President’s Letter

I write this column from Sydney, Australia where we are currently celebrating the Sydney Gay and Lesbian Mardi Gras.

Thousands of tourists and local people will take to the streets on March 7th to watch or participate in the colourful Mardi Gras parade, which is the climax of the two weeks’ festival. This history of Mardi Gras is really a history of activism to address stigma and rights for same-sex relationships – something that IUSTI understands well as stigma has one of the greatest negative impacts on the sexual health of individuals and their relationships. The first Mardi Gras march, Sydney’s contribution to international solidarity initiatives that had grown up as a result of the Stonewall riots in New York, took place in very different circumstances in June 1978. The first march was met with unexpected police arrests and violence - in response, there were further protests. The events resulted in legislative changes and the creation of a new Public Assemblies Act, enabling the 1979 Mardi Gras parade to pass without incident. With the advent of the Acquired Immunodeficiency Syndrome (AIDS) and the fear that swept the world in the early 1980s, there were calls to cancel the Mardi Gras as it was deemed to be encouraging the spread of the newly discovered human immunodeficiency virus. As we reflect on this social history, we realize that similar human rights challenges exist today in many countries of the world and that celebration of such events is important to demonstrate solidarity between movements in countries and ensure that stigma is continually challenged.

Since the publication of the last newsletter, IUSTI has continued its tradition of providing regional conferences and successful events were held in our European and Asia-Pacific regions. IUSTI-Europe and the British Association of Sexual Health and HIV (BASHH), with support from the Maltese Association of Dermatology and Venereology, held a joint meeting in St. Julian’s, Malta from 18-20 September 2014 with the theme of ‘Migration, recreation and sexual health’. The conference was well attended and IUSTI’s appreciation goes to the conference organizing team, chaired by Joseph Pace, and also to the hard work of the scientific committee, chaired by Jackie Sherrard. The IUSTI Asia Pacific (IUSTI-AP) region held its 18th regional conference in Bangkok, Thailand, from 11-14 November 2014. The conference was chaired by Chavalit Mangkalaviraj, with support from Kit Fairley (Scientific Committee Chairperson), Somesh Gupta (IUSTI-AP Regional Director) and Xiang-Sheng Chen (IUSTI-AP Chairperson). The conference’s theme was ‘STI, HIV and sexual health global collaboration for effective prevention’. It was well attended and the conference provided international delegates with an update on the current advances in the STI/HIV field. The social programme was carefully put together with both graceful and energetic cultural dances.

Preparations continue for the 2015 World STI and HIV Congress (13-16 September), which is a joint meeting of the International Society for STD Research (ISSTDR) and IUSTI World (http://www.worldstdi2015.com/ehome/index.php?eventid=91027&). The meeting will be held in the sunny city of Brisbane. This landmark conference is the first ISSTDR conference in the southern hemisphere in a 40 year history of the Society. As such, it provides a unique opportunity for those young researchers in the Asia-Pacific region to attend the meeting and we hope that we will be
able to support a number of these individuals to attend with scholarships. Although we were unsuccessful in obtaining scholarship funding support from the Australian Government, the conference has received tremendous support from a number of pharmaceutical and diagnostic companies for which we are very appreciative. The conference’s theme is ‘Up and coming’ which acknowledges the conference’s aim to promote up-and-coming new and outstanding international researchers. The conference will be jointly chaired by Basil Donovan (ISSTDR President) and myself (IUSTI President). The scientific programme is progressing well under the leadership of Nicola Low and Jeff Klausner, who are supported by a number of track chairs and team members. Plenary speakers have been invited and symposia are in the final stage of development. The deadline for abstract submission is 13th April 2015 and early bird registration ends on 6th July 2015. The Congress will run back to back with Australasian Society for HIV Medicine’s (ASHM) conference, which runs from 16-18 September. I would particularly like to thank Cathy Pooley (ASHM) who has been working tirelessly for the past several months to ensure the success of this large biennial conference.

Brisbane, venue for the 2015 World STI and HIV Congress

Moving forward to 2016, I would again encourage you to support the IUSTI World Congress scheduled for 9-11 May in Marrakech, Morocco.

The conference promises to be a unique blend of science and cultures. Amina Hançali, our IUSTI-Africa Regional Chairperson, will chair the conference and Jo-Anne Dillon is already busy working on the scientific programme with her core team.

