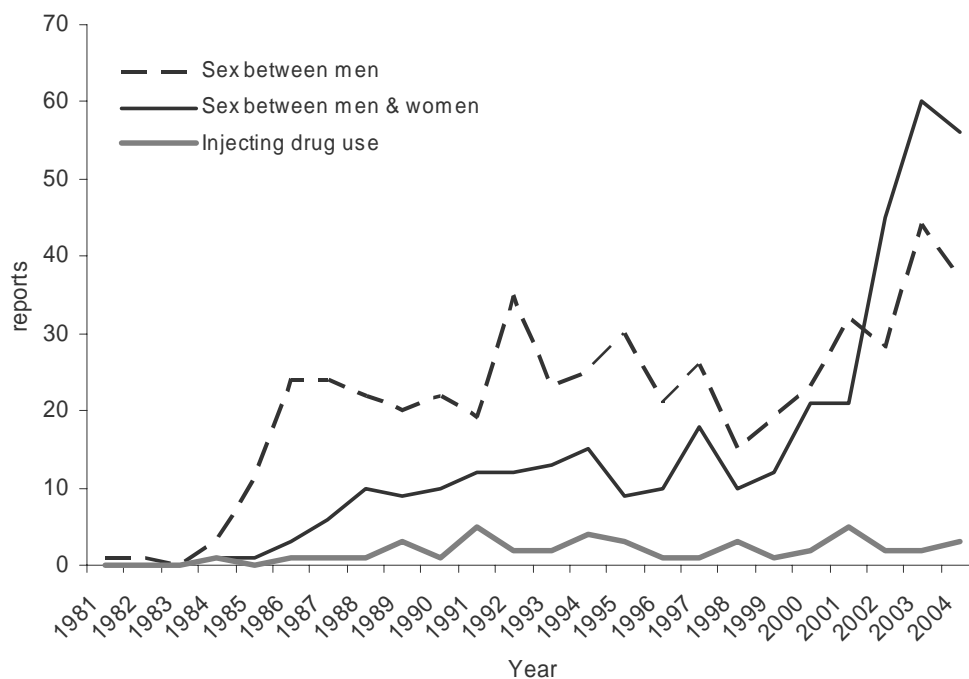
4.5 No established blood donors were screened positive for HIV in 2004 (Table 2). The last time an established donor was screened HIV positive was in 2001.

Figure 2. Clinical reports of HIV* and AIDS in Wales, 1981–2005 by year of diagnosis



* Individuals with laboratory reports of infection plus those with AIDS or death reports for whom no matching laboratory report has been received

Figure 3. Clinical reports of HIV in Wales for selected exposure categories, 1981–2005, by year of diagnosis



4.6 One hundred and four cases of newly diagnosed HIV infection were reported to HPA by clinicians in Wales in 2004. This continues an increasing trend in reporting (Figure 2). By contrast, the number of new reports of AIDS has decreased steadily since the mid-1990s due to advances in treatment.

4.7 During the 1980s and 1990s newly diagnosed HIV positives were most frequently men who reported sex with other men (MSM). However the number of infections in patients reporting sex between men and women as their most likely source of infection has increased sharply in recent years (Figure 3). The number of newly diagnosed HIV positives in Wales reporting injecting drug use as their most likely source of infection has remained low (less than 5 per year).

4.8 Information on the number of HIV antibody tests carried out in Wales per year is available from the NPHS CDSC HIV denominator scheme. The total number of HIV antibody tests being carried out in Wales has been increasing substantially over recent years, from 9009 in 2000 to 30841 in 2004 (Table 3). This increase in testing has been largely due to the introduction of antenatal screening for HIV (Table 4). However the number of tests carried out on samples submitted from other sources have also increased, for example: GUM samples have increased from 3528 in 2000 to 9159 in 2004, hospital in-patient samples have increased from 486 to 956 in the same period. Although the number of new positives has increased, the proportion of tests that are positive declined from 0.5% in 2000 to 0.3% in 2004.

4.9 In 2004 the greatest number of HIV antibody tests were carried out on people submitting sera from health facilities in South East Wales (Table 3). Fewest new positives were identified in North Wales. Region of origin of the sample was not known for a larger proportion of tests carried out in 2003 and 2004. This was due to a change in the way data are collected, the majority of data now being extracted from 'Microbiology Datastore' (See: <http://www.wales.nhs.uk/sites/page.cfm?orgid=368&pid=2285>)

4.10 There has been a dramatic increase both in the number of tests carried out in women and the number of new diagnoses in women in recent years. Of the 101 new positives diagnosed by laboratories in Wales in 2004, 36 were women (Table 4). This compares to 44 in 2003, 31 in 2002, 17 in 2001 and 13 in 2000.

4.11 Of the 101 new positives identified in 2004, 60 submitted samples through genitourinary services, three through their GP, nine through hospital in-patient departments, three through hospital out-patient departments, two through an ante-natal screen, one through casualty departments, one through the blood transfusion service and 22 were from an undetermined source (Table 4).

4.12 In 2004, 52 newly diagnosed HIV positives provided information on the probable source of their infection. 22 men (35% of newly diagnosed men) reported having sex with men as their probable source of infection, this was compared to 24 out of 55 (44%), 24 out of 44 (55%), 30 out of 55 (55%) and 20 out of 35 (57%) in the previous four years (Table 5). It should be borne in mind however that probable source of infection was not known for a greater proportion of men in 2004.

4.13 In 2004, 24 of those newly diagnosed positive were known to have probably acquired their infection through heterosexual sex, 23 reporting a partner overseas (18 from Africa, 2 from Asia, 1 from Europe and 2 with country unknown) and one reporting a partner in the UK (Table 5).

4.14 Two children, one male and one female were reported to have acquired her infection from their mothers.

4.15 The exposure group was not available for 49 of the 101 newly diagnosed positives in 2004, a higher proportion than for previous years. The results of follow up clinical reporting to HPA (Figure 3) indicate that about half of these probably acquired their infection through heterosexual sex and about half were MSM.

4.16 The best indication of the number of people living with HIV/AIDS in Wales, as opposed to the number newly diagnosed, is provided by the Health Protection Agency SOPHID (Survey of prevalent HIV infection diagnosed) scheme which counts the number of people receiving HIV-related care. These data are used in the planning and financing of HIV care services and in health promotion.

4.17 SOPHID data for Wales show a steady increase in the number of people living with HIV, from 332 in 2000 to 677 in 2004 (Figure 4). This increase reflects an increase in new diagnoses but also improved survival of cases due to better treatment.

4.18 In 2004, SOPHID data for Wales showed that residents of Cardiff Local Health Board had the highest prevalence of HIV in Wales (Figure 5).

Figure 4. Number of people receiving HIV-related care in Wales, 2000-2004 (Source: SOPHID)

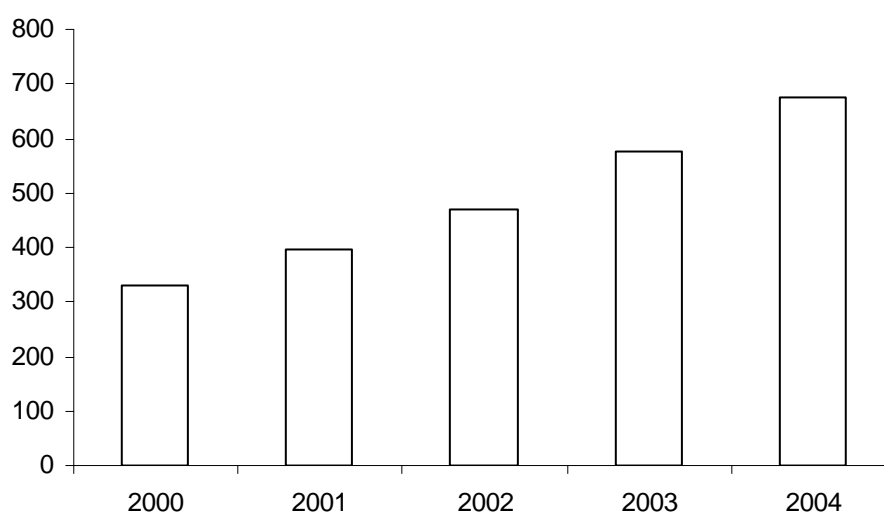
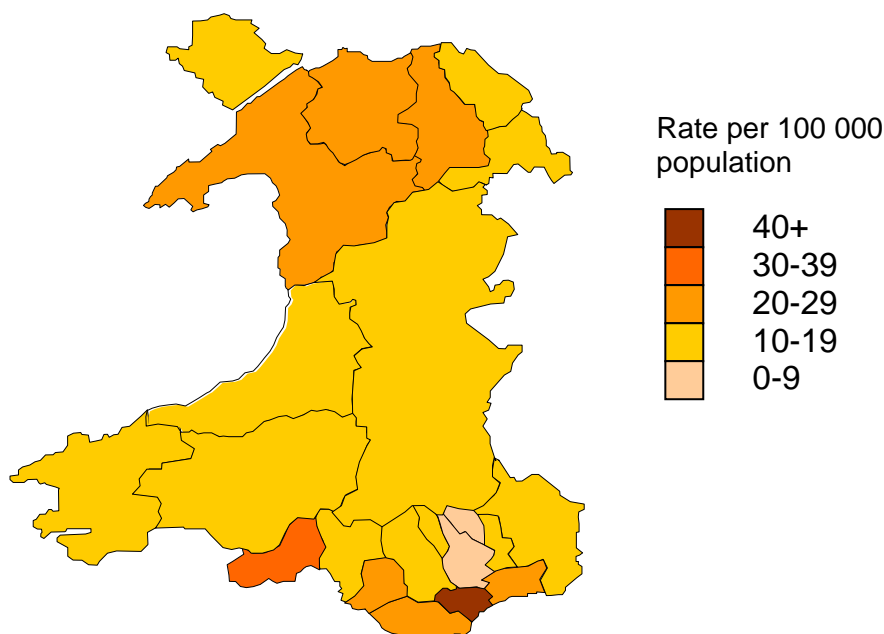


