

Sexual health - all ages

Brighton & Hove JSNA topic summary

December 2018

What this topic summary covers:

What are the rates of the most common sexually transmitted infections (STIs) in the city?

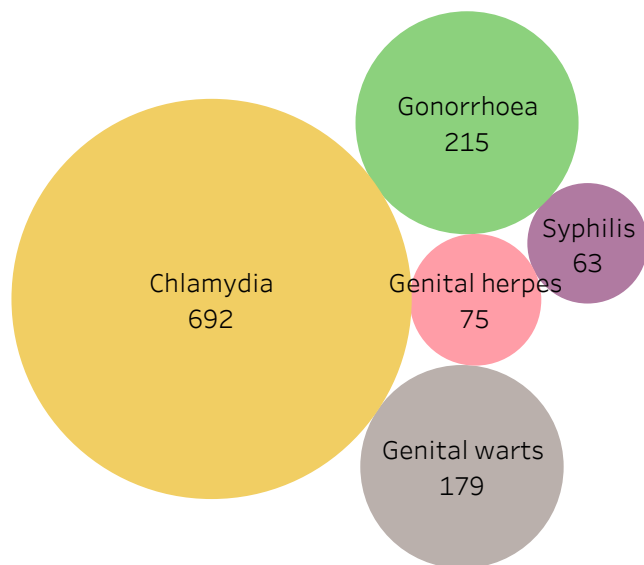
How have these changed over time?

Who is more likely to be diagnosed with an STI?

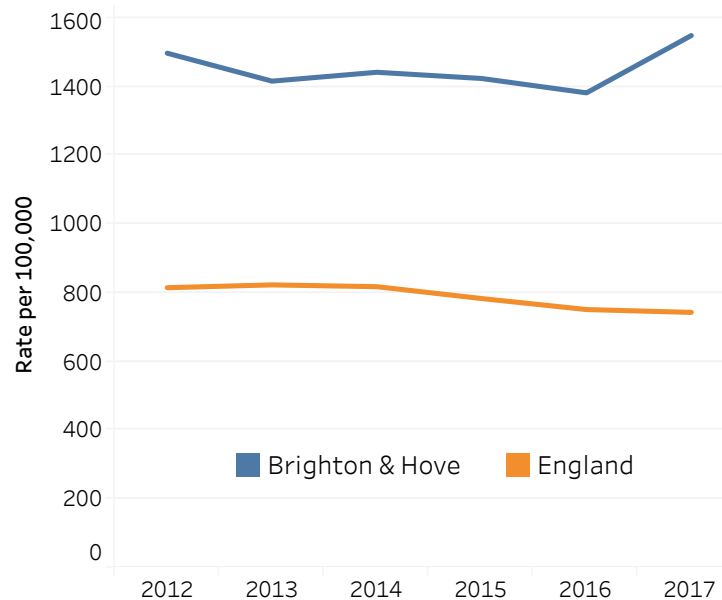
What is the abortion rate in the city?

What is the long acting reversible contraception (LARC) prescribing rate in the city?

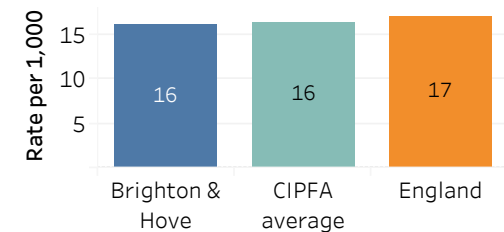
New STIs in Brighton & Hove in 2017
Rates per 100,000



