

**Track scope and Category Number: A1****Title:** Standardizing Approach to Management of Sexually Transmitted Infections (STIs)**Authors:** Dawit ENDALE, Fana TEFERA, Getachew FELEKE, Benti GELETA**Affiliations:** University of Washington's International Training and Education Center on HIV, Addis Ababa, Ethiopia**Location of Project/Program:** Ethiopia**Key Words:** Syndromic approach, STI**Implementation Area:** HIV prevention**Background and Implementation Approach**

I-TECH started supporting the STI program in April 2007. At that time, health care providers (HCPs) were using varying approaches including etiologic, clinical, and syndromic management to treat patients with STIs. The etiologic and clinical approaches require highly skilled professionals as well as expensive and time consuming laboratory diagnostic support, which has not been routinely available. STI patients were not routinely offered HIV counseling and testing, and those who tested positive were not linked to HIV care and treatment services. Shortages of drugs contributed to the weakness of STI service. In addition, poor recording and reporting negatively affected monitoring and evaluation.

**Methods**

To improve the existing situation in the STI services, 248 HCPs from 37 sites in Amhara, Tigray and Afar regions were given 40 hours of training in syndromic management of STIs, followed by clinical mentorship by I-TECH. Data collection tools were institutionalized. STI patients were syndromically treated, provider initiated HIV counseling and testing (PICT) was rendered, HIV/conventional STI co infected patients were linked to HIV care and treatment units. Condom promotion, partner management and risk reduction education were in the package. In addition, job aids and 4500 pre-packaged urethral discharge treatment kits were distributed. STI focal persons were assigned to coordinate STI services at facility level.

**Results and Lessons Learned**

From April 2007 to the end of November 2008, the above interventions have helped the health facilities to syndromically treat 3518 STI patients, 1656 of whom were tested for HIV. Trends suggest that treating STI patients syndromically and offering counseling and testing for HIV have improved over time. In 2006, there was no syndrome based STI report. In 2007, a total of 883 patients were reported to be treated syndromically, 424 of whom were tested for HIV. In the year 2008, in eight months time, 2635 STI cases were treated syndromically, 1307 of whom were tested for HIV. Co-infected individuals were linked to HIV care and treatment units. The approach to STI treatment was standardized to syndromic management, an approach which is cost effective, easy to implement, and effective in treating STIs that significantly contribute to HIV transmission such as urethral discharge and genital ulceration.

**Conclusions and Recommendations**

Training all HCPs working at OPDs, ART clinics, ANC and family planning units in syndromic management of STIs remains crucial to strengthening the integration of STI services into general health care practice. In addition, strengthening PICT is critical for identifying co-infected individuals and linking them to HIV care and treatment services. Early identification and treatment of STIs in HIV infected individuals plays an important role in preventing HIV transmission to others.