
SEXUALITY, STD-AIDS AND DRUGS AND WOMEN IN PRISON

SEXUALIDADE, DST-AIDS E DROGAS E MULHERES NA PRISÃO

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ABSTRACT

Theoretical and practical references on subjects related to sexuality, STD, Aids and drugs, mainly with respect to people in prison, have revealed this public is more vulnerable to contamination by HIV, through Sex or by means of drug addiction or both. This situation is reinforced if they have already been or are involved with the violence associated to delinquency, with crime, prostitution and promiscuity. Touched by this situation we carried out a research with imprisoned women to raise the problems they face with regards sexuality, STD, Aids and drugs, in order to develop an educational program on these themes, offering more information to prepare these women to become agents of change. We collected the data through individual interviews about subjects which allowed us to verify that these women consider life and family meaningful, placing special emphasis on maternity, as all referred to having been blessed with motherhood. They feel deep sadness for the situation in which they find themselves, affirming that behind all this is man, accusing him severely for their misfortune. They reveal certain knowledge of sexuality, STD, Aids and drugs. They practice any kind of sexual intercourse, although they prefer vaginal Sex. They admitted to being promiscuous and some bisexual. They attribute sexually transmitted diseases/Aids to the lack of information people suffer.

They reveal the presence of STD in their lives, some referring to inadequate use of condoms, affirming it is difficult to negotiate safe Sex with partners. With regard to Aids, they seem to have a certain knowledge, but haven't yet developed a consciousness to promote a change in their behavior. Hence, we conclude that these women cannot deal with their sexuality and with issues like STD/Aids or drugs.

Keywords: Sexuality, STD/Aids, Drugs

RESUMO

Referenciais teóricos e práticos sobre as questões relativas a sexualidade, DST, Aids e drogas voltadas, principalmente para pessoas em detenção em sistema penitenciário, têm nos revelado que estas enfrentam grau de vulnerabilidade a contaminação pelo HIV, seja pelo sexo ou drogas ou associação de ambos. Isto torna-se mais complexo ainda se já passaram ou passam em seu cotidiano envolvidas com o mundo da violência associada a marginalidade, ao crime, a prostituição e a promiscuidade. Sensibilizadas com isso, procuramos desenvolver com mulheres detentas deste sistema uma pesquisa-ação, objetivando levantar com elas seus problemas frente a sexualidade, DST, Aids e drogas, trabalhando a seguir, um programa educativo sobre estes temas, possibilitando-lhes, conhecimentos e habilidades nesta área, bem como, preparando-as para serem agentes multiplicadores. Coletamos os dados através de entrevistas individuais, com questões norteadoras as quais nos permitiram qualitativamente verificar que estas mulheres dão significado positivo para a vida, para a família e sublimam a maternidade, todas referindo ter tido a maior benção da concepção de um filho. Sentem profunda tristeza pela situação em que se encontram, afirmando que atrás disso está seu homem, culpando-o severamente pela sua desgraça. Revelam certo conhecimento sobre sexualidade, DST, Aids e drogas. Praticam qualquer tipo de sexo mais preferem o vaginal. São promíscuas e algumas bissexuais. Atribuem às DST-Aids, pela desinformação do povo.

Revelam presença de DST em sua vida, algumas referindo uso inadequado do preservativo, afirmando ser difícil negociar sexo seguro com o parceiro. Para Aids, demonstram certo conhecimento mas, não desenvolvem a consciência para a mudança de comportamento. Depreendemos então, que estas mulheres não têm preparo para lidarem com a sua sexualidade e contra a DST-Aids e drogas. Portanto, trabalhamos com elas, programas educativos sobre estas questões, preparando-as também para serem agentes multiplicadores.

Palavras-chave: Sexualidade, DST/Aids, Drogas

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INTRODUCTION

To work with the thematic central, it means for us, a given true challenge the complexity of the subject. In reason of its own diversities. That is fact, in first instance, for we want to work with prison of people of a Brazilian penitentiary system, trying to rescue a little of the human dignity, independent of the reason for which this human contingent passes for the experience of the reclusion.