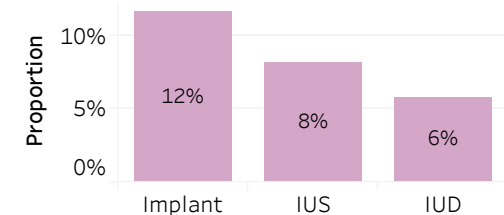
All new STI diagnoses rates per 100,000



Total abortion rates in 2017
For women aged 15-44 years

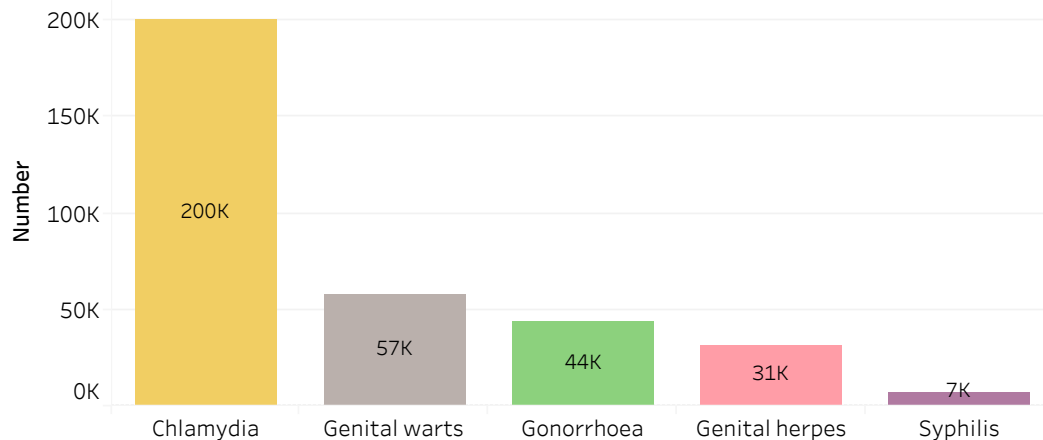


Chosen LARC methods in 2016
Proportion of all contraception



Why is this issue important?

Number of new STIs in England in 2017

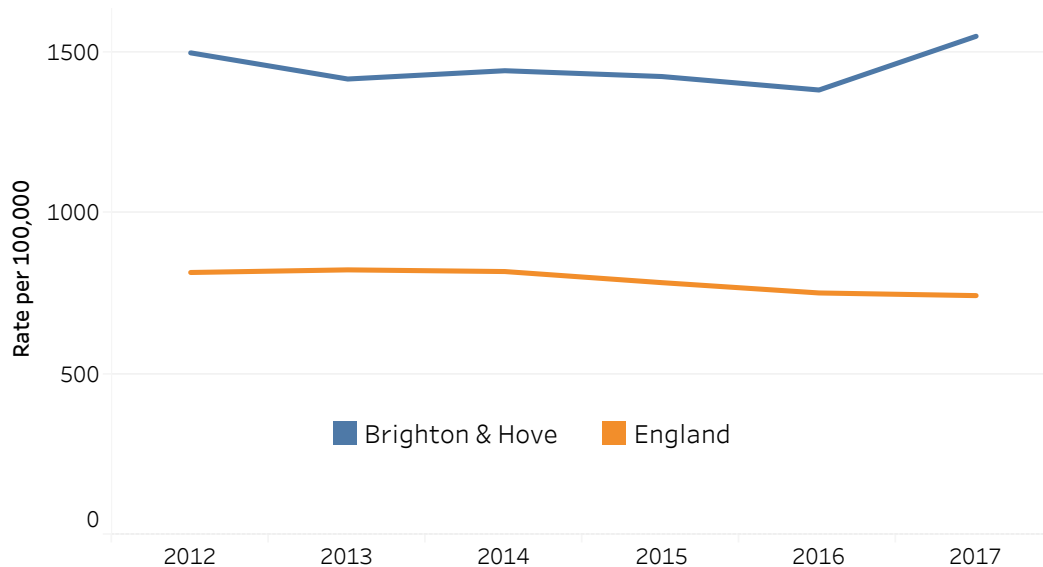


England continues to experience worrying levels of poor sexual health: rates of sexually transmitted infections (STIs) and unintended pregnancies remain high.

Although there has been a slight decrease (0.3%) in the total number of new cases of STIs diagnosed in 2017 compared to 2016, over the past decade diagnoses of gonorrhoea, syphilis and genital herpes have increased considerably.

There are higher rates of infections in some population groups: those aged under 25 years, men who have sex with men (MSM) and people with a Black ethnicity are disproportionately affected by poor sexual health.

