Effective use of sexual health services to improve public health could cost the NHS an additional £1 billion between 2015 and 2025 due to rising cases of sexually transmitted infections (STIs).* Investing in improved testing, prompt treatment and partner notification is key. Many STIs are diagnosed late, when the immune system is damaged, compared with treatment if undiagnosed. Asymptomatic chlamydia infection can stay in the body for over a year if it is not treated. People who are diagnosed late, when the immune system is damaged, are 10 times more likely to die in the year following diagnosis of HIV if they are diagnosed: once HIV is stably suppressed, there is no risk of transmission. The sexual health budget for 2016/17 was £600 million, only £11 per adult. Up to 10% of population diagnoses occur in areas with the lowest 30% of income. Collaborative working across services is needed to tackle outbreaks.

Reduced complications includes provision of condoms, health promotion, education and vaccination. The Spend and Outcome Tool (SPOT) is now available to support commissioning. Local areas can use national indicators available through Public Health National Outcomes Framework, and local data such as PHE quarterly reports and fingertips data. Collaborative working between commissioners, local sexual health services and public health is required to identify local priorities and actions. Sexual health affects every population. Meeting local sexual health needs enables healthier lives.

British Association for Sexual Health and HIV (BASHH)


*Unprotected nation.
We need an open relationship...

Planned cuts in sexual health services could cost the NHS an additional £1 billion between 2015 and 2025 due to rising cases of sexually transmitted infections (STIs).* Investing in improved sexual health services will reduce future costs and enable healthy, happy relationships.

Right service, right place, right time

Prevention includes provision of condoms, health promotion, education and vaccination.

Recent advances in HIV prevention:
• HIV treatment offered earlier, as soon HIV is diagnosed: once HIV is visibly suppressed there is no risk of transmission.
• Pre-Exposure Prophylaxis (PrEP): in HIV negative people PrEP prevents HIV acquisition but requires careful monitoring.


Routine HPV vaccination has almost halved genital warts diagnoses in young women aged 15-19 years from 8,420 in 2013 to 4,436 in 2017.

Support

Social inequality is linked to poorer sexual health. Collaborative working across services can address this health inequality. Related services include drug and alcohol, sexual assault, domestic violence, young people’s support and mental health teams. 50% of new syphilis and gonorrhoea diagnoses occur in areas with the lowest 30% of income.

Reduced complications

Infertility, chronic pain, nervous system problems and cancers are serious consequences of untreated STIs. People are 10 times more likely to die in the year following diagnosis of HIV if they are diagnosed late, when the immune system is damaged, compared with someone who is diagnosed early.

Reduced onward transmission

Breaking chains of transmission through routine testing, prompt treatment and partner notification is key. Many STIs have no symptoms, therefore may be unknowingly carried and passed onwards. Asymptomatic chlamydia infection can stay in the body for over a year if it is not treated.

Reduced outbreaks

Close working between public health, sexual health and health promotion teams is needed to tackle outbreaks. Syphilis outbreaks are occurring around the UK. Complications are more difficult and expensive to treat e.g. neurosyphilis requires 14 clinic visits for daily injections instead of a single dose of antibiotic.

The bottom line

Improved sexual health services could save the NHS £1 Billion
Everyone has sexual health needs. Local commissioners must meet their diverse population needs, making the setting of targets challenging. Increasing diagnoses could indicate a change in number of infections, testing patterns or data reporting.

Local areas can use national indicators available through Public Health National Outcomes Framework, and local data such as PHE quarterly reports and fingertips data. The Spend and Outcome Tool (SPOT) is now available to support commissioning.

Collaborative working between commissioners, local sexual health services and public health is required to identify local priorities and actions.

Sexual health affects every population. Meeting local sexual health needs enables healthier lives.

**USEFUL RESOURCES**

**British Association for Sexual Health and HIV (BASHH)**
- bashh.org

**Sexually transmitted infections (STIs): annual data tables.** Public Health England.
  - fingertips.phe.org.uk/profile/sexualhealth

  - gov.uk/government/publications/spend-and-outcome-tool-spot

*Unprotected nation.* Family Planning Association. 2015.

  - gov.uk/government/publications/commissioning-sexual-health-reproductive-health-and-hiv-services

  - gov.uk/government/publications/a-framework-for-sexual-health-improvement-in-england

**Sexual health services on the brink.** White C. BMJ 2017;359:j3995.
  - doi.org/10.1136/bmj.j3995

**We can’t go backwards.** XES.
  - wecantgobackwards.org.uk/Why-it-matters/Good-sexual-health