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In the same way, the complexity becomes larger to make funnel-shaped our research, opting for the development of a study gone back to women of prison. And it becomes still more difficult, to the we try to investigate, to analyze, to understand and to try to take educational actions to rescue the subjects returned to the sexuality, STD-Aids and you Drug those women, in detriment to the lifestyle and the vulnerabilidade of these to the they face the risks of contamination for HIV; in its daily one existential (2) (3) (4)

As it focuses (5), that author reinforces that in any other group, the speed of propagation of HIV, the virus of the AIDS, is as big as enters women. There are about 15 years, the propagation of contamination was of 1 (a) woman for 70 (seventy) men. Today, it is one for two. And that the incidence in the age group of 15 to 19 years, is the same between men and women. She still affirms, that of 71,234 exams accomplished in women attended in the Hospital Pérola Byngton - Center of Reference of the Woman in São Paulo, those frame in inferior age to 45 years. Of 42.067 o'clock they manifested some type of gynecological infection, facilitating up to ten times, the probability of contracting HIV, because the infectious process cause small lesions in the mucous vaginal, facilitating the penetration of the virus. Besides, the woman's own physiology, once the vagina, for its own format and constitution, is a door of favorable entrance for the virus.

This way, these theoretical-practical referenciais, associated to historical, political, social and educational conditionings, harnessed to the taboos and prejudices nurtured along the civilization of the people, implied in the popular credences, these elements have been representing true barriers, cluttering the necessary progresses in this area. (2)

This has been raising us special attention in this field, demanding rising and search of alternative and innovative pedagogic strategies, for the resolution of the found difficulties, propitiating means to develop the critical and reflexive conscience, in a safe way, with respect and responsibility, in relation to individual and collective health, for healthy and positive habits, tends in view the optimism of the life, shimmering the human being in its totality, of form contextualizada, also rescuing, the exercise of the citizenship. (2)

In the educational process of the problematical whose methodology of participation is extremely adapted for this investigation type, the dialogue is fundamental, favoring the construction of the knowledge of abilities, through creative exercises and liberators, facilitating fittings to the conditions of each new scenery, being based in a conception hermenêutica of the human knowledge, as decisive for the human sciences, propitiating reflection shared starting from the cotidianeidade experience. (5) (6)

And, it doesn't remain doubt that to the conscience of the positive conduct for the appropriate and owed use of the safe sex and of the drugs, this educational methodological process is fundamental importance and it deserves consideration.

OBJECTIVES

Being like this, basing on these references and in the understanding of the complexity level that involves the life of women imprisoned, we intend to lift the following ones presupposed:

1. To identify with these women which its largest problems in relation to the sexuality, STD-Aids and drugs; working educational actions jointly, preparing them for they work I get same and with the other ones on the subjects of the sexuality, STD-Aids, and you drug, besides training them for they be agents multipliers.

METHODOLOGY

It is a research-action, humanist, whose analysis was efetivada for category, in a qualitative way, based on the procedures based by FREIRE (1992)⁽¹⁾ and BUENO (1997-8)⁽²⁾.

Researched place: chain of a city of the interior of the State of São Paulo Brazil.

Population: (10) imprisoned women, 21 and 41 years of age.

Methods and Techniques: individual interview, recorded and observation of the reality.

Orchestrate: form unary with objectives questions.

Procedure: - The delegates' authorization for accomplishment of the research.

- Rising of the information of the head office, tabulation and conclusion.
- Development of the educational actions with the imprisoned.

RESULTS AND DISCUSSIONS

- We will present the characterization of the studied population followed by the results of the questions on the thematic central.

We worked 10 imprisoned women, single majority, between 21 and 34 years, catholic, all mothers, wither elementary course complete, many with abortion practice.

These women's half referred that before being arrested, it liked to be with the family, tanning the children and taking care of the house, while another made mention to the importance of the freedom, of the professional work, and of the lazer as: "to date"; "to drink"; "to go for a walk"; "to tan friends"; "to go to parties and dances"; etc. They allege that in the chain, they develop occupational activities for the time they pass, embroidering plate cloths, making crochet, tricot, working in the hygiene of the cell, hearing music, watching TV, dreaming or writing letters. But, some deplore that there, them "they don't have head for anything, only thinking of the son", "feeling longing and solitude", with "will of being alone" and "quiet in the song."

1. To the we detect with them, your largest conflicts, everybody revealed serious problems caused in yours life, characterized

PICTURE I - Personal identification of the imprisoned women of the researched penitentiary system.