David Lewis, IUSTI President

Regional Reports

North America

The National Coalition of STD Directors (NCSD)

As part of our work focusing on rising STDs, including HIV, among MSM, NCSD recently sent a letter to Dr. Jonathan Mermin, Director of the National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention at the Centers for Disease Control and Prevention (CDC), highlighting potentially inconsistent STD testing messaging from the CDC for HIV and STD testing for gay men and other men who have sex with men (MSM) and for those persons on Pre-Exposure Prophylaxis (PrEP). Currently, CDC’s STD and HIV Screening Recommendations state that those who engage in risky sexual activities and MSM should receive STD and HIV screening every three to six months. However, that recommendation is not reflected in the CDC’s PrEP Clinical Practice Guidelines, which state that an HIV test should be performed every three months for those prescribed PrEP, but STD testing is only recommended every six months with STD symptom assessments recommended to be every three months. Harmonizing these recommendations would not only clear up any confusion regarding STD testing for MSM and those on PrEP, but also improve sexual health for MSM. We know that HIV and other STDs are overlapping epidemics and in sending this letter to CDC, we continue to draw attention to STD prevention as HIV prevention.

NCSD finds the recommendation to conduct STD symptom assessments every three months, rather than an STD screening every three months for those taking PrEP problematic, considering that most people who acquire an STD may remain asymptomatic. Increasing attention to this critical intersection of the STD and HIV epidemics is all the more important as we witness increasing rates of STDs, including HIV, among young gay men and other men who have sex with men (MSM), emerging condom-fatigue, and an increasing uptake in the use of PrEP for HIV prevention.

The NCSD is a partnership of public health professionals, including CDC, ASTDA, and State public health officials, and is dedicated to promoting sexual health through the prevention of STDs. NCSD provides dynamic leadership that strengthens STD programs by advocating for effective policies, strategies, and sufficient resources and by increasing awareness of their medical and social impact.

See website. [http://www.ncsddc.org/tags/ncsd](http://www.ncsddc.org/tags/ncsd)
FDA News Release December 15, 2014

FDA grants CLIA waiver expanding the availability of rapid screening test for syphilis

The U.S. Food and Drug Administration today announced that it granted the first-ever waiver, under certain laboratory regulations, for a rapid screening test for syphilis, which will allow the Syphilis Health Check test to be used in a greater variety of health care settings.

According to the U.S. Centers for Disease Control and Prevention (CDC), about 55,000 people in the United States are newly infected with syphilis annually. During the 1990s, syphilis primarily occurred among heterosexual men and women of racial and ethnic minority groups; during the 2000s, however, cases increased among men who have sex with men (MSM). Men who have sex with men accounted for 75 percent of all primary and secondary syphilis cases in 2012. This sexually transmitted infection, caused by the bacterium Treponema pallidum, can cause long-term complications or increase the likelihood of HIV transmission if not adequately treated. The syphilis bacterium can also infect the fetus of a woman during her pregnancy, causing infant death, developmental delays and seizures. CDC recommends that all pregnant women be tested for syphilis at the first prenatal visit. Those who are at high risk, live in areas with high rates of syphilis or were previously not tested should be tested in the third trimester and again at delivery. CDC also recommends screening at least once a year for syphilis for all sexually active homosexual, bisexual, and other men who have sex with men.

The FDA’s waiver is related to the Clinical Laboratory Improvement Amendments (CLIA), federal standards that apply to clinical laboratory testing on humans, with certain exceptions. Because the FDA granted a waiver under CLIA, the Syphilis Health Check test can be distributed to a variety of non-traditional laboratory sites, including physicians’ offices, emergency rooms, maternity wards, other health care facilities, health department clinics, outreach sites, community-based organizations and other freestanding counselling and testing sites. The waiver also allows untrained health care workers to perform the tests on patients.

“The broader availability and easier access to this test should contribute to a higher rate of detection of syphilis infection,” said Alberto Gutierrez, Ph.D., director of the Office of In Vitro Diagnostics and Radiological Health in FDA’s Center for Devices and Radiological Health.

The test is performed by obtaining a sample of whole blood from a finger stick. Results are available in as little as 12 minutes and may be performed in the presence of the patient. All positive tests should be followed up with further syphilis serological laboratory testing and clinical evaluation before final diagnosis. The rapid result means that if a patient tests positive, a health care worker can obtain a second blood sample at the same office visit to confirm the test results through further lab testing. This increases the probability that patients, who might not return for a follow-up visit, will receive timely treatment.