All new STI diagnoses rates per 100,000

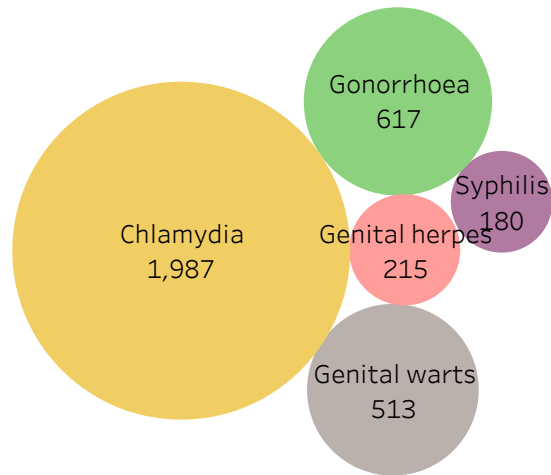


Chlamydia is the most common bacterial STI and is increasing, especially in those aged under 25 years. As chlamydia often has no symptoms, but can have serious health consequences including pelvic inflammatory disease, ectopic pregnancy and tubal factor infertility, timely detection and treatment is crucial. As there are variations in detection rates across the country, which largely reflect differences in testing rates, the national opportunistic screening programme has been maintained to encourage and support opportunistic screening for those aged 15-24 years.

Data from the Public Health England Sexual and Reproductive Health Profile

STIs in Brighton & Hove

Number of new diagnoses in 2017



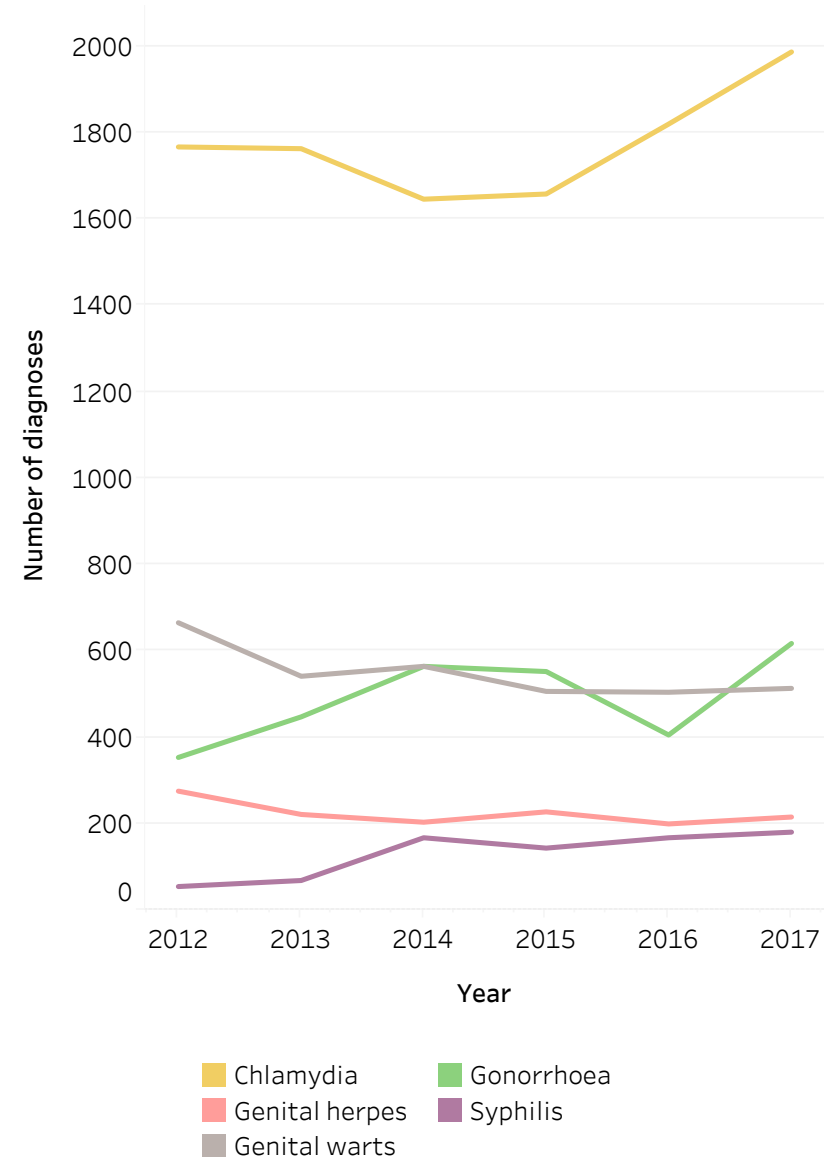
Chlamydia is the most commonly diagnosed STI in the city, with almost 2,000 new diagnoses in 2017. This is followed by gonorrhoea, with the majority of these diagnoses being made among MSM.

