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Sexual Health in Wales Surveillance Scheme (SWS)

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(Data to end June 2015)

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Purpose and Summary of Document:

This report presents the latest observed trends on the rates of STIs and other infections diagnosed in Integrated Sexual Health clinics in Wales and highlights quality issues in the data. Data are presented to end of June 2015, as at 6th January 2016.

Key points

- There was an increase in reports of new diagnoses of syphilis and hepatitis C across Wales over the last 2 years (comparing Q1–Q2 2013 and Q1–Q2 2015)(Table 1).
- The number of new episodes of syphilis detected increased by 76% between the two periods compared (Q1–Q2 2013 and Q1–Q2 2015)(Table 1).
- The observed 27% increase in hepatitis C should be taken with caution due to small numbers.
- New diagnoses of chlamydia and gonorrhoea increased slightly over the same period.
- New episodes of other STIs/BBV appeared to be stable or to decrease. However this may have been due to lower data completeness in the second period (84% in 2013 vs. 78% in 2015 –see Appendix on data quality).
- All of the increase in syphilis cases occurred in males (Table 2). The percentage increase was higher in men who do not report having sex with men than in men who report having sex with men (MSM) (225% vs. 56% increase). However, in Q1–Q2 2015 two thirds of cases were still in MSM.
- All of the increase in chlamydia and gonorrhoea cases occurred in males.
- An increase in cases in men who have sex with men (MSM) accounted for most of the increase in chlamydia and gonorrhoea cases in males (Table 2).
- In 15-24 year olds, the increase in reported syphilis was more pronounced than in the general population, with reported syphilis more than doubling between Q1–Q2 2013 and Q1–Q2 2015 (Table 3).
- A 7% increase in cases in 15-24 year olds accounted for the increase in gonorrhoea cases in the general population.
- Reported first episodes of herpes increased by 15% in 15-24 year olds, a trend not observed in the general population.
- Health board trends should be taken with caution, as completeness of data varies between clinics and health boards. For instance, Cardiff and Vale reporting has improved greatly between the two periods compared, meaning the two periods are not really comparable in this LHB. This may also skew the results for all Wales, for instance overestimating increases in MSM and young people.
- Gonorrhoea appears to be on the increase in Cwm Taf (Figure 2), where completeness of reporting is similar between the two periods compared. The increase is especially marked in females (Table 5).
- Syphilis trends should be monitored in ABMU and Cwm Taf. The apparent syphilis decline in the last quarter reported (Q2 2015) in these LHBs could be a reflection of reporting delays (Figure 3).

General population

Table 1. Percentage change in selected diagnoses and screens made in ISH clinics from Q1–Q2 2013 to Q1–Q2 2015 in Wales

	Diagnoses			Screens		
	Q1 - Q2 2013	Q1 - Q2 2015	% Change	Q1 - Q2 2013	Q1 - Q2 2015	% Change
Chlamydia	2135	2195	3%	21621	21922	1%
Warts (1st episode)	1629	1453	-11%	-	-	-
Herpes (1st episode)	533	524	-2%	-	-	-
Gonorrhoea	395	405	3%	21572	21897	2%
HIV (new diagnosis)	58	32	-45%	12958	13504	4%
Syphilis	25	44	76%	12555	13014	4%
LGV	2	1	-50%	-	-	-
Hepatitis A (acute)	0	0	-	-	-	-
Hepatitis B (1st diagnosis)	12	8	-33%	-	-	-
Hepatitis C (1st diagnosis)	11	14	27%	-	-	-

i) Diagnoses made in new patient and rebook patient attendances reported to SWS clinic. Rebook patient attendances are those where patients who are known to the clinic return for an unrelated episode of care.

ii) Recent figures may be incomplete due to delays in reporting and to incomplete mapping at CDSC level.

iii) These data do not include diagnoses made in clinics in South Hywel Dda, which do not report to SWS.

iv) Residents in Wales only. Diagnoses of individuals with unknown residence location have been excluded.