The FDA first cleared the Syphilis Health Check test in 2011 and categorized it under CLIA as moderate- and high-complexity. The type of CLIA certificate a laboratory obtains depends upon the complexity of the tests it performs. CLIA regulations describe three levels of test complexity: waived tests, moderate complexity tests, and high complexity tests. The test was intended for use by prescription only to detect Treponema pallidum antibodies in serum, plasma, and human whole blood.

The FDA granted a waiver under CLIA for the Syphilis Health Check test after the manufacturer submitted data demonstrating the test’s ease of use and accuracy. The agency reviewed data for finger sticks of whole blood samples from 417 subjects collected over the course of four months at three testing sites representing typical CLIA-waived sites, such as doctor’s offices. Twelve individuals not trained in the use of the Syphilis Health Check test performed the tests on the study subjects. Results showed that the Syphilis Health Check test, when used by untrained operators, performed with high accuracy. This is critical if the test is to be allowed for use outside of moderate- and high-complexity laboratories.

With the issuance of the waiver, the Syphilis Health Check test can be used by more laboratories as an initial screening test or in conjunction with other appropriate laboratory tests and clinical findings to aid in the diagnosis of syphilis infection. However, the test is not intended for use in screening blood or plasma donors.

The Syphilis Health Check test is manufactured by VEDA LAB of Alencon, France for Diagnostics Direct, LLC, based in Cape May Court House, New Jersey. It is also distributed by Trinity Biotech USA, Inc., of Jamestown, New York.

News from the CDC

2013 STD Surveillance Report Released
http://www.cdc.gov/std/stats13/toc.htm

Sexually Transmitted Disease Surveillance 2013 presents statistics and trends for sexually transmitted diseases (STDs) in the United States through 2013. This annual publication is intended as a reference document for policy makers, program managers, health planners, researchers, and others who are concerned with the public health implications of these diseases.

According to the new CDC 2013 STD Surveillance Report, rates for chlamydia decreased slightly between 2012 and 2103, with that reduction seen mostly among young women and men aged 15-19. This is the first time that overall chlamydia case rates have decreased since national reporting
began and the second year that rates have decreased among adolescent females. However, trend data also shows that rates for primary and secondary syphilis increased by an alarming 10% in 2013, on top of an 11% increase in 2012. The rate of primary and secondary syphilis in 2013 is the highest recorded rate since 1996. Overall, the report finds that STDs continue to threaten the health and well-being of millions of Americans, particularly young people as well as gay, bisexual, and other men who have sex with men.

New treatment guidelines are expected to be available in early 2015, but they are available on line for public comment.

http://www.cdc.gov/std/treatment/update.htm

News from the American Sexual Health Association (ASHA)

The newest project from the American Sexual Health Association is Sexual Health TV (SHTV), a network with a variety of sexual health programs. Videos cover topics including cervical cancer survivor stories, STI prevention and counseling, how to use condoms, and sexual difficulties such as erectile dysfunction. Sexual Health TV also includes the Ask ASHA channel, where ASHA staff answers viewer questions about sexual health and STIs.

ASHA recognizes each January as Cervical Health Awareness Month. For 2015 we focused on the changing landscape of cervical cancer screening, especially in light of the FDA’s approval of an HPV test for primary screening. Our January blog covered the history of cervical cancer screening and offers a plain-language explanation of Pap and HPV tests, and how these tests may be used alone or in conjunction.

In February ASHA took part in National Condom Month with an emphasis on barriers to correct, consistent use. We offered a primer on negotiating condom use with a reluctant partner, the advantages of both male and female condoms, and videos on proper use.

News from the National Chlamydia Coalition (NCC)

FDA Approves New HPV Vaccine

The US Food and Drug Administration (FDA) recently approved Gardasil 9 for the prevention of certain diseases caused by nine types of HPV. This vaccine covers five more HPV types than Gardasil (previously approved by the FDA), including two types of HPV that cause approximately 90% of genital warts cases. Gardasil 9 has the potential to prevent approximately 90% of cervical, vulvar, vaginal and anal cancers. The vaccine was approved for use in females ages 9 through 26 and males 9 through 15.

