Serological Evidence of Infection with Chlamydia trachomatis, Herpes Simplex Virus Type 2, Syphilis, and **HIV among Women Who Have Sex with Women** Christina A. Muzny, Richa Kapil, Erika L. Austin, Edward W. Hook, III, William M. Geisler



BACKGROUND

>12.5% of American women ages 15-44 report a history of sexual activity with women (1).

> The risk for STI acquisition among women who have sex with women (WSW) is controversial as little is known about the efficiency of STI transmission between women (2-8).

>Exchange of infected secretions during vaginal and anal sex with fingers, hands, and sex toys is a plausible mechanism for STI transmission among WSW (9-13).

Complicating this picture is that many WSW also have a history of sex with men (women who have sex) with women and men; WSWM) and continue to do so (8, 14), making it difficult to determine the source of their STI(s).

> Our study evaluated differences in serological evidence of *Chlamydia trachomatis* (CT), herpes simplex virus (HSV) type 2, syphilis, and HIV infection in African American WSW who reported no lifetime history of sex with men (exclusive WSW) vs. age-matched WSWM (i.e. WSW reporting a lifetime history of sex with men).

METHODS

≻African American women ≥16 years presenting to the Jefferson County Health Department STD Clinic in Birmingham, AL and reporting sexual contact with another woman during the past year were eligible. The terms "WSW" and "WSWM" in this study apply only to sexual behavior.

>Participants completed a questionnaire on socio-demographics, sexual orientation, history of sexual assault, history of STIs, and sexual partnership numbers and types.

>CT, HSV-2, syphilis, and HIV seropositivity were measured on serum samples using a CT elementary body-based enzyme-linked immunosorbent assay (ELISA), the HerpeSelect[®] HSV-2 ELISA, the ZeusIFA fluorescent treponemal antibody-adsorption (FTA-ABS) test, and an HIV ELISA.

> Vaginal fluid was collected for *Trichomonas vaginalis* InPouch culture. A cervical swab was collected for CT and Neisseria gonorrhoeae (GC) nucleic acid amplification testing (NAAT) using the Gen-Probe Aptima Combo 2 assay.

>Analyses were performed with Stata 12.1 (College Station, TX). Descriptive statistics were examined separately for WSW and WSWM, with significant differences between study groups assessed by parametric tests (Pearson Chi-square, Fisher's exact, independent sample t-test) as appropriate.

RESULTS

Between August 2011-October 2013 163 African American WSW were enrolled

Between August 2011-October 2013, 163 African American WSW were enrolled.								
				Table 4. Association between Sex with Men (Ever) and STI Diagnoses				
>20 (12%) were exclusive WSW and they were age-matched to 20 African American WSWM.					Never had male sexual	Ever had male sexual		
Table 1. Association between Sex with Men (Ever) and Select Demographic Characteristics among African Amonican Ween with Men (Ever)					partner (n = 20)	partner (n = 20)		
					n (%)	n (%)	<i>p</i> value	
African American Women Who Have Sex with Women			Serological evidence of STI			-		
	Never had male sexual	Ever had male sexual		Chlamydia	6 (30%)	13 (65%)	.05	
	partner (n = 20)	partner (n = 20)		Herpes Simplex Virus type 2	0 (0%)	9 (45%)	<.01	
	n (%)	n (%) <i>p</i> va	<i>p</i> value	Syphilis	0 (0%)	0 (0%)		
Age (mean, SD)	23.2 (3.9)	23.5 (4.5) .7	•	HIV	0 (0%)	0 (0%)		
Self-identifies as lesbian*	19 (95%)	9 (45%) <.0	1	Serological evidence of any STI	6 (30%)	15 (75%)	<.01	
Has high school degree	19 (95%)	12 (60%) <.0	1	NAAT Evidence of STI				
Employed full- or part-time	11 (55%)	8 (40%) .3	1	Chlamydia	0 (0%)	2 (10%)	.48	
Current annual income >\$20,000	2 (10%)	2 (10%) 1.0	0	Gonorrhea	0 (0%)	0 (0%)		
Has a primary care provider	6 (30%)	9 (45%) .3	2	Culture Evidence of STI				
Currently has health insurance	8 (40%)	14 (70%) .0	5	Trichomonas	1 (5%)	3 (15%)	.60	
*One woman who had never had sex with a male partner identified as "questioning."				Evidence of Any STI (including all listed above)	7 (35%)	15 (75%)	<.01	
Che woman who had never had bex with a male p	arthor laontinoù do quootioning.			NAAT = Nucleic Acid Amplification Test				

