

**QUALITY ASSESSMENT OF
SEXUALLY TRANSMITTED INFECTION CASE
MANAGEMENT AMONG STI CLINICS IN YONGON
DIVISION UNDER NATIONAL AIDS PROGRAM**

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Abstract

Clinic based cross-sectional descriptive study design was used to assess the quality of STI case management in five STI clinics under NAP in Yangon Division in September, 2008. To collect data, observing Health Care Provider (HCP)-patient contacts, interviewing HCP, conducting exit-interviews with patients, reviewing records and inspecting facilities, checking of essential STI drugs were conducted. Myanmar National Guidelines for STI management was used as standard for assessment and STI service indicators 1, 2 and 3 were calculated. Total sample size was 47 HCP-patient contacts, 5 HCP interviews, 5 STI clinics observations and 47 exit-interviews.

Twenty eight of patients were male and 19 were female. Main presenting STI symptoms were genital ulcer, urethral and vaginal discharge. Among 47 diagnoses made by HCP, 34 were etiologic diagnosis and 13 were syndromic diagnosis. The overall rate for STI Service Indicator 1, which measures correct assessment and treatment of STI patient, was 34% comprising of 77% for history taking, 60% for physical examination and 85% for correct treatment. HCP have adequate knowledge on STI case management according to National guideline, but they have weakness in actual practice. Reason for not obtaining full score with history taking was that some HCPs failed to ask about recent sexual contact and some HCPs failed to examine the patients' genitalia properly.

The score for STI Service Indicator 2, which measures overall patient counseling and referral for HIV testing was 46.8% of which 87% received advice on condom use, 100% received advice on partner notification and 47% received referral for HIV testing. HCP advised partner notification to all patients, but they might think the patients already had information on condom use and they were reluctant for HIV referral. At the time of observation, several essential STI drugs were not available to produce indicator 3.

Most of the patients were satisfied with the services provided by the clinics; so patients' satisfaction should be maintained.

In conclusion, to improve the quality of public STI clinics, HCP should utilize their knowledge and skill to the best. To solve the shortage of drugs and condoms, the basis of the problem should be investigated and amended as soon as possible.