The rise in gonorrhoea that has been seen nationally has also been witnessed locally, with over three times as many diagnoses being made in 2017 compared to 2008. However, unlike the national picture there have been small decreases in genital warts and herpes. After a small decline between 2012 and 2015, the number of new chlamydia diagnoses have been rising since 2015.

Between 2011 and 2016, 7% of women and 15% of men who presented to the sexual health service with a new STI became re-infected within a year.

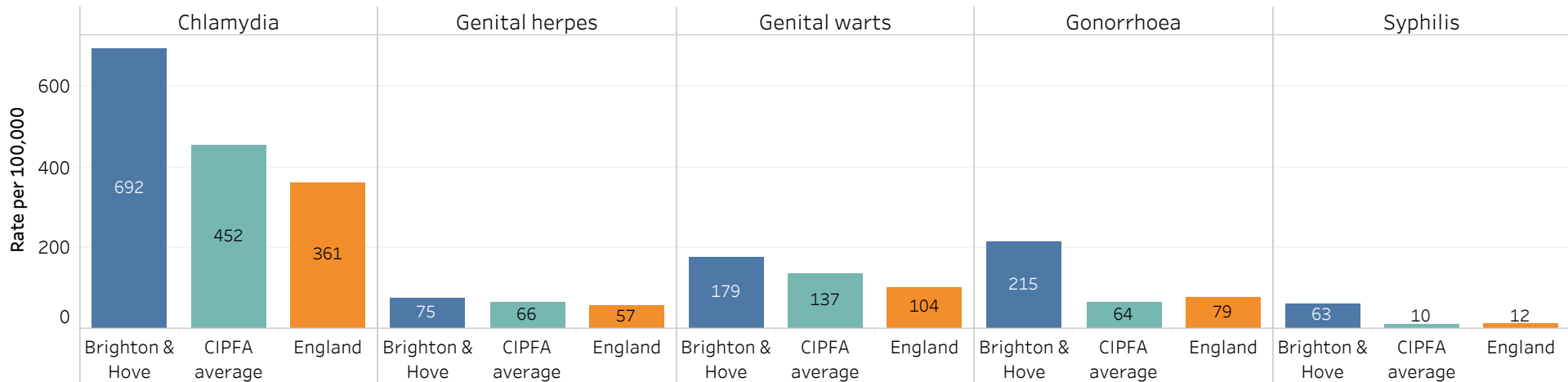
New diagnoses data from the Public Health England Sexual and Reproductive Health Profile.
Re-infection data from the Public Health England Brighton & Hove Local Authority sexual health epidemiology report (LASER), 2016

Number of new diagnoses over time



How does Brighton & Hove compare?

Diagnosis rates in 2017



The rate of diagnosis for all new STIs in the city was **1,549** per 100,000 people, which is double the England rate of **743** per 100,000.

Chlamydia is the most commonly diagnosed STI in the city as in England, however the diagnosis rate is much higher in Brighton & Hove at **692** per 100,000 people compared to **361** per 100,000 people nationally. The national chlamydia screening programme aims to control chlamydia among young people through early detection and treatment of asymptomatic infection. Therefore a high detection rate is positive. In 2017, the chlamydia detection rate in Brighton & Hove was **2,250** per 100,000 people aged 15-24 years. This is better than the England rate of **1,882**.

