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**Surveillance Study of Prostitutes for Human Immunodeficiency Virus (HIV)
Antibody in Three Canadian Western Cities**

(Based on, and reproduced with acknowledgement from, *Canada Diseases Weekly Report of Health and Welfare Canada, Laboratory Centre for Disease Control* (1986) 13, No. 4, 14-15)

Prostitutes in Vancouver, British Columbia and in Edmonton and Calgary, Alberta participated in this surveillance study which was initiated in January 1985. In Vancouver, prostitutes were recruited by the staff of the Venereal Diseases (VD) Control Unit, Provincial Ministry of Health and the Division of Public Health Practice, University of British Columbia and the Drake Clinic, Vancouver Health Department. In Alberta, Sexually Transmitted Disease (STD) Control staff recruited participants at the major treatment centres in Edmonton and Calgary. The study involved participants answering a questionnaire and providing a blood sample for HIV-antibody testing. Informed consent was obtained from all participants before blood samples were taken. Samples were tested by the Bureau of Microbiology, Laboratory Centre for Disease Control, Ottawa and the Provincial Laboratories in British Columbia and Alberta.

TABLE

Surveillance Study of Prostitutes in Three Canadian Western Cities : 1985

	Vancouver	Edmonton	Calgary	All Centres
Number from Centre	56	25	28	109
Mean Age (Years)	23.2	23.8	24.1	23.6
Length of Time Working (Months)	45.5	60.7	25.8	43.9
Number of Vaginal Contacts/Week	9.2	14.5	12.9	11.7
Number with Rectal Contact	3 (5%)	2 (8%)	2 (7%)	7%
Number with Bisexual Partners	16 (29%)	4 (16%)	7 (25%)	25%
Number with IV Drug Abuse	16 (29%)	9 (36%)	6 (21%)	28%
Number using Condoms	50 (89%)	18 (72%)	28 (100%)	88%
Number HIV Antibody-Positive	0	0	0	0%

The results of the questionnaire and of the sero-testing for these three groups are summarised in the table. The total number of prostitutes involved in the study was 109 and their mean age was 23.6 years. They had been working as prostitutes for an average of 43.9 months. They reported a mean of 11.7 vaginal contacts per week but only seven reported rectal intercourse.

Twenty-five per cent had contact with a known or suspected bisexual male partner. Just over one quarter (28%) had a history or physical evidence of intravenous drug abuse. Eighty-eight per cent of the prostitutes indicated that all contacts had used condoms. Sero-testing revealed that none of this group of 109 women who are at potentially high risk for HIV infection was seropositive.

These results differ from those found in surveillance studies done in Seattle where approximately 5% of prostitutes were found to be seropositive and in Florida where 10 (eight of whom were IV drug-abusers) of 25 had HIV antibody detected (CDC 1985). In Greece the prevalence was 6% (Papaevangelou *et al* 1985), and in West Germany where 1% of approximately 4000 prostitutes tested in 1985 were found to be seropositive, most of these were heroin addicts (Acheson 1986). In two other surveys, one in London, England involving 50 prostitutes (Barton *et al* 1985) and the other in Paris, France with 56 prostitutes (Brenky-Faudheux and Fribourg-Blanc 1985) all of the participants were negative. This is in sharp contrast to reports from Africa where 66% of prostitutes of low socioeconomic status and 31% of those of a higher status were found to be seropositive (Kreiss *et al* 1986).

The study reported here was carried out in 1985. The expected antibody prevalence should have been 3% or greater (Hanley and Lippman-Hand 1983). The reasons for the low prevalence of HIV antibody in these prostitutes may include the high percentage of contacts using condoms, the small number who engage in rectal contact, and the apparent low prevalence of infected drug-abusers in Canada. Evidence to date indicates that condoms will prevent the transmission of HIV (Conant *et al* 1986).

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