Figure 5. Prevalence of HIV in Wales by Local Health Board of residence, 2004 (Source: SOPHID)



4.19 Table 6 provides a breakdown of HIV cases seen for treatment in Wales in 2004 by age and clinical stage of infection. The majority of cases (46%) were 25 to 39 years old and 228 of the 677 cases were reported as having an asymptomatic clinical stage of infection.

4.20 Table 7 provides a breakdown of cases by risk group by ethnicity. Although the largest group receiving treatment in 2004 were men having sex with men (50%), recent years have seen increases in the number of people receiving treatment for HIV who probably acquired their infection through heterosexual sex (from 90 in 2000 to 258 in 2004) and in those reporting their ethnic group as black-African (from 13 in 2000 to 128 in 2004).

5. Syphilis in Wales

5.1 Syphilis is caused by *Treponema pallidum* subspecies *pallidum*, a spirochete that is a bacteria-like organism. In the UK syphilis infection has become more common in recent years, particularly amongst gay men. The condition is especially significant in women in pregnancy where infection can cause miscarriage, still birth, or foetal abnormality. Further information on the epidemiology of syphilis in the UK can be obtained from the HPA website (http://www.hpa.org.uk/infections/topics_az/hiv_and_sti/sti-syphilis/syphilis.htm).

5.2 Antibody to *Treponema pallidum* persists after treatment and recovery from acute syphilis. Blood donors and some hospital patients are tested routinely for antibody to syphilis which, if present, may indicate infection in the past rather than acute disease. Blood donations which have antibody to *T. pallidum* are not transfused.

5.3 A total of two prospective new blood donors were screened positive for treponemal infection in 2004 (Table 1) giving a prevalence of 11.7 per 100,000 prospective donations (Figure 1).

5.4 Four established donors were screened positive for treponemal infection in 2004 (three in South Glamorgan and one in Gwent, compared to one in 2003 (Gwent), one in 2002 (North Wales), one in 2000 (Mid Glamorgan) and none in 2001 (Table 2).

5.5 Aggregate reports of new episodes of STI are sent to NPHS CDSC on Form KC60 by all GUM clinics in Wales.

5.6 In 2004, 39 episodes of primary and secondary infectious syphilis were reported by GUM clinics in Wales (Table 9). This compares to 50 episodes of primary and secondary infectious syphilis reported by GUM clinics in Wales in 2003, 13 in 2002, 8 in 2001 and 5 in 2000 (Table 8).

5.7 Thirty-eight of the 39 episodes in 2004 were in men (97%), of whom 28 (74% of male episodes; 72% of all episodes) acquired their infection homosexually (Table 9). In 2003, 29 of 50 infections (58%) were acquired homosexually.

5.8 In 2004, one new episode of primary and secondary infectious syphilis was in a male patient aged 16 to 19 years old, six patients were 20-24 years old (6 male), 17 patients were in the 25-34 years age-group (17 male), 14 were 35-44 years, one was 45-64 years old and there were no episodes in patients aged 65 and over (Table 10).

5.9 In 2004 there were also 20 episodes of early latent syphilis, 35 episodes of other acquired syphilis, 2 episodes of congenital syphilis and 7 epidemiological treatments of suspected syphilis (Table 9). Eighteen of the 20 episodes of early latent syphilis and 24 of the 35 episodes of other acquired syphilis were in males. Eleven of the 20 episodes of early latent syphilis and 7 of the 35 episodes of other acquired syphilis in men were acquired homosexually.

5.10 The majority of syphilis episodes in 2004 were reported from Cardiff GUM clinic (Table 11), although small numbers were reported from clinics at Newport, Llantrisant, Swansea, Aberystwyth and Bodelwyddan.

5.11 An enhanced syphilis surveillance scheme was introduced in Wales in December 2002 (with retrospective data collection from January 2002). This scheme allows more timely surveillance of new cases of infectious syphilis than is available from KC60 surveillance and provides more detailed information on the behavioural characteristics of cases.

5.12 For the years 2002 to 2004 a total of 128 cases of infectious syphilis reported to CDSC through the enhanced surveillance scheme (Table 12)

5.13 Sixty-two reports were of primary infection, 29 of secondary syphilis and 29 of early latent infection. The stage of infection was not reported for 8 cases. Late latent infections cases were excluded from the database as they represent historic infection.

5.14 The majority of cases (91) were reported from clinics in South East Wales. Fourteen cases were reported from clinics in Mid and West Wales and 23 from clinics in North Wales (Table 12). Cases in Mid and West Wales were reported from Swansea and Bridgend clinics only (Figure 6).

5.15 Of the 128 cases reported, 97 (76%) were in men reporting sex with men (MSM). However 22 men and 9 women (24% of cases) reported acquiring syphilis through heterosexual sex (Figure 7).

5.16 The majority (97%) of MSM cases were white, whereas 32% of cases reporting heterosexual sex as their probable source of infection were from a non-white ethnic group.

5.17 Eighteen cases (14%) were known to be HIV positive.

Figure 6. Cases of infectious syphilis reported to NPHS CDSC through the enhanced surveillance scheme by month by region, 2002 to 2004 data

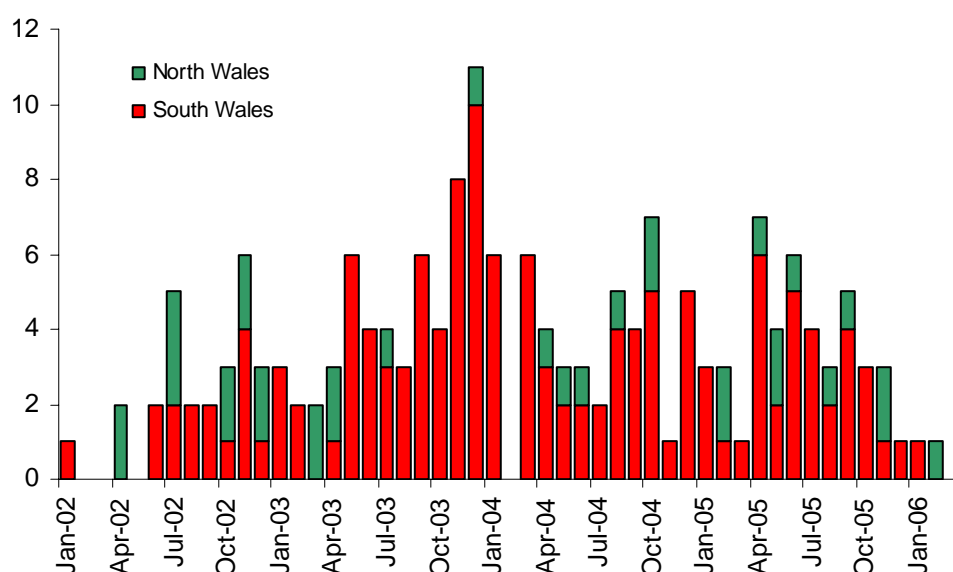
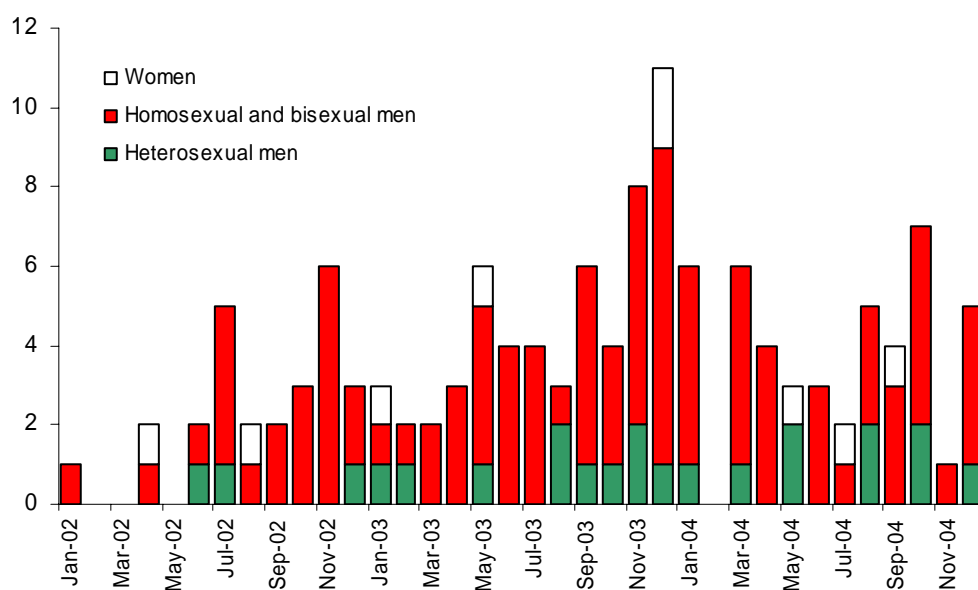