v) The following KC60/SHHAPT diagnoses codes were used: chlamydia (C4, C4A, C4C), first episode of genital warts (C11A), first episode of genital herpes (C10A), gonorrhoea (B, B1, B2), new diagnosis of HIV (E1A, E2A, E3A1,H1,H1A,H1B), primary, secondary and early latent syphilis (A1, A2, A3), LGV (C2), acute hepatitis A infection (C15), first diagnosis of hepatitis B (C13, C13A), first diagnosis of hepatitis C (C14).

vi) Screen codes are collected only for chlamydia, gonorrhoea, HIV and syphilis. The following KC60/SHHAPT services codes were used: chlamydia tests (S1,S2,T1,T2,T3,T4), gonorrhoea tests (S1,S2,T2,T3,T4), HIV antibody tests (S2,T4, P1A), syphilis tests (S1,S2,T3,T4).

Gender and sexuality

Table 2. Percentage change in selected diagnoses made in ISH clinics from Q1–Q2 2013 to Q1–Q2 2015 by gender and sexuality in Wales

	Q1 - Q2 2013			Q1 - Q2 2015			% Change		
	Male*	*of which MSM	Female	Male*	*of which MSM	Female	Male*	*of which MSM	Female
Chlamydia	948	63	1187	1010	118	1185	7%	87%	0%
Warts (1st episode)	842	32	787	777	51	676	-8%	59%	-14%
Herpes (1st episode)	188	12	345	176	15	348	-6%	25%	1%
Gonorrhoea	255	99	140	265	144	140	4%	45%	0%
HIV (new diagnosis)	47	34	11	28	22	4	-40%	-35%	-64%
Syphilis	22	18	3	41	28	3	86%	56%	0%
LGV	2	*	0	1	*	0	-50%	*	-
Hepatitis A (acute)	0	0	0	0	0	0	-	-	-
Hepatitis B (1st diagnosis)	9	2	3	6	2	2	-33%	0%	-33%
Hepatitis C (1st diagnosis)	8	3	3	9	2	5	13%	-33%	67%

i) Diagnoses made in new patient and rebook patient attendances reported to SWS clinic. Rebook patient attendances are those where patients who are known to the clinic return for an unrelated episode of care.

ii) Recent figures may be incomplete due to delays in reporting and to incomplete mapping at CDSC level.

iii) These data do not include diagnoses made in clinics in South Hywel Dda, which do not report to SWS.

iv) Residents in Wales only. Diagnoses of individuals with unknown residence location have been excluded.

v) The following KC60/SHHAPT diagnoses codes were used: chlamydia (C4, C4A, C4C), first episode of genital warts (C11A), first episode of genital herpes (C10A), gonorrhoea (B, B1, B2), new diagnosis of HIV (E1A, E2A, E3A1,H1,H1A,H1B), primary, secondary and early latent syphilis (A1, A2, A3), LGV (C2), acute hepatitis A infection (C15), first diagnosis of hepatitis B (C13, C13A), first diagnosis of hepatitis C (C14).

vi) Small numbers with potential for indirect disclosure of person identifiable information (*).

Young people (15-24 year olds)

Table 3. Percentage change in selected diagnoses made in ISH clinics from Q1–Q2 2013 to Q1–Q2 2015 in 15-24 year olds in Wales

15-24 year olds	Q1 - Q2 2013	Q1 - Q2 2015	% Change
Chlamydia	1563	1574	1%
Warts (1st episode)	975	789	-19%
Herpes (1st episode)	250	287	15%
Gonorrhoea	191	204	7%
HIV (new diagnosis)	9	5	-44%
Syphilis	5	11	120%
LGV	0	0	-
Hepatitis A (acute)	0	0	-
Hepatitis B (1st diagnosis)	1	2	100%
Hepatitis C (1st diagnosis)	3	2	-33%

i) Diagnoses made in new patient and rebook patient attendances reported to SWS clinic. Rebook patient attendances are those where patients who are known to the clinic return for an unrelated episode of care.

ii) Recent figures may be incomplete due to delays in reporting and to incomplete mapping at CDSC level.