Subject	Status civil					n° children				Age				Religion*			Abortion			Graduation**			Profession
	s	c	v	o	t	1	2	3	t	21-34	35-40	>=41	t	c	o	t	s	n	t	1° i	2° i	t	
01				X		X				X				X				X		X			Housewife
02			X					X			X			X			X				X		Business
03	X					X				X				X			X		X				Baby-sitter
04	X					X				X				X			X		X				Promo party
05			X				X					X		X			X				X		Housewife
06	X							X		X				X			X		X				Housewife
07				X				X		X				X			X		X				Prostitute
08	X						X			X				X			X		X				Prostitute
09	X					X				X				X			X		X				Seller
10	X					X				X				X			X	X		X			Maidservant
total	6	0	2	2	10	5	2	3	10	8	1	1	10	7	3	10	6	4	10	8	2	10	

(*) In religion: c = Catholic; o = other: they didn't mention which religion professed.

(* *) In graduation, there was not none for elementary and high school complete. Just the elementary and high school incomplete and 2nd incomplete

PICTURE II - Answers of the imprisoned women of the system researched prisional referring the question : Do you have idea of the reason why are you here?

Suj	motivate of the prison
01	I helped a colleague to pass drug. Flagrant with crack.
02	Toxicant.
03	I discussed with a man of the justice.
04	I trafficked drug to pay debt.
05	I was accused of the death of my husband as being mandante of the crime.
06	I know the reason, but I don't want to speak.
07	I passed check leaves robbed by the boyfriend.
08	I trafficked drugs.
09	I trafficked drugs.
10	I assaulted a house.

with losses and your relatives' separations, revealing that "the largest sadness went when of your detention, in the chain.

- They also consider bad, a lack of privacy and lack of incentives in the prison way. Except for a woman researched imprisoned, that refers that habitually, she makes sex with woman, that declaring to have had a fleeting and uncomfortable intimate relationship with a prey that passed by this chain. The anal sex is not the favorite dentre the women, affirming like everything, including oral sex. The "normal sex" as they refer some, saying respect to the position dad-mom or "for top" it is the preferential among them. The minority reveals to like for the practical homosexual.

All the imprisoned are aware of the reason for the which they were arrested, and the great majority was due to the involvement with traffic of drugs, having a case of homicide accusation, and the others, disobey to the authority, assault the residence, and robbery of check leaves.

They notice the sex as being "a strong complement in the life", "it is very important", "it is good", "pleasant", "it is part of the life." They didn't refer to the search of the solemnity-pleasure in the chain, or the practice sexual in partnership, be among them or by means of intimate visits. They don't have prejudice in relation to practical homosexual, prevailing heterosexual.

PICTURE III - Answers of the imprisoned women of the penitentiary system referring the question : **What did you more like to make before you did are here? Is it now?**

What do you more like to make in the life		
Suj	Before	during permanence in the prison
01	"To be with the son at home."	"I don't have head for anything to not to be to think in the son."
02	"Of the freedom."	"I dream, I write letters."
03	"Of working, to have my money for not depending of anybody."	"I work making plate cloths and crochet to receive some money."
04	"To work with parties 18 hs/day, to date and to drink."	"I write or I clean. I don't know how to be stopped."
05	"To take care of the children, of the employment and to do salted for parties and factories."	"I make crochet, tricô and I read the Bible."
06	"To take care of the children and of the house."	"I make crochet, tricot for the time to pass in the chain."
07	"To give attention to the children, to be and to go for a walk with them."	"Anything. I feel longings and solitude."
08	"To be at alone home."	"I want to be more alone."
09	"To go for a walk with the children."	"I work, I hear music, I see TV for the time to pass."
10	"To go for a walk with the children, to tan with the friends, to go to parties and dances."	"I am in my quiet song."

