La. a leader in sexual diseases

By JOAN MCKINNEY

WASHINGTON — Congressional aides were told Monday that the South is having an epidemic of sexually transmitted diseases, and that Louisiana posts some of the nation's highest rates of syphilis and gonorrhea.

Reports of chlamydia cases in Louisiana also are climbing, and the state ranks about 17th nationally for AIDS, according to data released by public health officials who briefed congressional aides from Sunbelt states.

A report by the Centers for Disease Control placed Louisiana first nationally for rates of primary and secondary syphilis, and sixth for gonorrhea.

However, the rankings may not be precise because states have different methods of screening for sexually transmitted diseases and reporting those figures.

Two factors place Louisiana high on the lists for these diseases, according to state health official Jim Scioneaux.

First, the diseases are very prevalent in Louisiana, Scioneaux conceded. In addition, Louisiana has begun a more aggressive statewide program to screen for the major diseases, and Louisiana systematically reports its cases to federal officials, Scioneaux said. Some states do not test and report as aggressively.

"If another state isn't looking for it and we are, then obviously we are going to be high in the rankings," said Scioneaux, who is administrator of the state's Sexually Transmitted Diseases Control Program in New Orleans.

Since 1992, patients at Louisiana's sexually transmitted disease clinics and the Planned Parenthood family services clinic have been routinely screened for chlamydia, gonorrhea, syphilis and HIV, the AIDS-related virus, according to Scioneaux.

Scioneaux's description of Louisiana's screening program differs sharply from the South Carolina program described by Dr. Dee Breeden, the chief of preventive health services for that state's health department.

Breeden told the congressional aides that, because of "dwinding resources," he does not routinely screen for chlamydia, and he can no longer track the partners of known gonorrhea patients.

A partner who voluntarily calls one of his South Carolina clinics probably would wait two weeks for an appointment. Also, state clinics for sexually transmitted diseases each day turn away about half the people seeking care, Breeden said.

According to Scioneaux, Louisiana tries to track cases of sexually transmitted diseases through the charity and private hospitals and with private physicians. Louisiana's private health-care providers are very thorough in reporting syphilis and HIV cases, but they may be less conscientious about reporting gonorrhea and chlamydia, Scioneaux said.

"That's probably because of the amount of work that would be involved. We're talking tens of thousands of additional reports."

Women should add chlamydia to their list of priority health issues, and should begin lobbying for systematic chlamydia screening, said Dr. Judith Nina Wasserheit, a disease-prevention specialist for the Centers for Disease Control who spoke to the congressional seminar.

Women may not know they have the disease, yet it can make them infertile or cause their children to be born with eye infections and other health problems, Wasserheit said.

Louisiana's sexually transmitted disease clinics began screening for chlamydia only "three or four years ago," according to Scioneaux. In 1991, the state found 1,410 cases of chlamydia. In 1993, that had jumped to 12,316 cases, Scioneaux said.

But the health official said "I certainly don't think we're seeing an explosion" of chlamydia cases. Instead, the disease was present in Louisiana but under-reported until the statewide screening program was implemented.