Call for Abstracts: 2015 National Sexual Health Conference

The call for abstracts for the 2015 National Sexual Health Conference, which will be held from July 13-14 in Keystone, Colorado, is now open. Abstracts are being accepted for poster, roundtable, and oral presentations. Proposed abstracts should enhance sharing of information and skills development related to a broad spectrum of sexual health topics. The conference aims to create a space to share information on sexual health and to develop conversations about supporting health sexuality in clinical and non-clinical settings for people across the lifespan. The Association of State and Territorial Health Officials recently released a collection of STD resources for health officials. These resources provide a snapshot of current STD trends and issues, outline opportunities for leadership engagement, and examine the status of and next steps for integrating public health and primary care for STDs.

News from the American Sexually Transmitted Diseases Association (ASTDA) (www.astda.org)

STD Prevention Science Series

ASTDA has partnered with the Centers for Disease Control and Prevention Division of STD Prevention (DSTD) to bring you the latest research and best practices for STD prevention with the STD Prevention Science Series. This quarterly series presents lectures on cutting edge issues by scientists and program experts of world renown to all persons interested in the prevention of STI including HIV.

Archived presentations in the series are available at http://www.astda.org/std-prevention-science-series/.

American Association for Clinical Chemistry

Upcoming Free Webinar
The U.S. FDA recently approved a molecular HPV test for primary screening of cervical cancer, and now a broad-based group of medical professionals has issued an interim guidance reinforcing the FDA decision. Published in the journal Gynecologic Oncology, the guidance states that using a high-risk HPV test alone for primary cervical cancer screening is an effective alternative to the current recommendation for screening with either cytology (the Pap test) alone or co-testing with cytology and HPV testing.

Join AACC for a free 60-minute webinar, where we will explain what these new developments mean for women’s health care and help lab professionals navigate the changes in this dynamic area of cancer screening:

- Highlights of new recommendations and anticipated changes in patient care
- Review of data that justifies these recommendations
- Relative effectiveness of three different testing algorithms (colposcopy, HPV testing, hybrid approach)
- Relevance of primary screening with test that can identify high-risk HPV types

Our Expert:
Mark H. Stoler, MD, Professor (Emeritus) of Pathology, Cytology and Gynecology; and Director, Gynecological Pathology Fellowship Program, University of Virginia, Charlottesville, VA

Supported by an educational grant from Roche Diagnostics

Charlotte Gaydos

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Europe

IUSTI Europe Conference in Malta 31 October 2014

The main event of 2014 was, without doubt, the Congress in Malta. We would like to once again thank Joe Pace, President of the Congress, and Jackie Sherrard, Chair of the Scientific Board, for a wonderfully organized conference.

International Symposium on Viral Infections in Brijuni Islands

The 4th International Symposium: Sexually Transmitted Infections – New Horizons on Sexually Transmitted Infections and HIV/AIDS, co-organized by IUSTI-European Branch was held jointly with the Annual meeting of the Croatian STD Society of the Croatian Medical Association on Brijuni Islands, Croatia, September 26-27. The multidisciplinary topic of the sexually transmitted infections has been part of the rich academic Mid-European and Mediterranean tradition in Croatia during the last century as an integral part of Dermatology and Venereology. Thus, this Symposium was an excellent opportunity to exchange ideas, knowledge and experience among colleagues from Croatia, Region, Europe and other parts of the World. Moreover, our experience from the past Symposia and IUSTI Europe Conferences has shown that our internationally renowned guests have become our dear friends. Such attitudes clearly show the international and the cosmopolitan spirit of IUSTI.

We also point out that Brijuni Islands are the world-renown “Pearl of the Northern Mediterranean”, situated in Istria, on the famous Adriatic Sea, internationally renowned for the breathtaking sceneries of its beautiful coast, overwhelmed with rich and unique vegetation. History meets on Brijuni Islands from the Antique Greek-Roman period to the Mediterranean atmosphere nowadays with the traditional elegance and style that has served as the residence for the most important personalities, including royalties, famous artists and statesmen of the 20th century!