PICTURE IV - Answers of the imprisoned women of the researched penitentiary system to the question: **What did you less like to make before you are here? Is it now?**

What did you less like to make		
Suj	before the detention	during permanence in the prison
01	"It liked everything."	"Of anything."
02	"Of being inside arrested of house."	"Of the tedium; the personnel "crying in the head of us."
03	"It liked everything."	"Of to wake up and to see me behind the barse without having as leaving."
04	"Of to look for my daughter and to face the family."	"Of the routine and to have that "to gobble certain things." to be in my song and to forget that speak and "they arm" for us."
05	"It liked everything"	"Of being arrested, far away from the children, family and friends."
06	"Of leaving of house."	"To do an of everything little for the time to pass."
07	"Of the prostitution life."	"To be for the songs crying separate from my children."
08	"It was of being in a lot of people's middle."	"Of hypocrisy."
09	"Of being stopped at home."	"Of being without working."
10	"It liked everything"	"Of being in the cell of the another listening "intrigue."

PICTURE VI - Answer of the imprisoned women of the penitentiary system referring the question : **What do you think on sex? Do you get to practice it here? How? Which does the sexual practice that you more like to make?** (Cont.)

08	"It is something very important, but today, only if it goes with somebody special."	-	X	-	"It is worth everything: normal or complete sex since it is with person that I like."
09	"I find pleasant, good thing."	-	X	-	"Sex taste for top, oral sex, everything less anal sex."
10	"It is part of the life and it likes."	-	X	-	"I like everything, less anal sex."

PICTURE VII - Answer of the imprisoned women of the penitentiary system referring the question: **What do you think the masculine and feminine homosexuality? Which are you sexual behavior?**

On the masculine and feminine homosexuality:		
Suj	what do you think?	my sexual behavior
01	"Anything against."	"Heterosexual."
02	"I don't have prejudice."	"Heterosexual."
03	"Anything against."	"Homosexual (*)."
04	"I assume 9 years ago."	"Homosexual."
05	"I leave each person's approach."	"Heterosexual."
06	"Anything against."	"Heterosexual."
07	"It is thing of the nature."	"Heterosexual (**)."
08	"Anything against."	"Heterosexual."
09	"I am against."	"Heterosexual."
10	"I find normal."	"Heterosexual."

(*) former-heterosexual (as program girl)

(* *) former-homosexual (now they have anmistress).

PICTURE VIII - Answers of the imprisoned women of the researched penitentiary system, referring the question: **What do you think on the diseases of the sex, do you prevent them? How?**

The diseases of the sex:				
Suj	what do you think?	if I prevent?		I prevent as
		Y	N	
01	"It is promiscuity, hygiene lack, it changes rotative of partners."		X	-
02	"I think has to take plenty of care because he/she doesn't give to take a risk."	X		"I use alone condom when I think is not the ideal partner."
03	"I think the people have to take care because "the world is lost."	X		"I used condom When I went prostitute for 3 years."
04	"We have to value, of there he/she doesn't have problem any."		X	"I never surrendered to anyone or a."
05	"I find terrible. Polluted people transmit for other."	X		"It used condom with my lover after mine the husband died."
06	"He/she has to prevent for not passing for the other ones."	X		"I use condom besides when is menstruated."
07	"It is dangerous thing, mainly the AIDS."	X		"I use condom, but not with the partner that I know that doesn't have anything."
08	"I think the people should become aware and to take care better of the health."	X		"I use preservative."
09	"Careful should be been, to take precautions."	X		"I use condom."
10	"We have to take precautions a lot."	X		"I use condom."

PICTURE IX - Answers of the imprisoned women of the penitentiary system referring the question : **Why do the people have DST? Did you have some of these? If had , what did you make to look after?**

venereal diseases (DST):				
Suj	the people have	I had		AS LOOK AFTER ME
		Y	N	
01	"For negligence, for believing that the person is "clean", with good appearance."		X	-
02	"They have for if they don't take care, they respect not the partner, if it is married."	X		Gonorrhea 8 years ago with complication (peritonite). I looked for the doctor and I was interned by 7 days.
03	"They are not careful, they don't give value the own life."		X	-
04	"The people catch STD s because they think the sex is all. They don't use preservative in the madness."		X	-
05	"For lack of experience and information."		X	-
06	"Because they don't take precautions"		X	-
07	"Because they don't take precautions"	X		I had syphilis discovering through prenatal exams. I negotiated and I was treated.
08	"Because of the partners' changes and for if they don't respect as people."	X		I had gonorrhoea. I sought medical treatment and I cured.
09	"Because the people don't take precautions."		X	-
10	"Because the people don't take precautions."	X		I had gonorrhoea that I diffused of the partner. I was interned 17 days and I cured with antibiotics and serum.