Figure 7. Cases of infectious syphilis reported to NPHS CDSC through the enhanced surveillance scheme by month by sex and sexual orientation, 2002 to 2004 data



6. Gonorrhoea

6.1 Gonorrhoea is a sexually acquired infection caused by the bacterium *Neisseria gonorrhoeae*. After genital chlamydia, gonorrhoea is the second most common bacterial sexually transmitted infection in the UK. Further information on the epidemiology of gonorrhoea is available from: http://www.hpa.org.uk/infections/topics_az/hiv_and_sti/sti-gonorrhoea/gonorrhoea.htm.

6.2 In 2004, there were 694 episodes of uncomplicated gonorrhoea from GUM clinics in Wales, which relates to 24 new cases per 100,000 population, compared to 42 per 100,000 seen in England, (X per 100,000 were seen outside London). No episodes of gonococcal ophthalmia neonatorum were seen and 207 epidemiological treatments of suspected gonorrhoea were reported by GUM clinics in Wales (Table 9).

6.3 This compares to 593 episodes of uncomplicated gonorrhoea reported by GUM clinics in Wales in 2003 (Table 8) and represents a continuation of the general increase observed in Wales over the last decade (Figure 8).

6.4 Seventy five of the 474 episodes (16%) of uncomplicated gonorrhoea reported in males in 2004 were in men who have sex with men. This compares to 75 (19% of infections in men) in 2003.

6.5 One hundred and seventy three episodes of uncomplicated gonorrhoea (90 female; 83 male) were in teenagers (Table 10).

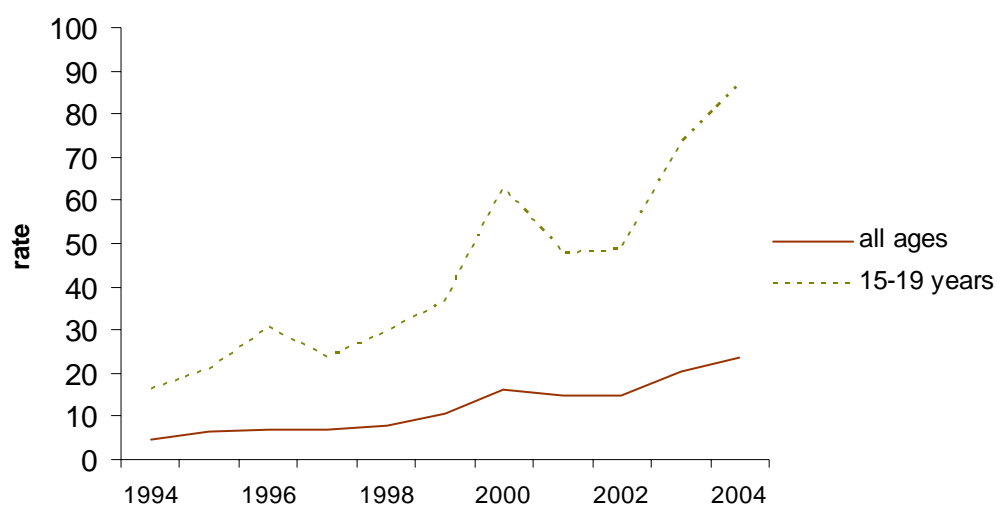
6.6 The clinic in Cardiff reported the highest number of cases of gonorrhoea (249) in 2004 (Table 13), compared with 150 in 2003, an increase of 66%. Increases were also large in other clinics, for example, Haverfordwest (20 compared to 2), Pembroke (11 compared to 3), Port Talbot (19 compared to 8) and Bodelwyddan (45 compared to 22).

6.7 Gonorrhoea can occasionally cause serious complications. Nine reports of gonococcal complications were reported in 2003 (Table 14), the majority of which were from South-East Wales (56%).

6.8 In 2004 there were a total of 531 laboratory reports of *Neisseria gonorrhoeae*. 247 of the 531 reports (47%) were reported by the laboratory in Cardiff (Table 15).

6.9 As in previous years, in 2004 the rate of laboratory reports of *Neisseria gonorrhoeae* are highest in 15-24 year old males and females (Table 16).

Figure 8. Reports of uncomplicated gonorrhoea from GUM clinics in Wales on form KC60 per 100, 000 population: teenagers and all ages



7. Genital chlamydia

7.1 Genital *Chlamydia trachomatis* is the commonly diagnosed bacterial STI in the UK. Highest rates are seen in young people, especially men and women under 24 years. Genital chlamydial infection is an important reproductive health problem, because 10-30% of untreated infected women develop pelvic inflammatory disease (PID). A significant proportion of cases, particularly amongst women, are asymptomatic and so, are liable to remain undetected, putting women at risk of developing PID (see: http://www.hpa.org.uk/infections/topics_az/hiv_and_sti/sti-chlamydia/chlamydia.htm).

7.2 In 2004, there were 3541 episodes of uncomplicated chlamydia infection compared to 3126 in 2003 (13% increase). In 2004 there were 136 episodes of complicated chlamydial infection, no episode of chlamydia ophthalmia neonatorum, and 1757 episodes of epidemiological treatment of suspected chlamydia reported by GUM clinics in Wales (Table 9).

7.3 By comparison, in 2003 there were 3126 episodes of uncomplicated chlamydial infection, 128 episodes of complicated chlamydial infection, one case of chlamydia ophthalmia neonatorum, and 1377 episodes of epidemiological treatment of suspected chlamydia reported by GUM clinics in Wales (Table 9),

7.4 This represents a continuation of the recent trend in increasing rates of diagnoses, partly reflecting increased awareness and improved diagnostic techniques (Figure 9).

7.5 In 2004, 38 of the 1621 cases of uncomplicated chlamydia in men (2%) were in men who reported sex with men, a similar proportion to that in 2003.

7.6 In 2004, episodes of uncomplicated chlamydia were most frequently reported in 20-24 year old men and women (Table 10).

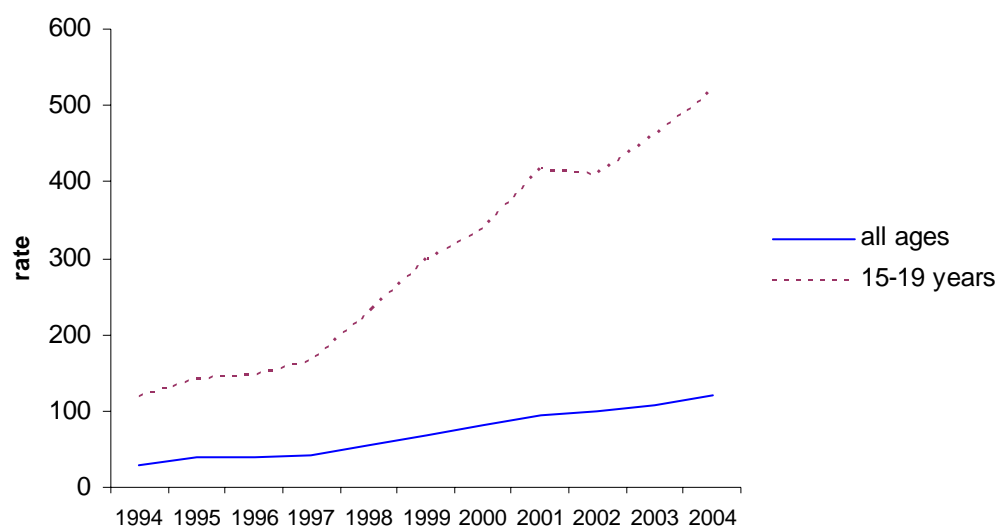
7.7 In 2004, the GUM clinic in Cardiff reported the highest number of cases of uncomplicated chlamydia infection (1173) but recent increases in cases of genital chlamydia have been observed throughout Wales (Table 17).