Many distinguished international experts and good friends took part in the Symposium, including dermatologists, gynaecologists, infectious diseases specialists, microbiologists, urologists and epidemiologists from all over Europe and World. Together with well known experts from Croatia, they have made the scientific and professional level of the Symposium memorable. The Symposium Organizing and Scientific Committee have made their greatest efforts to create an unforgettable professional and social atmosphere for every one of the 180 participants.
The symposium addressed the latest and most exciting advances in the sciences of STI's and has brought these to bear on the everyday problems of practice. There were updates on the molecular biology of STI's, the implications of new aetiological agents, precise diagnosis, and the advent of vaccination. Thus, the special attention has been given to the implementation of the HPV vaccination including the experience presented by our Australian colleagues and friends. Current trends in Regional, European and Worldwide epidemiology was addressed, and their implications for the future. The latest guidelines have been presented, together with the thinking behind them. Special attention was made to include social and media issues that interface with our practice.

Above all, we all meet and learned in a very friendly and elegant atmosphere

IUSTI Europe Conference in Sitges 24-26 September 2015

For the first time, the IUSTI Europe conference will be held in Spain. After the very successful conference of 2014 in Malta, the conference will be held in conjunction with the British Association for Sexual Health and HIV (BASHH). IUSTI Europe and BASHH are the two primary European bodies dedicated to STI's, HIV and sexual health. The main focus of the 2015 conference will be on men's sexual health. Europe has ever-increasing rates of STI and HIV in men-who-have-sex-with-men (MSM). However, the scientific programme will be carefully balanced so as to also address issues to do with the sexual health of heterosexual men and women.

Symposia will be held on the following subjects:
- Male sexual dysfunction
- Resistance and typing of STI pathogens
- Update on HIV infection
- Emergent and resurgent STI
- Male ano-genital syndromes
- STI challenges beyond 2015
- The sexual health of specific groups
- HPV infection and vaccination.

Furthermore, The European Centre for Disease Prevention and Control (ECDC) and the World Health Organization (WHO) have been invited to organize symposia. There will be plenary lectures on the following subjects:
- Sex: passion and addiction
- Sexual behaviour, STI and HIV in MSM in Europe
- Substance misuse and sexual health
- Non-venereal treponematoses
- Bacterial vaginosis
- Pre-exposure prophylaxis against HIV
- The evolution of STI organisms

In addition, we accept any papers for oral and/or poster presentation on any subject concerning sexual health and HIV infection in Europe. 20 April will be the deadline for abstracts. Authors will be notified about acceptance of papers by June 1st. The deadline for early registration is 30 June.

Visit www.iusti2015.com for more information, registration and accommodation information.

European Masterclass

IUSTI Europe has decided to start organizing STI Master Classes. The first STI Master Class will be organized in Vienna.

STI Management Guidelines

The work of the European STI Guidelines Project continues. The Editorial Board held a
teleconference to review its work programme on 9 December 2014. The following guidelines are currently being updated: non-gonococcal urethritis; genital herpes; chlamydia; epididymo-orchitis. In addition, three new guidelines are in the process of development: a guideline on partner management is nearing completion and work has commenced on producing new guidelines on the management of genital mycoplasmas and on vulval diseases. An article about the recently published European guideline on syphilis has appeared in the official journal of the European Centre for Disease Prevention and Control: Unemo M, Janier M. Eurosurveillance 2014: 19: 45 (13 November). All the guidelines can be accessed at: www.iusti.org/regions/Europe/euroguidelines.htm and the patient information at: www.iusti.org/regions/Europe/PatientInformation.htm The Editorial Board will hold its next teleconference in March 2015. Any comments or suggestions on the work of the European STI Guidelines Project would be gladly received by the Editor-in-Chief, Dr Keith Radcliffe (email: k.radcliffe@virgin.net).

STI-Related Activities in Europe

THE UNITED KINGDOM

BASHH UK has published several new guidelines of interest, all available on www.bashh.org/guidelines:
- A guideline on non-gonococcal urethritis
- A guideline on *Trichomonas vaginalis*
- A guideline on management of antenatal HSV

was published jointly with the Royal College of Obstetricians and Gynaecologists.

Also, following the implementation of the 2012 Health and Social Care Act, STI and contraception services in England are now commissioned by local authorities, while HIV services are commissioned nationally and abortion services by locality primary care commissioning groups. ‘Chemsex’: as there is growing evidence of a significant link between new psycho-active substance (NPS) use and sexual risk-taking and STIs, Public Health England recently published a toolkit for health service commissioners (http://www.nta.nhs.uk/uploads/nps-a-toolkit-for-substance-misuse-commissioners.pdf).

