FIG TOGETHER TO END FEMALE GENITAL SCHISTOSOMIASIS

Female Genital Schistosomiasis & Sexually Transmitted Infection Overlap

The FGS Integration Group-October 2023



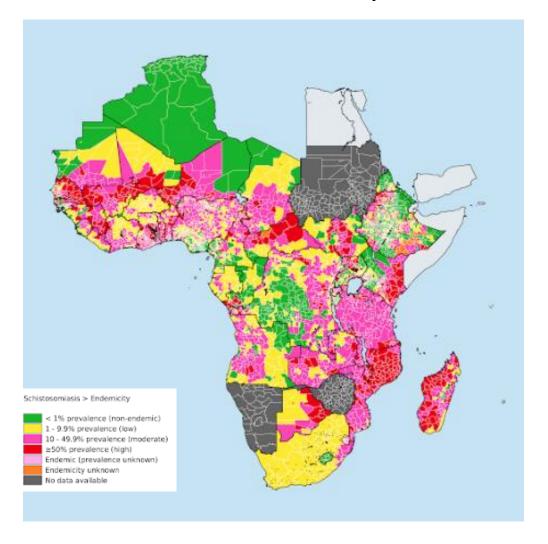
STI symptoms could be a parasitic infection

- STI symptoms can be caused by a parasite that is transmitted in sub-Saharan Africa and parts of the Middle East. 90% of people who need schistosomiasis (bilharzia) treatment live in Africa.
- Schistosomiasis is transmitted through contact with contaminated fresh water (not sex!)
- Untreated schistosomiasis among women turns into female genital schistosomiasis (FGS)
- FGS is associated with increased risk for HIV and HPV, infertility, painful sexual intercourse and contact bleeding
- If you have a woman coming from an endemic area with STI symptoms you should consider female genital schisto (FGS) in your differential diagnosis
- Classic lesions can be found in the <u>WHO FGS Atlas</u>
- Lesions can be found in routine screening for cervical cancer and can confuse diagnosis but note lesions do not enhance
- Treatment is simple with a single dose of praziquantel 40 mg/kg

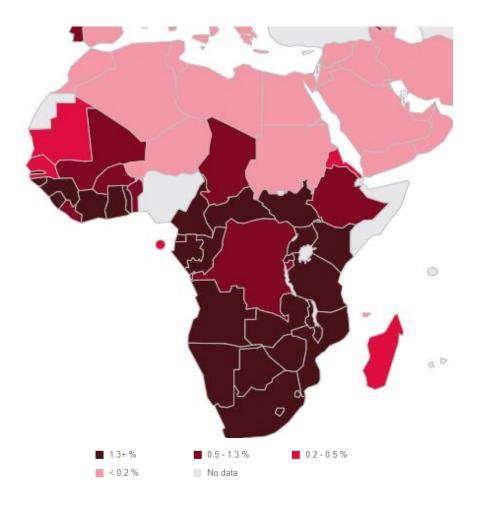


Geographic overlaps

Schistosomiasis endemicity



HIV prevalence



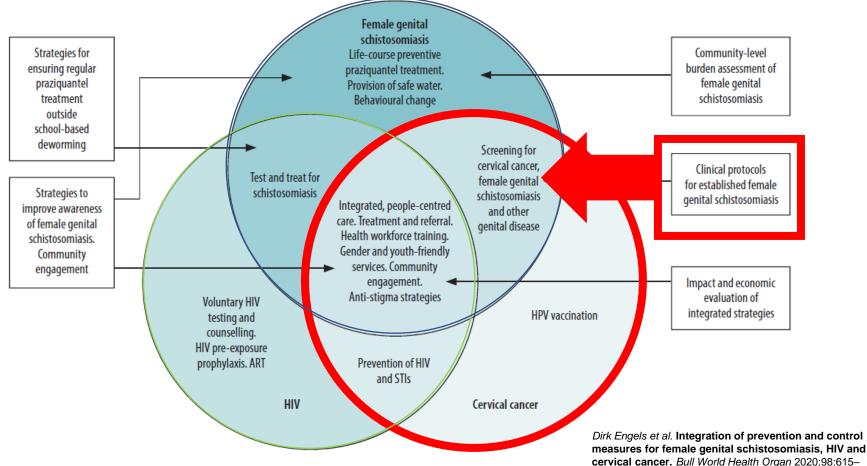


Integration for interventions against FGS

Conceptual framework for the integrated programmatic implementation of female genital schistosomiasis, HIV and HPV/cervical cancer

Integration promotes a Sexual reproductive health rights-based gendered programme approach to FGS prevention and control

There are several possibilities



624|doi: http://dx.doi.org/10.2471/BLT.20.252270

ART: antiretroviral therapy; HIV: human immunodeficiency virus; HPV: human papilloma virus; STIs: sexually transmitted infections.