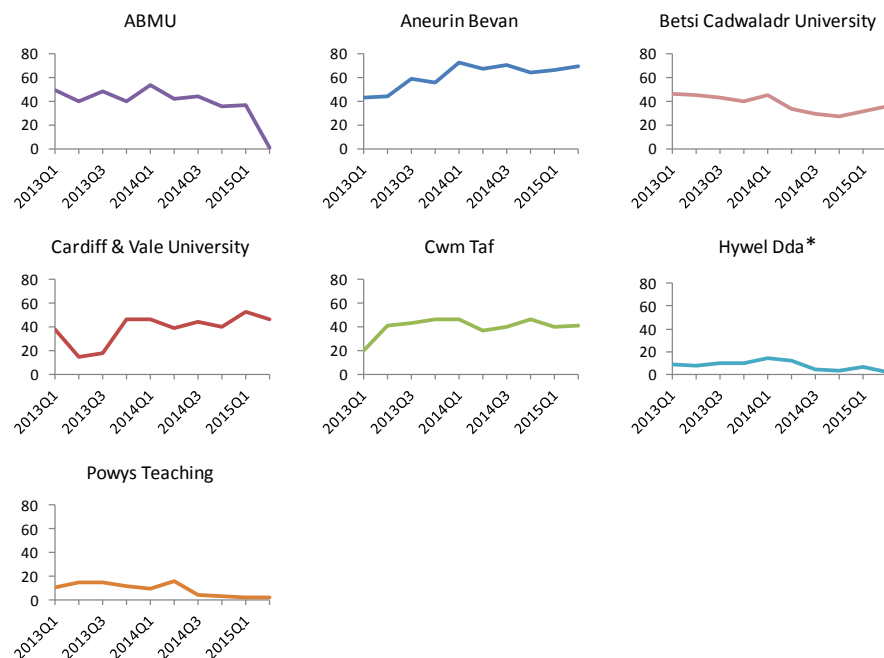
iii) These data do not include diagnoses made in clinics in South Hywel Dda, which do not report to SWS.

iv) Residents in Wales only. Diagnoses of individuals with unknown residence location have been excluded.

v) The following KC60/SHHAPT diagnoses codes were used: chlamydia (C4, C4A, C4C), first episode of genital warts (C11A), first episode of genital herpes (C10A), gonorrhoea (B, B1, B2), new diagnosis of HIV (E1A, E2A, E3A1,H1,H1A,H1B), primary, secondary and early latent syphilis (A1, A2, A3), LGV (C2), acute hepatitis A infection (C15), first diagnosis of hepatitis B (C13, C13A), first diagnosis of hepatitis C (C14).

Chlamydia

Figure 1. Incidence of chlamydia diagnoses made in ISH clinics per 100,000 population, from Q1 2013 to Q2 2015 by LHB of residence



- i) Diagnoses made in new patient and rebook patient attendances reported to SWS clinic. Rebook patient attendances are those where patients who are known to the clinic return for an unrelated episode of care.
 ii) Recent figures may be incomplete due to delays in reporting and to incomplete mapping at CDSC level.
 iii) *These data do not include diagnoses made in clinics in South Hywel Dda, which do not report to SWS.
 iv) Residents in Wales only. Diagnoses of individuals with unknown residence location have been excluded (4%)
 v) The following KC60/SHHAPT codes were used: chlamydia (C4, C4A, C4C).