PICTURE X - Answers of the imprisoned women of the researched penitentiary system referring the question : **What do you think on the aids? How do you prevent? Where does she come from? Do you know anybody live with aids, yes or not? How many? And did you know already anybody that died from aids, yes or not? How many?**

Aids. : I think that							
People's knowledge							
Suj	the Aids :	the prevention makes:	the Aids came:	alive: Aids		died: Aids :	
				Y	N	Y	N
01	" Doesn't have cure, I find dangerous and I am afraid. They say that is for at every moment where you are going. I never understand one another without condom."	<ul style="list-style-type: none"> Using condom Not making oral sex and if, only with condom Avoiding deep kisses because of the saliva Avoiding bruises for not catching the disease. 	"Of the monkey, but I have doubt I respect it."	2	-	2	-
02	"It is an enormous rascal, until it can turn 3rd world war, the virus it is a lot of mutant. She came to end with the homosexuals, with the users of drugs, with the prostitution... she came to eliminate an unproductive class of the society."	<ul style="list-style-type: none"> Using condom Having taken care of the medical class to her same. 	"Of laboratory, it is a very complex virus to have been created by the nature."	S	-	S	-
				e		e	
				v		v	
				e		e	
				r		r	
				a		a	

PICTURE X - Answers of the imprisoned women of the researched penitentiary system referring the question : **What do you think on the aids? How do you prevent? Where does she come from? Do you know anybody live with aids, yes or not? How many? And did you know already anybody that died from aids, yes or not? How many?**

03	"It is a disease of the last millennium that the scientists seek the cure and they never find, and with that it is putting an end to the people."	<ul style="list-style-type: none"> Using condom Not going out with people that I don't know. 	"I don't know"	Several	-	Several	-
04	"Aids is a disease as any other one, I don't have any prejudice."	<ul style="list-style-type: none"> Tends an alone partner 	"Of Africa, of the man's sexual relationships with the monkey."	5	-	Several	-
05	"It is a terrible disease. The people with Aids should make use of AZT and to seek rigorous medical treatment."	<ul style="list-style-type: none"> Using condom Alerting the partner in case it is HIV#. 	"Of the sex, of the venereal diseases."	1	-	2	-
06	"Terrible disease that doesn't have cure."	<ul style="list-style-type: none"> The sexual relationships should never be maintained without prevention. 	"I don't know, but the people say that came from the monkey."	Several	-	6	-
07	"Disease that has a sad end."	<ul style="list-style-type: none"> Using condom 	"Of the sex, pick in the vein with materials that are not sterilized."	Several	-	Several	-
08	"I am afraid."	<ul style="list-style-type: none"> Using condom Making exams 	"I don't know."	5	-	4	-
09	"The people that have the virus of the Aids should be careful for they contaminate not other people."	<ul style="list-style-type: none"> Using condom 	"Of Africa."	1 0	-		X
10	"It is a very serious case. Who has it should inform its partner. Aids is a disease that kills."	<ul style="list-style-type: none"> Using condom Who takes pick in the vein e she should not make sex with other people Separate syringes. 	"I don't know for sure, but I think it came from the sex, of everything."	Several	-	Several	-

In this subject, as well as in other, we observed the need emergencial of working an appropriate and effective educational program to assist these problems faced in the these women's daily, besides being important its training for they be agents multipliers. Although revealing not to have had any STD, many confirmed they have already gone by the experience of these diseases, mainly gonorrhea, looking for medical attendance with satisfactory results.

On the diseases of the sex, they relate them to the "lack of the valorization persons , hygiene lack and promiscuity, lack of conscience." Even so the one that more worries the imprisoned is the prevention lack. Most affirms to take precautions against STD. The minority doesn't uses condom, leaning on in the facts that you have fixed partner and it trusts him.

Of this depreendemos the need of we lift educational actions for them, seeking orientation, the elucidation and direction, since some of them, in the moment of the application of the instrument, requested the a doctor's presence to assist its needs as they

referred in what it plays to running, wounds and dermatites present in genital.