7.8 Table 18 shows the number of episodes of complicated chlamydial infection reported in recent years by GUM clinic.

7.9 In 2004 there were a total of 4293 reports of anogenital chlamydia infection received from laboratories in Wales. This is equivalent to a rate of 145.4 per 100 000 population (Table 19). Laboratories at Cardiff and Swansea reported the highest number of cases (44% from Cardiff and 27% from Swansea).

7.10 Rates were highest in 15-24 year old males and females for all years presented in this report (Table 16).

Figure 9. Reports of uncomplicated chlamydia from GUM clinics in Wales on form KC60 per 100, 000 population: teenagers and all ages, 2004 data



8. Other infections

8.1 Anogenital warts are usually small flat warts or growths found on or around the penis, anus or vagina. They are caused by the human papillomavirus (HPV). Warts are the most common viral STI diagnosed in the UK, with highest rates of new cases in 20-24 year old men and 16-19 year old women. Certain HPV types have been associated with cervical cancer. Although these are different types to those that cause warts it is possible that the distribution of anogenital warts may reflect the distribution of other oncogenic types of HPV. Further details about the epidemiology of HPV in the UK can be found at: http://www.hpa.org.uk/infections/topics_az/hiv_and_sti/sti-warts/warts.htm.

8.2 The number of new episodes of anogenital warts continues to increase steadily. In 2004, there were 3501 episodes of anogenital warts - first attack reported by GUM clinics in Wales (Table 9) compared to 3379 episodes reported in 2003.

8.3 In Wales, episodes were most frequently reported in 20-24 year old males and females in 2004 (Table 10).

8.4 The clinic in Cardiff reported the highest number of cases of anogenital warts – first attack in 2004 (832) (Table 20).

8.5 Genital herpes simplex virus (HSV) infection is the most common ulcerative sexually transmitted disease in the UK. It is associated with considerable physical and psychological morbidity and may frequently recur. It can cause severe systemic disease in neonates and immunosuppressed hosts and may facilitate HIV transmission. Many HSV infections are sub-clinical. There are two distinct subtypes of HSV. Type 2 is almost exclusively associated with genital infection. Type 1 causes oral herpes (or cold sores) but has increasingly been implicated in genital infections. In England and Wales, HSV-2 antibody prevalence is about 3% in men and 5% in women. See: http://www.hpa.org.uk/infections/topics_az/hiv_and_sti/sti-herpes/herpes.htm

8.6 In 2004, there were 617 episodes of anogenital herpes simplex - first attack reported by GUM clinics in Wales (Table 9) compared to 610 episodes reported in 2003.

8.7 In 2004, episodes were most frequently reported in 25-34 year old males and females (Tables 10).

8.8 In 2004, the clinic in Cardiff reported the highest number of cases of anogenital herpes simplex – first attack (169) (Table 20).

8.9 Hepatitis B and hepatitis C are blood borne viruses that can also be transmitted sexually. Detailed information on the epidemiology of hepatitis B and C are available at: http://www.hpa.org.uk/infections/topics_az/hepatitis_b/menu.htm and http://www.hpa.org.uk/infections/topics_az/hepatitis_c/menu.htm

8.10 Blood donations are routinely screened for hepatitis B and hepatitis C infection. Blood from donors who are screened positive does not enter the blood supply.

8.11 Hepatitis C was more prevalent than hepatitis B, HIV or syphilis in Welsh blood donors up until the end of 2004 (Figure 1). In 2004 the rate of Hepatitis C in prospective new blood donors in Wales was 29 per 100,000 donations compared to 67 per 100,000 donations in 2003 (Table 1).

8.12 One prospective new blood donor was screened positive for hepatitis B in 2004 (North Wales) compared to 4 prospective new blood donors in 2003 (Table 1).

8.13 Two established blood donors were screened positive for hepatitis B in 2004, compared with none in 2003 (Table 2). However, in both 2000 and 2002 one established donor was tested positive for hepatitis B.

Appendix 1

Contributors

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Table 1. The number of blood donations from prospective new donors by area* of donation and number positive for HIV, Hepatitis B, Hepatitis C and treponemal infection 2000-2004

Old Health Authority area	2000					2001					2002					2003					2004				
	No. Bled	Donations positive for:				No. Bled	Donations positive for:				No. Bled	Donations positive for:				No. Bled	Donations positive for:				No. Bled	Donations positive for:			
		HIV	HepB	Hep C	Trep		HIV	HepB	Hep C	Trep		HIV	HepB	Hep C	Trep		HIV	HepB	Hep C	Trep		HIV	HepB	Hep C	Trep
East Dyfed	1554	0	1	2	0	1436	0	0	0	0	1500	0	0	0	0	1497	0	0	0	0	1518	0	0	0	0
Pembroke	837	0	0	1	1	678	0	0	0	0	660	0	0	0	0	569	0	0	1	0	641	0	0	0	0
Gwent	3326	0	0	3	2	2572	0	0	2	0	2339	0	0	2	1	2088	0	1	3	1	2159	0	0	1	0
Gwynedd (south)	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Powys (south)	707	0	0	1	0	695	0	0	1	0	685	0	0	0	0	694	0	0	0	0	685	1	0	0	0
Mid Glamorgan	3113	0	1	4	1	2528	0	1	3	0	2555	0	0	1	0	2158	1	0	0	1	2386	0	0	3	0
South Glamorgan	4297	0	6	2	0	3802	0	3	3	2	3894	0	2	0	5	3577	0	3	2	1	4117	0	0	0	1
West Glamorgan	2309	0	3	2	0	2421	0	1	3	1	1915	0	0	3	1	1868	0	0	3	0	1820	0	0	1	0
North Wales (Gwynedd N, Clwyd)	5795	0	0	5	0	5204	0	1	2	1	4588	0	0	2	1	4034	0	0	2	0	3809	0	1	0	1
Total	21938	0	11	20	4	19336	0	6	14	4	18136	0	2	8	8	16485	1	4	11	3	17135	1	1	5	2

*Aggregate data provided by historic health authority areas

Table 2. The number of blood donations from existing donors by area* of donation and number positive for HIV, Hepatitis B, Hepatitis C and treponemal infection 2000-2004

Old Health Authority area	2000					2001					2002					2003					2004				
	No. Bled	Donations positive for:				No. Bled	Donations positive for:				No. Bled	Donations positive for:				No. Bled	Donations positive for:				No. Bled	Donations positive for:			
		HIV	HepB	HepC	Trep		HIV	HepB	HepC	Trep		HIV	HepB	HepC	Trep		HIV	HepB	HepC	Trep		HIV	HepB	HepC	Trep
East Dyfed	10094	0	0	0	0	10202	0	0	0	0	10438	0	0	0	0	10761	0	0	0	0	10876	0	0	0	0
Pembroke	6435	0	0	0	0	6399	0	0	0	0	6374	0	0	0	0	6515	0	0	0	0	6340	0	0	0	0
Gwent	22039	0	0	1	0	22086	0	0	0	0	20711	0	0	0	0	20017	0	0	0	1	20186	0	0	0	1
Gwynedd (south)	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Powys (south)	4871	0	0	1	0	5443	0	0	0	0	5301	0	0	0	0	5304	0	0	0	0	5347	0	0	0	0
Mid Glamorgan	23837	0	0	1	1	23543	0	0	1	0	23554	0	0	1	0	24011	0	0	0	0	21889	0	1	0	0
South Glamorgan	23689	0	0	0	0	24363	1	0	0	0	24007	0	1	2	0	24286	0	0	0	0	25824	0	0	1	3
West Glamorgan	14843	0	1	0	0	16404	0	0	0	0	15090	0	0	1	0	15206	0	0	0	0	14647	0	0	0	0
North Wales (Gwynedd N, Clwyd)	30232	0	0	1	0	30666	1	0	0	0	30184	0	0	0	1	30586	0	0	0	0	27005	0	1	0	0
Total	136040	0	1	4	1	139106	2	0	1	0	135659	0	1	4	1	136686	0	0	0	1	132114	0	2	1	4

*Aggregate data provided by historic health authority areas

Table 3. Number of people tested for HIV antibodies and number of people newly diagnosed HIV positive in Wales 2000-2004 by region from which sera was submitted: NPHS CDSC HIV denominator scheme

Region (from which sera was submitted)	2000			2001			2002			2003			2004		
	total tested	new positives	(%)	total tested	new positives	(%)	total tested	new positives	(%)	total tested	new positives	(%)	total tested	new positives	(%)
Mid & West	1788	14	0.8	2358	17	0.7	4882	17	0.3	8218	14	0.2	9299	24	0.3
South & East	5210	24	0.5	5491	46	0.8	12074	46	0.4	14668	57	0.4	13730	61	0.4
North Wales	2010	10	0.5	2489	9	0.4	3744	13	0.3	4924	20	0.4	7670	15	0.2
Not known/ outside Wales	1	0	0.0	2	0	0.0	63	0	0.0	598	8	1.3	142	1	0.7
TOTAL	9009	48	0.5	10340	72	0.7	20763	76	0.4	28408	99	0.3	30841	101	0.3