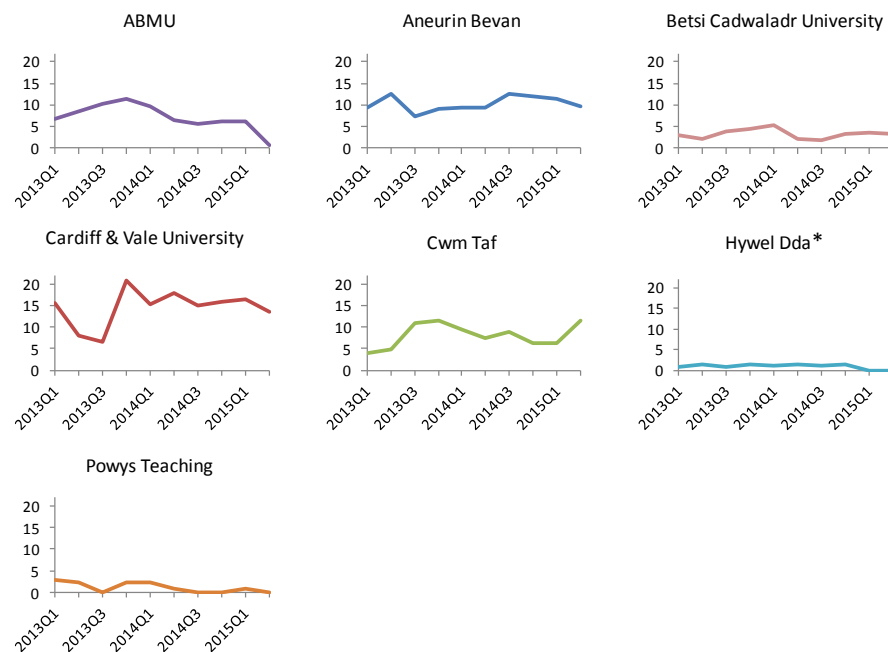
Table 4. Percentage change in chlamydia diagnoses made in ISH clinics from Q1-Q2 2013 to Q1-Q2 2015, by LHB of residence, gender and sexuality

LHB	Group	Q1 - Q2 2013	Q1 - Q2 2015	% Change
Abertawe Bro Morgannwg University	Female	280	112	-60%
	Male*	186	83	-55%
	*of which MSM	3	1	-67%
	Total	466	195	-58%
Aneurin Bevan	Female	259	486	88%
	Male*	247	300	21%
	*of which MSM	19	25	32%
	Total	506	786	55%
Betsi Cadwaladr University	Female	346	242	-30%
	Male*	287	222	-23%
	*of which MSM	19	12	-37%
	Total	633	464	-27%
Cardiff & Vale University	Female	146	215	47%
	Male*	108	257	138%
	*of which MSM	18	67	272%
	Total	254	472	86%
Cwm Taf	Female	97	115	19%
	Male*	82	126	54%
	*of which MSM	4	8	100%
	Total	179	241	35%
Hywel Dda	Female	38	12	-68%
	Male*	25	20	-20%
	*of which MSM	*	*	*
	Total	63	32	-49%
Powys Teaching	Female	21	3	-86%
	Male*	13	2	-85%
	*of which MSM	*	*	*
	Total	34	5	-85%
All Wales	Female	1187	1185	0%
	Male*	948	1010	7%
	*of which MSM	63	118	87%
	Total	2135	2195	3%

- i) Diagnoses made in new patient and rebook patient attendances reported to SWS clinic. Rebook patient attendances are those where patients who are known to the clinic return for an unrelated episode of care.
 ii) Recent figures may be incomplete due to delays in reporting and to incomplete mapping at CDSC level.
 iii) These data do not include diagnoses made in clinics in South Hywel Dda, which do not report to SWS.
 iv) Residents in Wales only. Diagnoses of individuals with unknown residence location have been excluded (4%)
 v) The following KC60/SHHAPT codes were used: gonorrhoea (C4, C4A, C4C).
 vi) Small numbers with potential for indirect disclosure of person identifiable information (*).

Gonorrhoea

Figure 2. Incidence of gonorrhoea diagnoses made in ISH clinics per 100,000 population, from Q1 2013 to Q2 2015 by LHB of residence



i) Diagnoses made in new patient and rebook patient attendances reported to SWS clinic. Rebook patient attendances are those where patients who are known to the clinic return for an unrelated episode of care.

ii) Recent figures may be incomplete due to delays in reporting and to incomplete mapping at CDSC level.

iii) *These data do not include diagnoses made in clinics in South Hywel Dda, which do not report to SWS.

iv) Residents in Wales only. Diagnoses of individuals with unknown residence location have been excluded (4%).

v) The following KC60/SHHAPT codes were used: gonorrhoea (B, B1, B2).