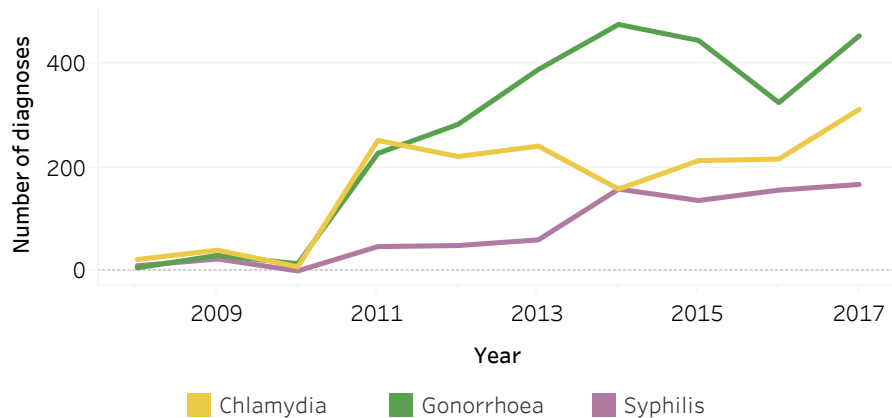
Brighton & Hove had the highest diagnosis rates for both gonorrhoea and syphilis outside of London. Locally, gonorrhoea was diagnosed at a rate of **215** per 100,000 people, significantly higher than the national rate of **79** per 100,000. The diagnosis rates of syphilis are lower with the local rate at **63** per 100,000 people, but this is over five times higher than the national rate of **12** per 100,000 people. Rates for both gonorrhoea and syphilis are also increasing locally.

The CIPFA figure represents an average of other local authorities' values that are Brighton & Hove's statistical nearest neighbours.
Data from the Public Health England Sexual and Reproductive Health Profile

Local inequalities

New diagnoses in Brighton & Hove

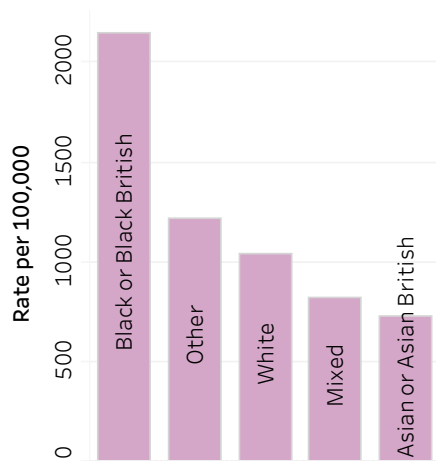
New diagnoses among men who have sex with men



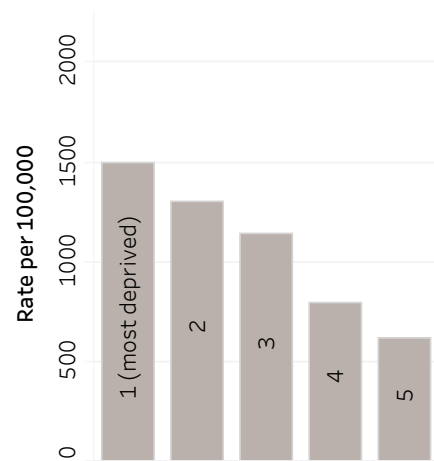
The burden of sexual ill-health is not shared equally; **younger people** (under 25 years), **men who have sex with men (MSM)** and those from **Black ethnic groups** are disproportionately affected.

The number of STI diagnoses among MSM has increased rapidly both in Brighton & Hove and England over the last decade. Nationally, possible contributing factors have been identified as condomless sex (associated with HIV seroadaptive behaviours) and chemsex (the use of drugs before or during planned sexual activity). In 2017, for cases where sexual orientation was known, **61% of new STIs in Brighton & Hove were among MSM**. Furthermore, **91% of new diagnoses of syphilis** were among MSM, as well as **69% of gonorrhoea diagnoses**. Gonorrhoea remains the most commonly diagnosed STI among MSM nationally and locally.