Table 4. Number of patients tested for HIV antibodies and number newly diagnosed positives in Wales 2000-2004 by sex by facility of source sample: NPHS CDSC HIV denominator scheme

Facility	2000			2001			2002			2003			2004		
	Total tested (new positives)			Total tested (new positives)			Total tested (new positives)			Total tested (new positives)			Total tested (new positives)		
	Male	Female	Not known	Male	Female	Not known	Male	Female	Not known	Male	Female	Not known	Male	Female	Not known
GUM/STD clinic (1)	2038 (26)	1484 (7)	6	2504 (30)	1812 (10)	16	3504 (27)	2829 (18)	18	3482 (31)	2882 (29)	22	4971 (39)	4116 (19)	72 (2)
GP (2)	543	427 (1)	24	469 (2)	319	17	399 (2)	383	14	472 (1)	1211	57	497 (2)	1283 (1)	65
Hospital in patient (3)	283 (5)	202 (5)	1	323 (12)	203 (5)	6	304 (7)	241 (4)	3	407 (6)	289 (3)	4	492 (7)	454 (2)	10
Hospital out patient (4)	319	251	25	373 (7)	261 (1)	12	367 (3)	272 (5)	16 (1)	405 (2)	323	20	356 (2)	329 (1)	14
Casualty (5)	15	12	0	10	7	1	12	7	0	11	3	0	14 (1)	3	1
Haemophilia centre (6)	107 (1)	36	2	64	35	1	51	20	0	31	24	0	37	27	0
Blood transfusion service (7)	121	93	3	128	94 (1)	1	96	97	0	78	78	1	79	77 (1)	2
Prison service (8)	122	0	0	56 (2)	0	6	20	0	4	17	0	2	25	0	1
Ante-natal screen (10)	0	50	0	0	224	0	0	5273 (2)	0	0	7901 (2)	0	11	6242 (2)	22
Drugs team (11)	55	8	0	37	14	0	36	20	1	13	6	0	48	24	0
Renal unit (12)	703	514	3	753	519	5	675	487	3	587	393	1	624	423	1
Bone bank (13)	184	202	0	60	96	0	0	0	0	0	0	0	0	0	0
Forensic/post mortem (14)	10 (1)	4	0	3 (1)	0	0	1	1	0	0	0	0	2	1	0
Fertility clinic (15)	545	552	5	517	564	17	544	607	15	647	680	3	655	712	1
Private clinic (16)	1	1	0	2	2	0	0	0	0	1	0	0	0	0	0
Other/undetermined (9)	34 (2)	20	4	421 (1)	328	60	1047 (5)	3231 (2)	165	1282 (15)	6614 (10)	461	1343 (12)	7124 (10)	683
TOTAL	5080 (35)	3856 (13)	73	5720 (55)	4478 (17)	142	7056 (44)	13468 (31)	239 (1)	7433 (55)	20404 (44)	571	9154 (63)	20815 (36)	872 (2)

Table 5. Number of people newly diagnosed HIV positive in Wales 2000-2004 by sex and exposure category: NPHS CDSC HIV denominator scheme

Exposure group	2000			2001			2002			2003			2004		
	Total new positives			Total new positives			Total new positives			Total new positives			Total new positives		
	Male	Female	Not known	Male	Female	Not known	Male	Female	Not known	Male	Female	Not known	Male	Female	Not known
Homosexual/bisexual men	20	-	-	30	-	-	24	-	-	24	-	-	22	-	-
Heterosexual:"high risk" partner*	1	3	0	1	0	0	0	2	0	0	1	0	0	0	0
Heterosexual: partner overseas	5	7	0	5	8	0	8	23	0	12	22	0	9	13	1
Heterosexual: partner UK	0	0	0	1	2	0	1	1	0	4	2	0	0	1	0
Intravenous drug abuse (IVDA)	3	0	0	3	0	0	2	1	0	0	0	0	4	0	0
IVDA and homosexual	0	-	-	0	-	-	0	-	-	0	-	-	0	-	-
Blood factor (Haemophiliacs)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Blood/tissue transfer (eg.transfusion) overseas/UK	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
NSI/occupational exposure/bite/tattoo	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Mother to infant	0	1	0	4	2	0	0	0	0	0	1	0	1	1	0
Other multiple exposures	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Not known	6	2	0	11	5	0	9	4	1	15	18	0	27	21	1
TOTAL	35	13	0	55	17	0	44	31	1	55	44	0	63	36	2

*ID

U, bisexual man or known HIV positive partner.

Table 6. Numbers of diagnosed HIV-infected patients resident in Wales by most advanced clinical stage, gender and age group when last seen for care in 2004. Source: SOPHID scheme, HPA Centre for Infections.

Age Group**	Clinical Stage of Infection												Total***
	Asymptomatic		Symptomatic pre-AIDS		AIDS		Death in 2004 in a patient with AIDS		Death in 2004 in a patient without AIDS		Not known		
	M	F	M	F	M	F	M	F	M	F	M	F	
0-14	5	2	0	0	2	2	0	0	0	0	0	0	17
15-24	18	8	6	2	1	0	0	0	0	0	1	0	36
25-39	70	39	87	33	52	29	0	0	0	0	1	0	311
40-54	62	8	78	21	59	12	3	0	0	0	0	0	243
55+	12	4	23	3	22	2	0	0	3	0	1	0	70
Total	167	61	194	59	136	45	3	0	3	0	3	0	677

Footnotes

* Patients with diagnosed HIV infection seen for statutory medical HIV-related care in 2004.

** Age Group categories are: '0-14', '15-24', '25-39', '40-54', '55+' and 'Not known'. If a category is not listed in the table, no patients were reported of that age group for this

*** Total includes 6 children (5 males and 1 female) born to HIV infected women in 2004. At least 95% of these children are likely to be uninfected

Table 7. Numbers of diagnosed HIV-infected patients resident in Wales and seen for care in 2004 by ethnicity by sex by probable route of infection. Source: SOPHID scheme, HPA Centre for Infections.

Probable Route Of infection	Ethnicity																Total**
	White		Black - Caribbean		Black African		Black - Other		Indian/Pakistani/ Bangladeshi		Other/Mixed		Other Asian/Oriental		Not known		
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	
Blood/blood products	27	2	0	0	0	1	0	0	0	0	1	0	0	0	0	0	31
Injecting drug use	13	4	0	0	0	0	0	0	0	0	2	0	0	0	0	0	19
Mother-to-child transmission	6	2	0	0	5	1	0	0	0	0	2	2	0	0	1	1	20
Other/Not known	9	1	0	0	1	0	0	0	0	0	0	0	0	0	0	0	11
Sex between men	328	0	1	0	2	0	0	0	1	0	6	0	0	0	0	0	338
Sex between men & women	66	55	1	0	33	85	0	1	1	1	4	3	0	6	1	1	258
Total	449	64	2	0	41	87	0	1	2	1	15	5	0	6	2	2	677

Footnotes

* Patients with diagnosed HIV infection seen for statutory medical HIV-related care in 2004 (including children born to HIV-infected women in 2004 whose HIV infection status had not been confirmed. At least 95% of these children are likely to be uninfected).

Table 8. Episodes of sexually transmitted infection reported by Genito-urinary clinics in Wales (Form KC60), 2000-2002