Table 5. Percentage change in gonorrhoea diagnoses made in ISH clinics from Q1–Q2 2013 to Q1–Q2 2015, by LHB of residence, gender and sexuality

LHB	Group	Q1 - Q2 2013	Q1 - Q2 2015	% Change
Abertawe Bro Morgannwg University	Female	27	10	-63%
	Male*	53	26	-51%
	*of which MSM	5	5	0%
	Total	80	36	-55%
Aneurin Bevan	Female	51	52	2%
	Male*	77	72	-6%
	*of which MSM	31	41	32%
	Total	128	124	-3%
Betsi Cadwaladr University	Female	11	18	64%
	Male*	23	29	26%
	*of which MSM	15	16	7%
	Total	34	47	38%
Cardiff & Vale University	Female	37	36	-3%
	Male*	75	108	44%
	*of which MSM	43	80	86%
	Total	112	144	29%
Cwm Taf	Female	8	24	200%
	Male*	18	29	61%
	*of which MSM	4	1	-75%
	Total	26	53	104%
Hywel Dda	Female	2	0	-100%
	Male*	6	0	-100%
	*of which MSM	*	*	*
	Total	8	0	-100%
Powys Teaching	Female	4	0	-100%
	Male*	3	1	-67%
	*of which MSM	*	*	*
	Total	7	1	-86%
All Wales	Female	140	140	0%
	Male*	255	265	4%
	*of which MSM	99	144	45%
	Total	395	405	3%

i) Diagnoses made in new patient and rebook patient attendances reported to SWS clinic. Rebook patient attendances are those where patients who are known to the clinic return for an unrelated episode of care.

ii) Recent figures may be incomplete due to delays in reporting and to incomplete mapping at CDSC level.

iii) These data do not include diagnoses made in clinics in South Hywel Dda, which do not report to SWS.

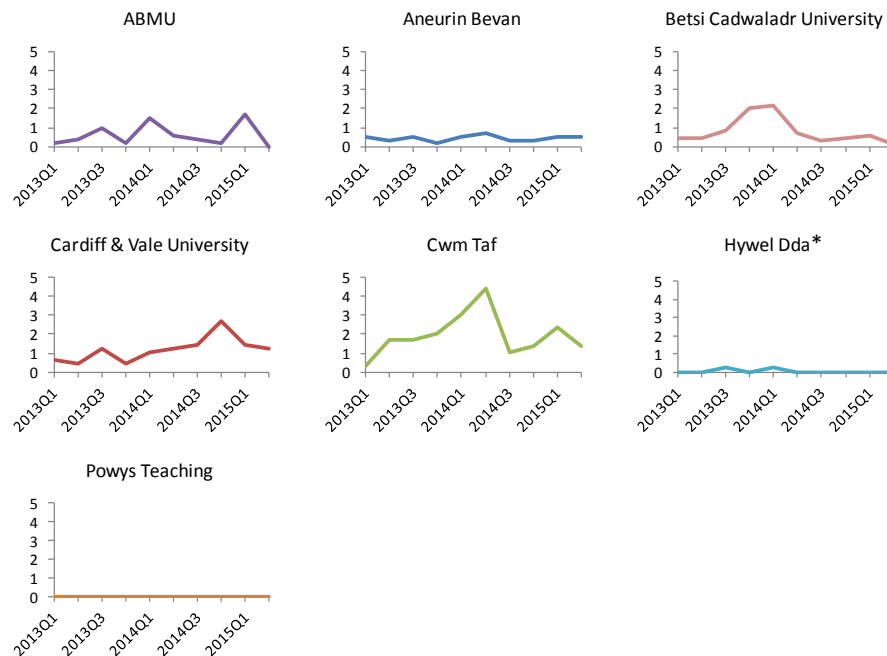
iv) Residents in Wales only. Diagnoses of individuals with unknown residence location have been excluded (4%).

v) The following KC60/SHHAPT codes were used: gonorrhoea (B, B1, B2).

vi) Small numbers with potential for indirect disclosure of person identifiable information (*).