GERMANY

There were several successful meetings and conferences in 2014. For example *STI-Congress 2014 – Promoting Sexual Health together*, which addressed all aspects of STI and sexual health, with practical workshops, debates and poster exhibition, *Leopoldina-Symposium*, the focus of which is on genital microbiomes, genetic tools and the interaction of STI and the human organism, *HIV & Psyche* (3rd congress), which offers the opportunity for medical professionals as well as consultants to talk about the therapy of HIV-infected persons. And 2015 will offer an even greater variety of meetings and conferences! Furthermore, during the last few years the development of STI is characterized by a high increase, thus, the need for care/consulting regarding all aspects of a healthy sexuality has become necessary. As such care is fragmented and undersupplied in Germany, a pilot project, “Walk in Ruhr (WIR) – Center for Sexual Health and Medicine”, which is multidisciplinary and inter-institutional, will open its doors in September 2015. The following guidelines were published in 2014:
- Gonorrhoea in adults and adolescents
- Syphilis – microbiological-infectiological quality standards
- Diagnostic and therapy of syphilis

The following guidelines will be published in 2015:
- Infections with *Chlamydia trachomatis*
- STI/STD-consultation

BELARUS

There were three major STI-related events in Belarus this year in Belarus:
- Minsk, June 5-6 – National Conference on Dermatology and Venereology
- Minsk, March 21, Minsk Dermatological Day
- Vitebsk, April 4, III International conference “Vitebsk Dermatological Day: Pediatric Dermatovenereology”

In addition to those, there was also part of a joint program, "Improving of the Management of Laboratory Diagnostics of Sexually Transmitted Infections in Eastern Europe", which is carried out by the Department of Control and Prevention of Communicable Diseases, Uppsala County Council, Uppsala; Eastern European Network for Sexual and Reproductive Health Network (EE SRH); Swedish Reference Laboratory for Pathogenic Neisseria, Örebro, Sweden. The project is financially supported by a grant from the Swedish Institute. The duration of the project is three years, October 2012-2015.
ESTONIA
Estonia organized the conference “Grey Shadows of STIs” (“Suguhaiguste Hallid Varjundid”) on 31 October.

Among other things, the grey areas of STI diagnostics, the necessity and possibilities of urogenital mycoplasma diagnostics, molecular diagnostics of vaginitis were discussed at the conference. It was attended by over 500 Estonians.

Airi Põder

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Asia Pacific

Many IUSTI-World and Asia-Pacific colleagues joined the 38th National conference of Indian Association for the Study of STD & AIDS held in Chandigarh from 31st October to 2nd November 2014.

18th IUSTI-Asia-Pacific Congress
The 18th IUSTI Asia-Pacific Conference was successfully held in The Ambassador Hotel Bangkok from 11-14 November 2014.

There were 3 plenaries, 3 workshops, 15 symposia, 14 free oral sessions and 43 posters presentation. Opening session was addressed by Dr. Sopon Mekthon, Director-General, Department of Disease Control, MOPH, Thailand, Prof. Mondhon Sanguansermr, President, University of Phayao, and Dr. Xiang-Sheng Chen (China) Chairman of Executive Committee, IUSTI Asia Pacific. Opening Key Note Lecture “Add quality to STI services” was delivered by Dr. Wiwat Rojanapithayakorn, Director, Center for health policy and management, Mahidol University, Thailand.

Three workshops covered issues related to people living with HIV in resource-limited countries, STI management issues, and Dermatology for non-dermatologists. Plenary lectures were delivered by Dr. Lori Newman and Dr. Ying-Ru Jacqueline Lo of WHO, and Prof. Dr. Joseph Tucker (USA). Various topics with regional focus such as, gonococcal and mycoplasma antimicrobial resistance, STI management, re-emergence of syphilis, STI in key populations such as MSM and sex Workers, Partner notification, Bacterial vaginosis, Social science of STI, and Regional (Asian) guidelines for STI.

Indian launches National Strategy & Guidelines for the Elimination of Congenital Syphilis
On 24th February, India officially launched national strategy & guidelines for elimination of congenital syphilis in collaboration with WHO, India. It will be integrated in India’s National health mission. India is a low prevalence country for congenital syphilis. Currently it is estimated to be around 0.6/1000 live birth and the country targets to bring it down to 0.3/1000 live births. However there are several challenges to achieve this target. Every year there are approximately 27 million pregnancies in India.
Currently, only 15% of all pregnant women are screened for syphilis. The plan is to incorporate point-of-care test for syphilis at the primary health care level and improving availability of benzathine penicillin. IUSTI-AP Regional Director (SG), and Secretary General (Sunil Sethi) along with other IUSTI-AP members attended the workshop and provided inputs for the program.