Code	Condition	2000		2001		2002	
		Males (MSM)	Females	Males (MSM)	Females	Males (MSM)	Females
A1,A2	Primary and secondary infectious syphilis	5 (4)	0	6 (3)	2	13 (10)	0
A3	Early latent syphilis	0	0	3 (0)	0	15 (5)	2
A4-6	Other acquired syphilis	13 (3)	4	16 (0)	6	22 (5)	12
A7	Congenital syphilis, aged under 2 years	0	0	0	0	0	0
A8	Congenital syphilis, aged 2 or over	0	0	0	0	2 (-)	0
A9	Epidemiological treatment of suspected syphilis	0	0	0	0	2 (0)	2
B1,B2	Uncomplicated gonorrhoea	316 (61)	157	300 (74)	131	300 (58)	136
B3	Gonococcal ophthalmia neonatorum	0	0	0	0	0	3
B4	Epidemiological treatment of suspected gonorrhoea	71 (12)	69	77 (19)	60	62 (12)	91
B5	Gonococcal complications	1 (0)	11	3 (0)	4	2 (0)	4
C1-3	Chancroid/ Donovanosis/ LGV	0	0	0	0	1 (-)	1
C4a,C4c	Uncomplicated chlamydial infection	988 (20)	1402	1124 (34)	1640	1179 (33)	1716
C4b	Complicated chlamydial infection	12 (0)	121	22 (0)	113	18 (1)	97
C4d	Chlamydia ophthalmia neonatorum	0	4	0	0	1 (-)	0
C4e	Epidemiological treatment of suspected chlamydia	713 (50)	502	793 (66)	424	898 (39)	550
C4h	Uncomplicated non-gonococcal/non-specific urethritis in males	1587 (48)		1627 (57)		1760 (91)	
C4i	Epidemiological treatment of NSGI	170 (7)	801	172 (10)	774	159 (15)	704
C5	Complicated non-gonococcal/non-specific infection	82 (0)	384	86 (1)	317	77 (2)	276
C6a	Trichomoniasis	1 (-)	77	12 (-)	82	2 (-)	62
C6b	Anaerobic/bacterial vaginosis and male infection	27 (-)	1806	21 (-)	1810	33 (-)	2042
C6c	Other vaginosis/vaginitis/balanitis	484 (-)	181	581 (-)	237	495 (-)	140
C7a	Anogenital candidosis	272 (-)	1922	299 (-)	1947	237 (-)	1974
C7s	Epidemiological treatment of C6 and C7	31 (-)	25	24 (-)	23	83 (-)	58
C8-9	Scabies/Pediculosis pubis	155 (25)	36	115 (18)	24	82 (13)	28
C10a	Anogenital herpes simplex - first attack	175 (13)	322	202 (10)	340	216 (10)	398
C10b	Anogenital herpes simplex - recurrence	125 (4)	156	147 (10)	161	157 (10)	200
C11a	Anogenital warts - first attack	1662 (34)	1587	1744 (49)	1594	1740 (55)	1513
C11b	Anogenital warts - recurrence	1033 (14)	537	1041 (21)	545	974 (30)	544
C11c	Anogenital warts - reregistered cases	367 (-)	355	366 (-)	309	321 (-)	243
C12	Molluscum contagiosum	152 (0)	89	150 (2)	95	158 (2)	85
C13	Antigen positive hepatitis B	16 (2)	1	16 (2)	5	18 (5)	12
C14	Other viral hepatitis	48 (3)	22	34 (1)	16	51 (5)	18
D2a	Urinary tract infection	24 (-)	87	17 (-)	94	17 (-)	100
D2b	Other conditions requiring treatment at GUM clinic	951 (-)	711	1013 (-)	654	1078 (-)	900
D3	Other episodes not requiring treatment	2911 (-)	2635	3301 (-)	2990	3834 (-)	3362
E1a	Asymptomatic HIV infection - first presentation	27 (19)	9	28 (13)	15	26 (18)	13
E1b	Asymptomatic HIV infection - subsequent presentation	178 (-)	27	148 (-)	34	154 (-)	56
E2a	HIV infection with symptoms, not AIDS, first presentation	24 (16)	8	34 (24)	6	23 (18)	12
E2b	HIV infection with symptoms, not AIDS, subsequent presentation	169 (-)	32	265 (-)	48	268 (-)	59
E3a	AIDS - first presentation	8 (3)	1	16 (7)	1	21 (14)	9
E3b	AIDS - subsequent presentation	168 (0)	42	198 (0)	44	213 (0)	51
P1a	HIV antibody counselling - with testing	1846 (285)	1386	2466 (356)	1833	3628 (531)	2909
P1b	HIV antibody counselling - without testing	299 (28)	241	567 (55)	512	2179 (164)	2142
P2	Hepatitis B vaccination	221 (105)	60	295 (139)	60	388 (217)	80
P3	Family Planning	32 (-)	522	30 (-)	277	113 (-)	398
P4a	Cervical Cytology - minor abnormality		132		84		86
P4b	Cervical Cytology - major abnormality		24		8		13
	Total initial contacts	13324 (738)	15339	15194 (940)	16178	18933 (1323)	19948

Please note: MSM = Men having sex with men, recorded on the KC60 form as homosexually acquired
Information on whether homosexually acquired not collected for all conditions

Table 9. Episodes of STI reported by Genito-urinary clinics in Wales (Form KC60), 2003-2004

		2003			2004		
Code	Condition/episode	Males	MSM	Females	Males	MSM	Females
A1,A2	Primary and secondary infectious syphilis	47	29	3	38	28	1
A3	Early latent syphilis (first 2 years)	12	3	2	18	11	2
A4,A5,A6	Other acquired syphilis	13	3	7	24	7	11
A7	Congenital syphilis, aged under 2 years	0		0	1		0
A8	Congenital syphilis, aged 2 or over	0		0	0		1
A9	Epidemiological treatment of suspected syphilis	1	1	1	6	5	1
B1,B2	Uncomplicated gonorrhoea	404	75	189	474	75	220
B3	Gonococcal ophthalmia neonatorum	1		0	0		0
B4	Epidemiological treatment of suspected gonorrhoea	82	19	92	111	20	96
B5	Complicated gonococcal infection - including PID and epididymitis	3	0	6	3	0	6
C1-3	Chancroid / Donovanosis / LGV	1		3	0		1
C4a,C4c	Uncomplicated chlamydial infection	1358	44	1768	1621	38	1920
C4b	Complicated chlamydial infection - including PID and epididymitis	30	0	98	25	2	111
C4d	Chlamydial ophthalmia neonatorum	1		0	0		0
C4e	Epidemiological treatment of suspected chlamydia	843	43	535	1038	60	719
C4h	Uncomplicated non-gonococcal/non-specific urethritis in males or treatment of mucopurulent cervicitis in females	2027	89	159	2354	85	286
C4i	Epidemiological treatment of NSGI	194	13	679	189	14	679
C5	Complicated infection(non-chlamydial/ non-gonococcal) - including PID and epididymitis	78	2	352	105	2	398
C6a	Trichomoniasis	2		46	2		52
C6b	Anaerobic / bacterial vaginosis and anaerobic balanitis	45		2242	66		2628
C6c	Other vaginosis / vaginitis / balanitis	591		141	671		150
C7a	Anogenital candidosis	249		1972	261		2316
C7b	Epidemiological treatment of C6 and C7	62		51	65		69
C8-9	Scabies / Pediculosis pubis	69	11	11	74	14	9
C10a	Anogenital herpes simplex - first attack	209	5	401	207	9	410
C10b	Anogenital herpes simplex - recurrence	159	4	207	180	9	201
C11a	Anogenital warts - first attack	1747	57	1632	1871	65	1630
C11b	Anogenital warts - recurrence	960	26	461	976	28	562
C11c	Anogenital warts - reregistered cases	368		309	414		338
C12	Molluscum contagiosum	171	4	120	229	4	151
C13a	Viral hepatitis B (HbsAg positive): first diagnosis**	12	2	5	20	4	2
C13b	**number of which were acute viral hepatitis B	1	0	1	0	0	0
C13c	Viral hepatitis B: subsequent presentation	3	0	1	2	0	1
C14	Viral hepatitis C: first diagnosis	45	0	25	39	2	20
D2a	Urinary tract infection	30		117	37		169
D2b	Other conditions requiring treatment at GUM clinic	1169		1093	1358		1202
E1a	New HIV diagnosis: asymptomatic	31	19	24	43	22	15
E2a	New HIV diagnosis: symptomatic (not AIDS)	18	7	13	17	6	6
E1b,E2b	Subsequent HIV presentation (not AIDS)	190		68	347		128
E3a1	AIDS: first presentation - new HIV diagnosis	3	2	2	5	1	2
E3a2	AIDS: first presentation - HIV diagnosed previously	0	0	0	0	0	2
E3b	AIDS: subsequent presentation	125		37	166		45
P4a	Cervical Cytology: minor abnormality			69			82
P4b	Cervical Cytology: major abnormality			11			6
Services provided							
S1	Sexual health screen (no HIV antibody test)	6217	191	6171	7295	163	7252
P1a & S2	All HIV antibody tests	4101	555	3557	5343	550	4602
P1b	HIV antibody test offered and refused	3401	169	3179	4455	136	4276
P2	Hepatitis B vaccination (1st dose only)	311	160	107	370	188	138
P3	Contraception (excluding condom provision)			205			291
D3	Other episodes not requiring treatment	3837		3196	4735		4034
Total: all conditions		29221	1533	29368	35255	1548	35241

Please note: MSM = Men having sex with men, recorded on the KC60 form as homosexually acquired

Table 10. Episodes of sexually transmitted infection reported by Genito-urinary clinics in Wales (form KC60), 2004

Part B: Initial contacts in the year for selected conditions by age group

Code	Condition	Sex	Under 15	15	16-19	20-24	25-34	35-44	45-64	65 and over	age unknown	all ages
A1,A2	Primary and secondary infectious syphilis	M	0	0	1	6	17	13	1	0	0	38
		F	0	0	0	0	0	1	0	0	0	1
B1,B2	Uncomplicated gonorrhoea	M	0	4	79	177	130	60	23	1	0	474
		F	1	5	84	71	41	11	7	0	0	220
B1,B2	Uncomplicated gonorrhoea - homosexually acquired	M	0	0	8	21	18	13	4	0	11	75
		F										
C4a,C4c	Uncomplicated chlamydial infection	M	1	3	276	749	427	120	34	1	10	1621
		F	5	36	714	752	335	58	20	0	0	1920
C10a	Anogenital herpes simplex - first attack	M	0	0	17	56	65	40	29	0	0	207
		F	2	6	113	112	111	47	18	1	0	410
C11a	Anogenital warts - first attack	M	0	4	221	721	583	227	105	10	0	1871
		F	5	27	555	566	291	140	44	2	0	1630