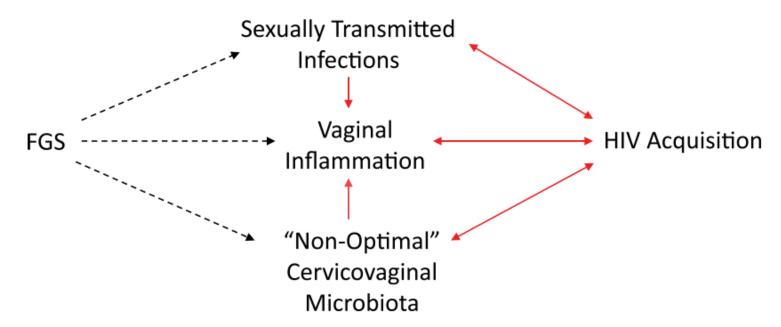


Public Health Implication

association FGS and HIV

Key

Unbroken arrows – Well Described Relationships Broken arrows – Research Needed

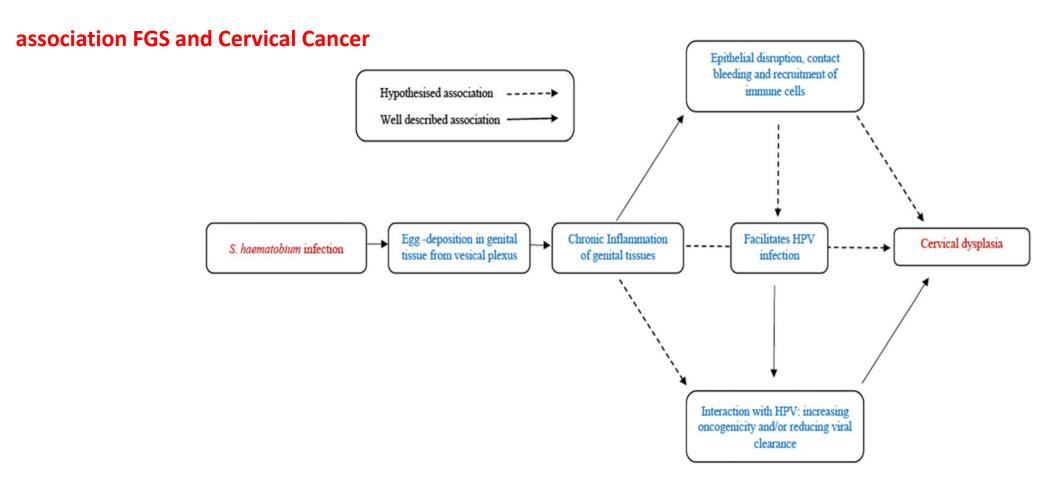


Conceptual pathway describing the potential contribution of FGS to vaginal inflammation and the association of FGS with sexually transmitted infection and "non-optimal" cervicovaginal microbiota (McKinnon et al., 2019).

Source: Sturt, A. S., Webb, E. L., Francis, S. C., Hayes, R. J., & Bustinduy, A. L. (2020). Beyond the barrier: Female Genital Schistosomiasis as a potential risk factor for HIV-1 acquisition. *Acta Tropica*, 209(May), 105524. https://doi.org/10.1016/j.actatropica.2020.105524



Public Health Implications

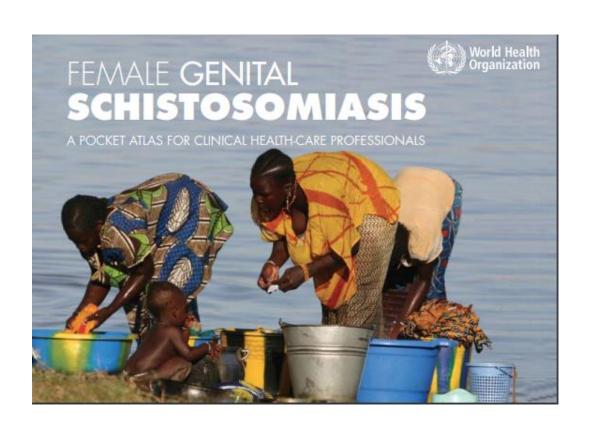


Conceptual pathway highlighting possible mechanisms linking female genital schistosomiasis and cervical dysplasia

Source: Rafferty, H., Sturt, A.S., Phiri, C.R. et al. Association between cervical dysplasia and female genital schistosomiasis diagnosed by genital PCR in Zambian women. BMC Infect Dis 21, 691 (2021). https://doi.org/10.1186/s12879-021-06380-5



WHO FGS Atlas



Female genital schistosomiasis lesions





UNAIDS resource