Syphilis

Figure 3. Incidence of syphilis diagnoses made in ISH clinics per 100,000 population, from Q1 2013 to Q2 2015 by LHB of residence



i) Diagnoses made in new patient and rebook patient attendances reported to SWS clinic. Rebook patient attendances are those where patients who are known to the clinic return for an unrelated episode of care.

ii) Recent figures may be incomplete due to delays in reporting and to incomplete mapping at CDSC level.

iii) *These data do not include diagnoses made in clinics in South Hywel Dda, which do not report to SWS.

iv) Residents in Wales only. Diagnoses of individuals with unknown residence location have been excluded (4%).

v) The following KC60/SHHAPT codes were used: primary, secondary and early latent syphilis (A1, A2, A3).

Table 6. Percentage change in syphilis diagnoses made in ISH clinics from Q4 Q1-Q2 2013 to Q1-Q2 2015, by LHB of residence, gender and sexuality

LHB	Group	Q1 - Q2 2013	Q1 - Q2 2015	% Change
Abertawe Bro Morgannwg University	Female	1	0	-100%
	Male*	2	9	350%
	*of which MSM	1	5	400%
	Total	3	9	200%
Aneurin Bevan	Female	1	1	0%
	Male*	4	5	25%
	*of which MSM	*	*	*
	Total	5	6	20%
Betsi Cadwaladr University	Female	0	0	-
	Male*	6	5	-17%
	*of which MSM	*	*	*
	Total	6	5	-17%
Cardiff & Vale University	Female	1	0	-100%
	Male*	4	13	225%
	*of which MSM	3	11	267%
	Total	5	13	160%
Cwm Taf	Female	0	2	-
	Male*	6	9	50%
	*of which MSM	4	3	-25%
	Total	6	11	83%
Hywel Dda	Female	0	0	-
	Male*	0	0	-
	*of which MSM	0	0	-
	Total	0	0	-
Powys Teaching	Female	0	0	-
	Male*	1	0	-100%
	*of which MSM	*	*	*
	Total	0	0	-
All Wales	Female	3	3	0%
	Male*	22	41	86%
	*of which MSM	18	28	56%
	Total	25	44	76%

i) Diagnoses made in new patient and rebook patient attendances reported to SWS clinic. Rebook patient attendances are those where patients who are known to the clinic return for an unrelated episode of care.

ii) Recent figures may be incomplete due to delays in reporting and to incomplete mapping at CDSC.

iii) These data do not include diagnoses made in clinics in South Hywel Dda, which do not report to SWS.

iv) Residents in Wales only. Diagnoses of individuals with unknown residence location have been excluded (4%).

v) The following KC60/SHHAPT codes were used: primary, secondary and early latent syphilis (A1, A2, A3).

vi) Small numbers with potential for indirect disclosure of person identifiable information (*).

Appendix: Data completeness

Key points

- The percentage of new and rebook attendances with at least one code (SHHAPT, SRHAD, KC60, or local code) was 84% for Q1–Q2 2013 and 78% for Q1–Q2 2015, and therefore apparent declines in rates of detected infections could reflect reporting delays.
- Health board trends should be taken with caution, as completeness of data varies between clinics and health boards. For instance, Cardiff and Vale reporting has improved greatly between the two periods compared, meaning the two periods are not really comparable in this LHB. This may also skew the results for all Wales, for instance overestimating increases in MSM and young people.
- Between Q1–Q2 2013 and Q1–Q2 2015, thirteen clinics started reporting, and three clinics closed.
- This report does not include diagnoses made in clinics in South Hywel Dda (Carmarthenshire and Pembrokeshire), which do not report to SWS.