Somesh Gupta

Conference Update

**IUSTI Events:**
European Master Class in Sexually Transmitted Infections
Dates: June 25, 2015
Location: Vienna, Austria
Website: http://iusti.org/events/pdf/2015/EuropeanMasterclassInSTI2015.pdf

23rd Annual Principles of STD & HIV Research Course
location: Seattle, Washington
Dates 20-30 July 2015
http://pshrcourse.org/

World STI & HIV Congress 2015
Dates: September 13-16, 2015
Location: Brisbane, Australia
Website: http://www.isstdr.org/future-meetings.php

IUSTI Europe 2015
Dates: September 22-24, 2015
Location: Barcelona
Website: http://www.iusti.org/events/default.htm

2016 World IUSTI Congress
Dates: May 9-12, 2016
Location: Morocco
Website: http://www.iusti.org/events/default.htm

IUSTI Europe 2016
Dates: September 15-17, 2016
Location: Budapest, Hungary
Website: iustimarrakesh2016.com

World STI & HIV Congress 2017

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<td>World STI &amp; HIV Congress 2017</td>
<td>September 16-18, 2015</td>
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**Other STI or Related Meetings/Congresses/Courses:**
Dates: April 26-May 1, 2015
Location: Boston, USA
Website: http://www.keystonesymposia.org/index.cfm?e=Web.Meeting.List&tab1

BASHH HIV/STI Course 2015
Dates: April 27-May 1, 2015

2015 American Conference for the Treatment of HIV
Dates: April 30 -May 2, 2015
Location: Dallas, TX, USA
Website: http://www.acthiv.org/

BASHH Spring Conference 2015
Dates: June 1-3, 2015
Location: Glasgow, Scotland

2015 National Summit on HCV and HIV Diagnosis, Prevention and access to care
Dates: June 4-6, 2015
Location: Arlington, USA
Website: http://www.hivforum.org/projects/cross-cutting-topics/us-epidemic/1092-2015summit

23rd World Congress of Dermatology
Dates: June 8-13, 2015
Location: Vancouver, Canada
Website: http://derm2015.org/

8th IAS Conference on HIV Pathogenesis, Treatment and Prevention
Dates: July 19-22, 2015
Location: Vancouver, British Columbia, Canada
Website: http://www.ias2015.org/

U.S. Conference on AIDS
Dates: September 10-13, 2015
Location: Washington DC, USA
Website: nmac.org/2015usca/

Australasian HIV&AIDS Conference
Dates: September 16-18, 2015
March 15

STI Global Update is published by the International Union against Sexually Transmitted Infections. Its aims are to provide an international perspective on the management and control of sexually acquired infections. Regular contributions from the regional directors of IUSTI and feedback from conferences is supplemented by short reviews of relevant topics and input from the Center for Disease Control (US), Health Protection Agency (UK), European Centre for Disease Prevention and Control, and the World Health Organisation.

Prof. Jonathan Ross, Editor
jonathan.ross@uhb.nhs.uk

Further information on the activities of IUSTI available at www.iusti.org

Location: Brisbane, Australia
Website: www.hivaidsconference.com.au

HPV 2015-- 30th International Papillomavirus Conference & Clinical and Public Health Workshops
Dates: September 17-21, 2015
Location: Lisbon, Portugal
Website: http://www.hpv2015.org/

ABC of Sexual Dysfunction
Date: October 15, 2015
Location: Manchester, UK
Website: http://www.bashh.org/BASHH/Education/BASHH_Training_Courses_and_Meetings/BASHH/Education/BASHH_Training_Courses_and_Meetings_/Meetings/ABC_of_Sexual_Dysfunction.aspx

24th EADV Congress
Dates: October 7-11, 2015
Location: Copenhagen, Denmark
Website: http://www.eadv.org/nc/news/article/24th-eadv-congress//6/e0b4035c5e9ed551c9532520bf4a4035/

2015 National HIV Prevention Conference
Dates: December 6-9, 2015
Location: Atlanta, USA
Website: www.cdc.gov/nhpc

21st International AIDS Conference
Dates: July 17-22, 2016
Location: Durban, South Africa
Website: http://www.aids2016.org/

Somesh Gupta