Table 11. Episodes of primary and secondary infectious syphilis (and number homosexually acquired) per year by GUM clinic and region of GUM clinic: KC60 data

Region	Clinic	2000	2001	2002	2003	2004
South & East	Aberdare	0	0	0	0	0
	Cardiff	0	0	8 (6)	32 (26)	25 (21)
	Llantrisant	0	1 (0)	0	1 (0)	3 (0)
	Newport	1 (0)	0	0	4 (0)	6 (5)
	Total	1 (0)	1 (0)	8 (6)	37 (26)	33 (26)
Mid & West	Bridgend	0	0	0	0	0
	Port Talbot	0	0	0	1 (1)	0
	Swansea	0	0	0	4 (0)	2 (0)
	Aberystwyth	0	1 (0)	0	0*	1 (1)**
	Carmarthen	0	0	0	0	0
	Haverfordwest	0	0	0	0	0
	Pembroke	0	0	0	0	0
	Total	0	1 (0)	0	5 (1)	3 (1)
North Wales	Bangor	0	0	0	3 (0)	0
	Bodelwyddan	1 (1)	0	2 (2)	2 (0)	2 (1)
	Holyhead	0	0	0	0	0
	Llandudno	0	0	0	0	0
	Pwllheli	0	1 (0)	0	0	0
	Wrexham	3 (3)	5 (3)	3 (2)	3 (2)	0
	Total	4 (4)	6 (3)	5 (4)	8 (2)	2 (1)
Wales		5 (4)	8 (3)	13 (10)	50 (29)	39 (28)

* Data for a clinic at Builth Wells are included with Aberystwyth

** Data for clinics at Builth Wells, Cardigan, Lampeter and Newtown are included with Aberystwyth

Table 12. Episodes of infectious syphilis reported to NPHS CDSC through the enhanced surveillance scheme by clinics in Wales

Region	Clinic	2002	2003	2004
South & East	Aberdare	0	0	0
	Cardiff	11	39	32
	Llantrisant	4	4	1
	Newport	0	0	0
	Total	15	43	33
Mid & West	Bridgend	0	0	2
	Port Talbot	0	0	0
	Swansea	0	7	5
	Aberystwyth	0	0	0
	Carmarthen	0	0	0
	Haverfordwest	0	0	0
	Pembroke	0	0	0
	Total	0	7	7
North Wales	Bangor	3	3	2
	Bodelwyddan	3	1	2
	Holyhead	0	0	0
	Llandudno	0	0	0
	Pwllheli	0	0	0
	Wrexham	5	2	2
	Total	11	6	6
Wales		26	56	46

Table 13. Episodes of post-pubertal uncomplicated gonorrhoea (and number homosexually acquired) per year by GUM clinic and region of GUM clinic: KC60 data

Region	Clinic	2000	2001	2002	2003	2004
South & East	Aberdare	7 (0)	17 (1)	5 (0)	36 (0)	28 (0)
	Cardiff	177 (43)	134 (51)	159 (37)	150 (51)	249 (54)
	Llantrisant	19 (1)	39 (4)	32 (0)	81 (1)	57 (0)
	Newport	89 (0)	95 (0)	81 (6)	126 (5)	105 (6)
	Total	292 (44)	285 (56)	277 (43)	393 (57)	439 (60)
Mid & West	Bridgend	17 (0)	19 (0)	16 (0)	19 (0)	12 (1)
	Port Talbot	10 (1)	8 (2)	4 (2)	8 (4)	19 (0)
	Swansea	75 (3)	43 (5)	55 (4)	74 (3)	75 (0)
	Aberystwyth	0	0	0	1 (1)*	5 (2)**
	Carmarthen	19 (1)	13 (4)	15 (0)	11 (1)	17 (0)
	Haverfordwest	9 (0)	4 (0)	4 (0)	2 (0)	20 (0)
	Pembroke	5 (0)	2 (0)	1 (0)	3 (0)	11 (0)
	Total	135 (5)	89 (11)	95 (6)	118 (9)	159 (3)
North Wales	Bangor	2 (0)	4 (0)	7 (0)	11 (0)	11(0)
	Bodelwyddan	25 (8)	26 (2)	32 (4)	22 (7)	45 (11)
	Holyhead	1 (0)	1 (0)	0	1 (0)	2 (0)
	Llandudno	0	3 (0)	3 (0)	3 (0)	2 (0)
	Pwllheli	0	1 (0)	0	3 (0)	0 (0)
	Wrexham	18 (4)	22 (5)	22 (5)	42 (2)	36 (1)
	Total	46 (12)	57 (7)	64 (9)	82 (9)	96 (12)
Wales		473 (61)	431 (74)	436 (58)	593 (75)	694 (75)

* Data for a clinic at Builth Wells are included with Aberystwyth

** Data for clinics at Builth Wells, Cardigan, Lampeter and Newtown are included with Aberystwyth

Table 14. Episodes of gonococcal complications (B5) per year by GUM clinic and region of GUM clinic: KC60 data

Region	Clinic	2000	2001	2002	2003	2004
South & East	Aberdare	1 (0)	0	0	0	0
	Cardiff	1 (0)	3 (0)	4 (0)	3 (0)	2 (0)
	Llantrisant	1 (0)	1 (0)	0	2 (0)	2 (0)
	Newport	1 (0)	0	0	2 (0)	1 (0)
	Total	4 (0)	4 (0)	4 (0)	7 (0)	5 (0)
Mid & West	Bridgend	1 (0)	0	0	0	0
	Port Talbot	0	0	0	0	0
	Swansea	6 (0)	2 (0)	0	0	1 (0)
	Aberystwyth	0	0	0	0*	0**
	Cardmarthen	0	0	0	0	0
	Haverfordwest	0	0	0	0	0
	Pembroke	0	0	0	0	0
	Total	7 (0)	2 (0)	0	0	1 (0)
North Wales	Bangor	0	0	0	0	0
	Bodelwyddan	0	0	2 (0)	2 (0)	1 (0)
	Holyhead	0	0	0	0	0
	Llandudno	1 (0)	0	0	0	0
	Pwllheli	0	0	0	0	0
	Wrexham	0	1 (0)	0	0	2 (0)
	Total	1 (0)	1 (0)	2 (0)	2 (0)	3 (0)
Wales		12 (0)	7 (0)	6 (0)	9 (0)	9 (0)

* Data for a clinic at Builth Wells are included with Aberystwyth

** Data for clinics at Builth Wells, Cardigan, Lampeter and Newtown are included with Aberystwyth

Table 15. Laboratory reports of *Neisseria gonorrhoeae* by reporting laboratory and year

Laboratory	Year				
	2000	2001	2002	2003	2004
Abergavenny Nevill Hall	0	2	3	0	0
Aberystwyth Bronglais	1	0	4	1	1
Bangor NPHS	23	12	12	17	13
Bridgend Princess of Wales	0	0	0	0	0
Cardiff NPHS	169	138	177	130	247
Carmarthen NPHS	12	11	1	8	7
Haverfordwest Withybush	13	5	5	4	13
Llantrisant Royal Glamorgan	0	0	0	20	97
Merthyr Tydfil Prince Charles	1	2	1	2	1
Newport Royal Gwent	4	0	0	0	0
Rhyl NPHS	22	25	30	16	34
Swansea NPHS	63	29	63	80	84
Wrexham Maelor	0	0	0	1	33
Outside Wales	0	0	0	0	1
Total	308	224	296	279	531

Table 16. Rates (per 100,000 population) of laboratory reports of gonorrhoea and anogenital chlamydia by sex by age group

Organism	Year	Sex	Age-group					Total
			15-24	25-34	35-44	45-54	55-64	
Neisseria gonorrhoeae	2000	F	57.44	5.21	2.43	0.00	0.00	7.88
		M	50.17	33.30	14.68	2.06	3.74	13.47
	2001	F	28.81	9.11	0.96	1.51	0.00	5.00
		M	27.51	29.18	14.49	8.26	0.00	10.44
	2002	F	34.08	10.91	6.13	1.02	1.13	6.63
		M	45.50	37.88	16.38	6.31	1.17	13.89
	2003	F	31.72	7.31	2.80	1.54	0.00	5.42
		M	46.68	30.06	17.63	6.38	0.56	13.47
	2004	F	73.44	18.94	3.70	1.03	0.53	12.32
		M	95.62	55.60	20.43	8.00	0.55	23.77
Anogenital chlamydia	2000	F	647.33	158.85	20.92	3.03	0.57	100.90
		M	162.49	94.98	23.80	3.09	1.25	36.77
	2001	F	659.89	159.61	30.17	2.52	1.19	103.93
		M	184.17	113.92	28.49	5.16	0.61	42.77
	2002	F	805.39	195.20	35.38	5.61	0.57	129.38
		M	250.55	130.54	32.26	8.41	3.50	54.87
	2003	F	861.34	188.40	27.07	6.68	0.00	135.95
		M	262.75	156.80	33.80	6.91	1.68	61.24
	2004	F	1223.71	293.36	40.66	11.81	1.59	196.03
		M	400.89	207.44	36.49	13.87	4.37	87.36