Division of Infectious Diseases; University of Alabama at Birmingham; Birmingham, AL, USA

	Never had male sexual	Ever had male sexual		
	partner (n = 20)	partner (n = 20)		
	n (%)	n (%)	<i>p</i> value	
Tobacco use, past 30 days	11 (55%)	13 (65%)	.52	
Alcohol use, past 30 days	15 (75%)	15 (75%)	1.00	
Drug use, past 30 days	5 (25%)	9 (45%)	.18	
Ever been in jail >24 hours	3 (15%)	5 (25%)	.43	
Ever been sexually assaulted	4 (20%)	7 (35%)	.48	
Ever been tested for HIV	0 (0%)	0 (0%)		
Reported history of STIs				
Chlamydia	0 (0%)	8 (40%)	<.01	
Gonorrhea	0 (0%)	5 (25%)	.04	
Trichomonas	1 (5%)	9 (45%)	<.01	
Genital herpes	0 (0%)	1 (5%)	1.00	
Syphilis	0 (0%)	0 (0%)		
HIV	0 (0%)	0 (0%)		

Table 3. Association between Sex with Men (Ever) and Partner Number	s/Types
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	Never had male sexual	Ever had male sexual				
	partner (n = 20)	partner (n = 20)				
	n (%)	n (%)	<i>p</i> value			
Ever had sex with an IV drug user	0 (0%)	0 (0%)				
Ever had female partner with a known STI	7 (35%)	5 (25%)	.49			
Age at sexual debut (Md, IQR)	17.5 (16-19)	15.0 (14-16)	<.001			
Lifetime # female sexual partners (Md, IQR)	4.5 (2-6)	4 (2-10)	.33			
Lifetime # male sexual partners (Md, IQR)	0	4 (2-21)				
Past year # female sexual partners (Md, IQR)	1.5 (1-2)	2 (1-3)	.25			
Past year # male sexual partners (Md, IQR)	0	1 (0-5)				
Sex with a new or casual partner, past 30 days	5 (25%)	7 (35%)	.73			
Sex with a regular partner, past 30 days	14 (70%)	14 (70%)	1.00			
Md=median; IQR=interquartile range						

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infection was the only STI with sufficient frequency to look at behavioral differences between clusive WSW and WSWM in this study:

Among women who were seropositive for CT, exclusive WSW had an older mean age at sexual debut compared to WSWM (17.8 vs. 14.4; p = < 0.01).

Not having a high school degree was strongly associated with serological evidence of CT infection: 100% of those women with no high school degree had serological evidence of CT infection compared with only 32% of women with a high school degree (*p*<.01).

Not having a high school degree was associated with a current diagnosis of CT infection by NAAT: 22% of those women with no high school degree had a current diagnosis of CT infection by NAAT compared with no women with a high school degree (*p*=.04).

Among exclusive WSW there were no current diagnoses of CT infection by NAAT however 6 of these women had serological evidence of CT infection.

CONCLUSIONS

- > Among this cohort of African American WSW, evidence of past or current STIs was far less common among exclusive WSW compared to WSWM.
- Nevertheless, this study provides evidence that CT is transmitted between women.
- Additional data are needed to further evaluate behavioral differences between African American exclusive WSW and WSWM.

LIMITATIONS

> Small sample size, which may not be generalizable to other populations of WSW.

- Behavioral data and history of STIs based on self-report.
- No comparison group of women who have sex with men only (WSM) to determine if serological evidence of STIs were significantly different based on sexual behavior.
- > TV diagnosed using culture and not the recently available, highly sensitive NAAT.

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