

HIV/AIDS, STDs and STIs

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Quality of sexually transmitted infections (STIs) case management was poor in health care facilities of Adama town, Eastern Ethiopia: The missed opportunities to control HIV spread

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Background: Sexually transmitted infections (STIs) cause devastating sexual and reproductive health complications if poorly treated. Moreover, people with STIs are at higher risk of acquiring or transmitting HIV infection. Thus, programs for the prevention and treatment of STIs remain important elements of HIV prevention programs. World health organization (WHO) recommends 90% of primary point-of-care sites provide comprehensive care for people with STIs by 2015.

Objective: To assess quality of STIs case management and identify its determinant factors.

Methods: Health facility based survey was conducted from May 16 to 26, 2016 in Adama town which is the one of the largest towns in Ethiopia and popular host spot for commercial sex. First, a total of 66 STIs case management service providing units were randomly selected. Thereafter, health care providers working in the units were surveyed employing contextualized WHO tool.

Result: Generally, 62 (94%) providers responded to the interview. 45 (72.6%) of the respondents treated a total of 211 STI cases in a month preceding the survey. Out of 53 (85.5%) providers that responded they use syndromic approach for STI case management, only 29 (54.7%) providers correctly mentioned treatment for urethral discharge syndrome. Receiving no training on national guidelines was found significantly associated with stating incorrect regimen ($\chi^2_{corrected}=6.40$; $p=0.01$). For vaginal discharge syndrome, also, only 20 (37.7%) providers correctly mentioned the treatment. Receiving no training ($\chi^2_{corrected}=14.00$; $p<0.001$), less than 5 days training (Fisher's exact test $p=0.038$) and being diploma level profession ($\chi^2_{corrected}=7.85$; $p=0.005$) were found significantly associated with stating incorrect regimen. Concerning genital ulcer syndrome, only 2 (3.8%) providers correctly mentioned the regimen.

Conclusion: Quality of STI case management was poor at health care facilities in Adama town.

Recommendation: Training of health care providers on national guidelines for STI case management for at least five days is one of the mainstays to improve quality of STI case management.

Biography

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