CONCLUSION

- Although the women researched imprisoned, revealed to have some knowledge about sexuality, STD-Aids and drugs, though those presented serious problems to work with its body, tends difficulties of working the safe sex and the owed use of the drugs, evidencing a series of doubts in relation to thematic central.
- The have real, but simplistic idea on Aids, tying it the fatality, fear and to the prevention. Therefore, we developed with them, educational programs, assisting its problems, through methodology participation, taking them orientation and information through knowledge and ability, with the multidisciplinary and transprofissionalidade, besides preparing them for they be agents multipliers. At this time, they are making

didactic material that futuramente, will revert in educational cartilha adapted to their language, to revert its pairs.

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URETRITE GONOCÓCICA EM PACIENTES MASCULINOS DO SETOR DST-UFF

GONOCOCCAL URETHRITIS IN SETOR DST-UFF MALE PATIENTS

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RESUMO

Um dos principais motivos de consultas médicas masculinas relacionadas às doenças sexualmente transmissíveis ainda é a uretrite gonocócica, que pode deixar seqüelas como infertilidade se não for adequadamente tratada. A presente monografia visa determinar o perfil socioeconômico e comportamento sexual dos indivíduos do sexo masculino com uretrite gonocócica atendidos no período de Janeiro de 1997 a dezembro de 1998 no Setor de DST-UFF. Procurou-se também identificar os tratamentos utilizados e os índices de retorno para seguimento da evolução clínica. Foi realizado um estudo retrospectivo dos 115 prontuários de indivíduos com diagnóstico laboratorial positivo para gonorréia pelas técnicas de bacterioscopia pelo método de Gram e/ou cultura em meio específico de *Thayer-Martin*. Determinados dados foram entrecruzados, e destes alguns foram correlacionados, aplicando-se o coeficiente de contingência, que estabelece a intensidade da relação entre dois grupos de variáveis. Os dados foram organizados em gráficos e tabelas. Observou-se no grupo estudado um predomínio de indivíduos abaixo dos 30 anos, solteiros, com baixa renda familiar e escolaridade, heterossexuais, com início de vida sexual entre os 13 e 16 anos e, em 61,7 % dos casos não era feito uso de preservativo. Cerca de 35 % dos pacientes tinham história de DST prévia, sendo a mais freqüente a gonorréia. É indispensável a promoção de campanhas educativas a fim de prevenir a disseminação não só da gonorréia, mas de todas as DST/Aids.

Palavras-chave: DST, gonorréia masculina, comportamento sexual masculino

ABSTRACT

One of the main purposes for male's medical consultations related to Sexually Transmitted Diseases (STD) is gonococcal urethritis which can set up sequels such as infertility if not properly treated. The main aim of the present monograph is to determine the social and economical profiles of male individuals suffering from gonococcal urethritis (as well as their sexual behavior) who have been attended from January 97 to December 98 at the STD section of *Universidade Federal Fluminense*. It was identified the different medical treatments applied to each case and also found out the rates of recurrence for follow up of clinical evolution. It was built up a retrospective study of the 115 promptuaries of individuals with positive laboratory diagnosis for gonorrhoea by using bacterioscopy techniques following the Gram method and/or the Thayer-Martin specific culture mean. Some of the data have been intersected and some have been correlated by using the contingency rate, which has settled the intensity of the analogy between the two variable groups. The data was organized in charts and lists. In the groups under investigation, most of the individuals were single, under 30, with low family income, low educational rate, heterosexuals, having started sexual activity from 13 to 15 years old and, 61,7 % of them have never wore condoms. Around 35 % of them have shown a previous case of STD, most frequently gonorrhoea. There is an absolute need of educational campaigns to prevent people from spreading not only gonorrhoea but all STD/Aids as well.

Keywords: STD, male gonorrhoea, male sexual behavior

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Introdução

Um dos principais motivos de consultas médicas masculinas relacionadas às doenças sexualmente transmissíveis ainda é, nos dias de hoje, a uretrite gonocócica, apesar de todas as campanhas educativas e propagandas sobre as DST/Aids e importância do uso de preservativo. A gonorréia pode ter sérias complicações como orquite, epididimorquite, prostatite, infertilidade, esterilidade, cegueira neonatal, artrite, cardite, representando apesar de todo avanço tecnológico/científico, um grande ônus para a Saúde Pública no Brasil^(1,2,3). A uretrite gonocócica não pode ser encarada em termos de política sanitária apenas no âmbito mas-

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