STI and sexual healthcare during the corona crisis

Synopsis
Since March 2020 across Europe, more and more governmental lockdown measures have been in place to curb the corona crisis and to guarantee critical care for covid-19 patients. This document is an encouragement and guidance for Sexual Health Centres to continue to provide continuity of necessary STI and sexual healthcare. Challenges faced by sexual healthcare providers in the current crisis are the expected duration of 3 to 6 months that regular access to care will be seriously impeded, the restrictive measures put in place that hinder access to healthcare facilities, and increasing numbers of sick leave of healthcare workers.

The importance of accessible sexual healthcare
The aim is to provide essential care for the foreseeable future under lock-down situations. STDs, including HIV, are severe (potentially deadly) and highly transmissible conditions with a major impact on the general well-being. Sexual Health Centres take care of (sometimes difficult to reach) key populations, who for whatever reason often cannot access regular care. Moreover, it is stressed by the UN Secretary General Guterres that domestic violence is of great concern under the current lockdown measures around the globe. Sexual Health Centres can play a vital role in signaling and helping victims of partner and domestic violence.

What care should minimally be provided?
Try to minimize the need for physical access to your clinic. Many procedures can be performed via telephone or online video conversations, such as triaging, history taking, follow-up consultations. Also, prescriptions for oral and topical medications can be sent directly to a pharmacist although keep in mind that this will also lead to potential transmission in the pharmacy. In some situations, administering medication in the sexual health clinic might be a better option. Based on the available (human) resources the following clients should have some form of access to sexual healthcare:
• Clients with complaints suspected of an STI
• Clients with official partner notifications
• Vulnerable key populations like sex workers, transgender persons,
• Victims of sexual and other forms of abuse
• Clients with an indication for Post Exposure Prophylaxis (PEP)

Hygiene measures to protect clients and healthcare workers from COVID-19
• Upon entering the room, ask the client to clean hands with alcohol.
• Ensure a distance of at least 1.5 meters between client and yourself by positioning the client’s chair at an acceptable distance from your desk.
• Tell the client to keep the conversation as short as possible.
• Whenever possible ask the client to self-obtain necessary swabs for diagnostic tests. Clients can be instructed to correctly obtain the swabs with the help of instruction videos or poster materials (e.g. www.youtube.com/watch?v=bn7bU8G-YIE)
• Obtaining a pharyngeal swab can induce coughing reflexes. When possible ask your client to take a self-swab after detailed instructions with the help of in instruction video or poster materials (www.youtube.com/watch?v=bn7bU8G-YiE). If a client cannot take a throat self-swab, then wear protective devices (face mask and visor).
• If you need to perform an ano-genital examination, ask the client to turn his/her head away from you and not to speak.
• If you need to administer intra-muscular injections, ask the client to lie on the examination couch on his / her stomach with his head turned away from you.
• Wear gloves when you need to touch the client.
• To collect a blood sample, ask the patient to slide his chair forward and put the right arm on the table and look away from you. Ask the client not to speak during the venipuncture. Put on gloves, put on the tourniquet and collect the blood sample. After the venipuncture, ask the client to slide the chair back.
• Wash your hands afterwards and ask the client to do the same.
• Don't forget the hand alcohol.

Further resources