Excludes laboratory reports of *Neisseria gonorrhoea* and anogenital chlamydia from Royal Gwent, Wrexham and Royal Glamorgan hospitals

* Includes all anogenital specimens positive for *Chlamydia trachomatis* or *Chlamydia spp.*

Table 17. Episodes of uncomplicated chlamydial infection (and number homosexually acquired) per year by GUM clinic and region of GUM clinic: KC60 data

Region	Clinic	2000	2001	2002	2003	2004
South & East	Aberdare	28 (0)	52 (0)	39 (0)	31 (0)	35 (0)
	Cardiff	616 (14)	812 (22)	1041 (27)	890 (35)	1173 (27)
	Llantrisant	137 (1)	171 (0)	154 (1)	182 (0)	168 (0)
	Newport	465 (0)	508 (0)	488 (2)	545 (3)	488 (2)
	Total	1246 (15)	1543 (22)	1722 (30)	1648 (38)	1864 (29)
Mid & West	Bridgend	32 (0)	63 (0)	40 (0)	64 (0)	53 (0)
	Port Talbot	51 (0)	70 (0)	72 (0)	77 (1)	77 (0)
	Swansea	378 (3)	372 (5)	298 (0)	467 (1)	507 (4)
	Aberystwyth	17 (0)	13 (0)	27 (0)	40 (0)*	75 (1)**
	Carmarthen	94 (1)	84 (0)	75 (0)	135 (0)	158 (0)
	Haverfordwest	34 (0)	28 (0)	32 (0)	36 (0)	48 (0)
	Pembroke	9 (0)	10 (0)	18 (0)	12 (0)	21 (0)
	Total	615 (4)	640 (5)	562 (0)	831 (2)	939(5)
North Wales	Bangor	30 (0)	55 (0)	71 (0)	71 (0)	119 (0)
	Bodelwyddan	161 (0)	165 (5)	165 (1)	160 (3)	192 (2)
	Holyhead	2 (0)	10 (0)	21 (0)	20 (0)	22 (0)
	Llandudno	13 (0)	31 (0)	28 (0)	29 (0)	42 (0)
	Pwllheli	7 (0)	9 (0)	10 (0)	13 (0)	32 (0)
	Wrexham	316 (1)	311 (2)	316 (2)	354 (1)	331 (2)
	Total	529 (1)	581 (7)	611 (3)	647 (4)	738 (4)
Wales		2390 (20)	2764 (34)	2895 (33)	3126 (44)	3541 (38)

* Data for a clinic at Builth Wells are included with Aberystwyth

** Data for clinics at Builth Wells, Cardigan, Lampeter and Newtown are included with Aberystwyth

Table 18. Episodes of complicated chlamydial infection (C4b) per year by GUM clinic and region of GUM clinic: KC60 data

Region	Clinic	2000	2001	2002	2003	2004
South & East	Aberdare	2 (0)	1 (0)	0	9 (0)	2 (0)
	Cardiff	5 (0)	14 (0)	29 (1)	22 (0)	38 (2)
	Llantrisant	12 (0)	4 (0)	4 (0)	9 (0)	6 (0)
	Newport	48 (0)	36 (0)	28 (0)	13 (0)	13 (0)
	Total	67 (0)	55 (0)	61 (1)	53 (0)	59 (2)
Mid & West	Bridgend	1 (0)	7 (0)	1 (0)	1 (0)	1 (0)
	Port Talbot	1 (0)	3 (0)	0	0	0 (0)
	Swansea	5 (0)	3 (0)	6 (0)	9 (0)	13 (0)
	Aberystwyth	0	0	0	0*	2 (0)**
	Carmarthen	20 (0)	24 (0)	13 (0)	22 (0)	16 (0)
	Haverfordwest	9 (0)	13 (0)	5 (0)	11 (0)	6 (0)
	Pembroke	2 (0)	4 (0)	7 (0)	6 (0)	3 (0)
	Total	38 (0)	54 (0)	32 (0)	49 (0)	41 (0)
North Wales	Bangor	2 (0)	4 (0)	6 (0)	6 (0)	8 (0)
	Bodelwyddan	8 (0)	6 (0)	2 (0)	6 (0)	5 (0)
	Holyhead	0	0	0	1 (0)	5 (0)
	Llandudno	0	2 (0)	0	0	0 (0)
	Pwllheli	0	1 (0)	0	1 (0)	1 (0)
	Wrexham	18 (0)	13 (0)	14 (0)	12 (0)	17 (0)
	Total	28 (0)	26 (0)	22 (0)	26 (0)	36 (0)
Wales		133 (0)	135 (0)	115 (1)	128 (0)	136 (2)

* Data for a clinic at Builth Wells are included with Aberystwyth

** Data for clinics at Builth Wells, Cardigan, Lampeter and Newtown are included with Aberystwyth

Table 19. Laboratory reports of anogenital chlamydia[#] by reporting laboratory and year

Laboratory	Year				
	2000	2001	2002	2003	2004
Abergavenny Nevill Hall	0	0	0	0	0
Aberystwyth Bronglais	6	17	80	115	115
Bangor NPHS	152	171	205	199	331
Bridgend Princess of Wales	0	0	0	0	0
Cardiff NPHS	698	922	1366	1470	1894
Carmarthen NPHS	83	63	83	165	236
Haverfordwest Withybush	53	72	63	103	38
Llantrisant Royal Glamorgan	0	0	0	0	297
Merthyr Tydfil Prince Charles	23	28	27	55	5
Newport Royal Gwent	54	0	0	0	0
Rhyl NPHS	209	182	194	191	218
Swansea NPHS	753	708	714	660	1153
Wrexham Maelor	0	0	0	0	0
Outside Wales	0	0	0	0	6
Total	2031	2163	2732	2958	4293

[#] Includes all anogenital specimens positive for *Chlamydia trachomatis* or *Chlamydia spp.*

Table 20. New episodes of selected conditions by GUM clinic (KC60 data): 2004 data

Region		Syphilis	Gonorrhoea	Chlamydia	NSU-male	Trichomoniasis	Anaerobic/ bacterial vaginosis	Candidosis	Herpes	Warts	Incoming telephone calls for clinical advice or results ¹	First attendances ** (as on QS1)	** of which new patients
		A1,A2	B1,B2	C4a,C4c	C4h	C6a	C6b	C7a	C10a	C11a			
South & East	Aberdare	0	28	35	37	0	55	33	6	81	0	527	321
	Cardiff	25	249	1173	687	24	844	760	169	832	17791	11629	6258
	Llantrisant ²	3	57	168	157	3	271	180	44	249	20782	2134	1286
	Newport ³	6	105	488	321	4	207	235	74	464	6869	4434	2923
Mid & West	Aberystwyth ⁴	1	5	75	11	0	50	28	7	88	674	738	648
	Carmarthen ⁵	0	17	158	382	6	108	80	22	191	920	1436	957
	Haverfordwest	0	20	48	132	1	57	31	8	76	398	554	448
	Pembroke	0	11	21	122	0	28	12	2	38	183	299	0
	Bridgend	0	12	53	52	0	68	52	8	105	0	510	333
	Port Talbot	0	19	77	8	0	52	68	6	85	200	546	86
	Swansea	2	75	507	135	8	360	359	75	533	3857	3594	1828
North Wales	Bangor	0	11	119	59	2	68	97	58	146	1170	1324	984
	Bodelwyddan	2	45	192	202	4	180	229	38	217	1745	2464	1415
	Holyhead	0	2	22	3	0	8	16	6	24	136	228	173
	Llandudno	0	2	42	25	0	20	48	21	55	327	501	389
	Pwllheli	0	0	32	2	0	5	23	5	29	180	247	190
	Wrexham	0	36	331	305	2	313	326	68	288	2299	3196	1879
Wales		39	694	3541	2640	54	2694	2577	617	3501	57531	34361	20118

¹ Data for Llantrisant, Aberdare and Bridgend are currently aggregated.² Data for clinics at Pontypridd and University of Glamorgan are included with Llantrisant.³ Data for a clinic at Pontypool are currently included with Newport⁴ Data for clinics at Builth Wells, Lampeter, Cardigan and Newtown are currently included with Aberystwyth⁵ Data for a clinic at Llanelli are currently included with Carmarthen