New diagnoses by ethnic groups in 2016



New diagnoses by deprivation quintile in 2016



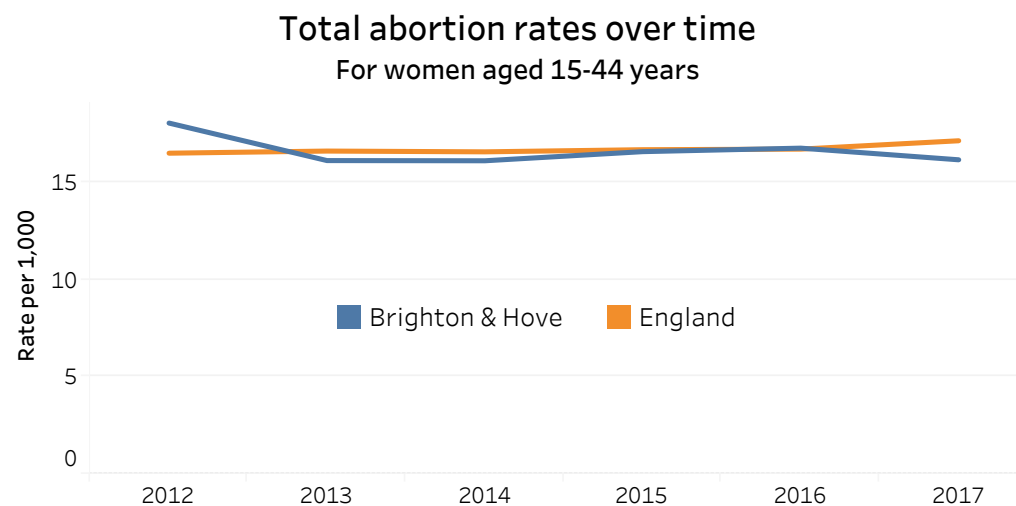
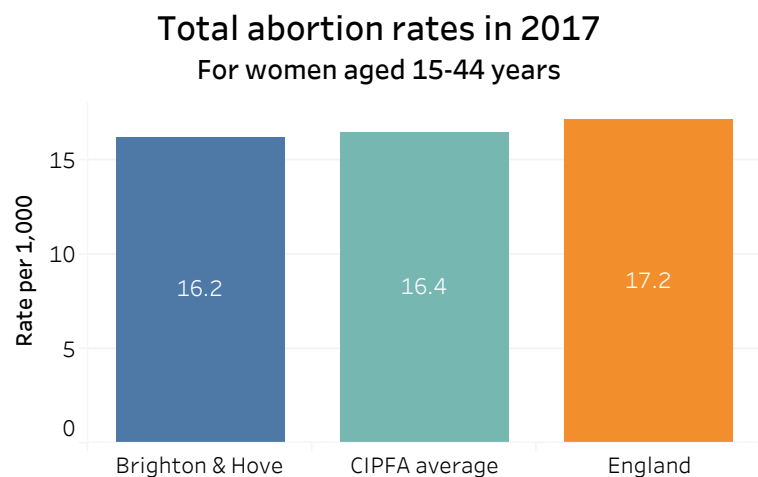
Rates of newly diagnosed STIs are highest in those who are from Black or Black British ethnic groups. In 2016, this rate was **double** that of the rate for White ethnic groups.

Those who live in **more deprived areas** are more likely to be diagnosed with a new STI. The rate of new STI diagnoses in the two most deprived quintiles is **more than double** that of those in the least deprived quintile.

Data on men who have sex with men is from the GUMCAD STI Surveillance System, Public Health England.

Data on ethnicity and deprivation is from the Public Health England Brighton & Hove Local Authority sexual health epidemiology report (LASER), 2016.

Abortions



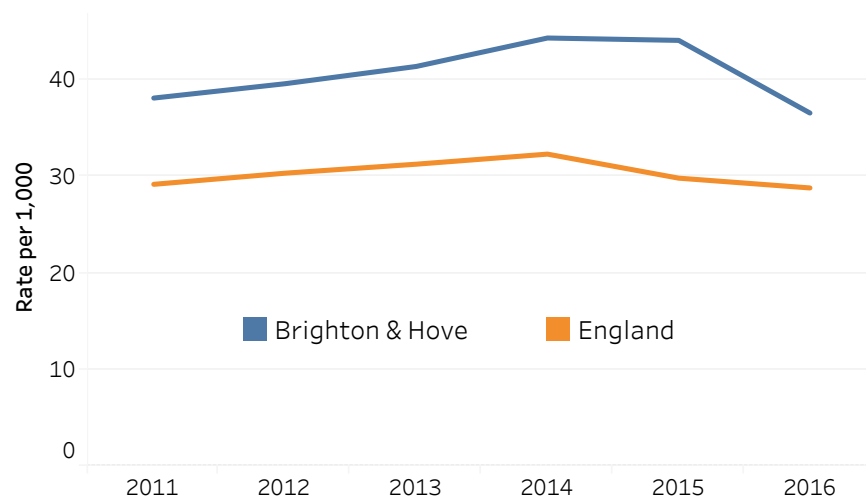
Brighton & Hove had a similar rate of abortions (**16 per 1,000** women age 15-44 years) in 2017 to England (**17 per 1,000**), a fall in the Brighton & Hove rate from **18 per 1,000** in 2012.