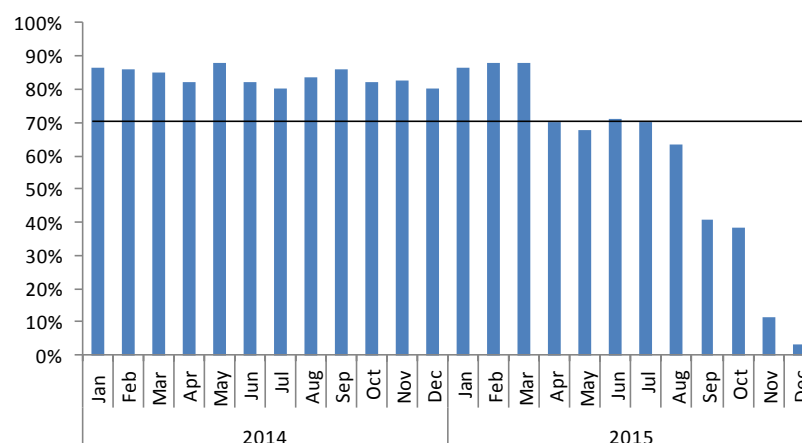
Unmapped attendances

When SWS receives attendances with unrecognised codes, these attendances are not accepted into the system and are stored in "holding tables". The CDSC is working to map as many of these codes as possible. At the time of this report all but 17 new patient and rebook patient attendances in the holding tables were posterior to Q2 2015 and therefore, outside the scope of this report.

Coding completeness

Attendances which are received in SWS may or may not have diagnosis or service codes associated with them, as most of the time there is a lag between the attendance the diagnosis or service codes being introduced in the system. As there are codes to report "no service and/or treatment required" and "other conditions requiring treatment", in time, virtually all the attendances should have at least one code. We use this to estimate the completeness of the data received. In the instances when the attendance data have not been received, the number of attendances has been imputed in order to be able to calculate a percentage of attendances with at least one code.

Figure A1. Percentage of new and rebook attendances with at least one diagnosis/ service code (of any kind), Wales 2014-2015



i) Diagnoses made in new patient and rebook patient attendances reported to SWS clinic. Rebook patient attendances are those where patients who are known to the clinic return for an unrelated episode of care.

ii) Data for number of attendances are incomplete since April 2014. Therefore, the number of attendances has been imputed when necessary (average attendances for the previous three months).

Table A1. Number of new and rebook attendances and percentage with at least one diagnosis/ service code (of any kind) by clinic, Q1–Q2 2013 to Q1–Q2 2015, Wales

Clinic	Q1-Q2 2013		Q1-Q2 2015	
	Number	% with ≥1 codes	Number	% with ≥1 codes
1	204	99%	524	99%
5	568	100%	501	99%
6	815	99%	696	99%
9	1035	100%	1044	96%
11	88	100%	0	
13	3202	35%	7536	79%
14	134	100%	85	99%
16	596	99%	515	82%
17	1133	98%	775	83%
18	789	99%	749	95%
20	223	97%	184	99%
21	209	99%	171	96%
23	1758	100%	1743	98%
24	203	99%	1357	97%
27	1151	91%	0	
28	5814	100%	4093	99%
29	6876	84%	15179	100%
30	94	100%	0	
32	918	99%	1715	98%
33	532	100%	212	34%
34	176	95%	161	99%
36	2398	100%	1078	35%
37	831	98%	783	93%
38	7766	100%	4405	36%
39	720	100%	283	41%
41	1653	99%	1593	99%
2	0		8	100%
3	0		684	93%
4	0		85	99%
7	0		500	90%
8	0		48	79%
12	0		203	92%
19	0		130	73%
25	0		62	98%
26	0		16	52%
35	0		132	83%
40	0		80	95%
42	0		206	87%
44	0		791	97%
Wales	39886	84%	48327	78%

i) Diagnoses made in new patient and rebook patient attendances reported to SWS clinic. Rebook patient attendances are those where patients who are known to the clinic return for an unrelated episode of care.

ii) Green: ≥90% attendances with at least one code; Orange: ≥80% and <90% attendances with at least one code; Red: <80% attendances with at least one code; Gray: Not in service.

iii) Some clinics are reporting sexual and reproductive health through the SWS-STI system using the new patient and rebook patient attendance types.

iv) Data for number of attendances are incomplete since April 2014. Therefore, the number of attendances has been imputed when necessary (average attendances for the previous three months).