In Brighton & Hove in 2017, **24%** of abortions in women aged under 25 years were to women who have had a previous abortion (in any year), similar to England (**27%**).

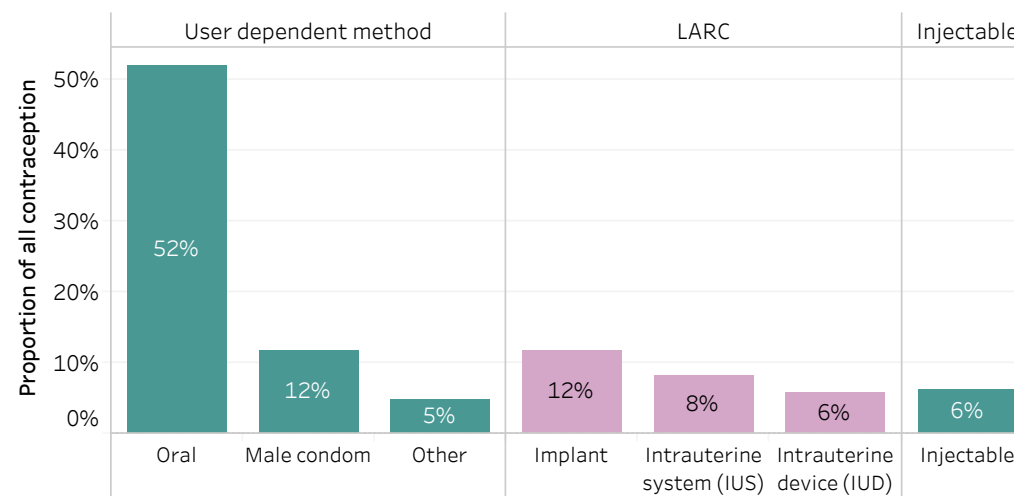
The proportion of abortions carried out early (at less than 10 weeks gestation) in 2010 was **85%** in Brighton & Hove compared with **77%** for England. In 2016, Brighton & Hove was no longer significantly better (higher) than England with **83%** of abortions carried out at less than 10 weeks gestation in Brighton & Hove compared with **81%** in England.

Long acting reversible contraception (LARC)

GP prescribed LARC rates over time
(excluding injections)



Chosen main method of contraception in 2016
Female Brighton & Hove residents attending sexual health services



An increase in the provision of long acting reversible contraception (LARC) is a proxy measure for wider access to the range of contraceptive methods and should also lead to a reduction in rates of unintended pregnancy.

In Brighton & Hove, the rate of GP-prescribed LARC (excluding injections) was increasing between 2011 and 2014, however then started to decline and reached its lowest point in 2016 of **37 per 1,000** women aged 15-44 years. This follows the national trend, however the England rate is lower at **29 per 1,000** women aged 15-44 years.

In 2016, LARC represented 26% of all contraception prescribed by sexual health services, with the most popular LARC method being the implant (12%). However the oral contraceptive is by far the most popular method, as the option chosen over half the time.

In 2017, 34% of contraception prescribed by the Brighton & Hove Sexual Health and Contraception Service (SHAC) was LARC. For those aged under 19, this was 24%.

GP prescribed LARC data from the Public Health England Sexual Reproductive Health Profile

Contraception method data from the Public Health England, Brighton & Hove Local Authority Sexual Health Epidemiology report (LASER) 2016