ABSTRACT

Designed to be used by health educators when teaching youths and their parents about the control of venereal disease (syphilis and gonorrhea), this booklet includes the following: (1) a two-page teaching plan consisting of objectives for both youths and adults along with notes on subject matter, methods (including titles of films and printed materials), procedure, target audience, resources (persons and materials), and follow-up and evaluation; (2) a brief outline for a youth program about venereal disease (VD) control covering potential audience groups, lecture presentation topics and film, title of a pamphlet to hand out, and suggested evaluation methods; (3) a brief outline for a VD control program for young and middle-aged adults covering potential target groups, presentation topics, and film; (4) suggestions for including VD education with other programs and hints on how to reach youth on the topic of VD; (5) brief descriptions of five recommended films; (6) a listing of recommended printed materials, the name and address of their source, and the intended target audience; (7) fifty questions and answers about VD control; and (8) six pages of content on syphilis and gonorrhea including nature and cause, symptoms, effects, detection methods, treatment, most susceptible persons, preventative measures, and screening and/or treatment contact. (EM)
Consumer Health Education

VENEREAL DISEASE

COOPERATIVE EXTENSION SERVICE
University of Arkansas Division of Agriculture and United States Department of Agriculture Cooperating
TEACHING PLAN

Venereal Disease Control

OBJECTIVES - YOUTH:

1. To create an awareness among youth about the symptoms and treatment of syphilis and gonorrhea.

2. To develop interest among youth in learning about symptoms, treatment, and effects of syphilis and gonorrhea.

3. To help youth develop more positive feelings toward knowledge about causes, symptoms, treatment, and effects of syphilis and gonorrhea.

OBJECTIVES - ADULTS:

1. To help parents develop a positive feeling toward knowledge about causes, symptoms, and treatment of venereal disease.

2. To help parents develop a positive attitude toward teenagers becoming knowledgeable of the causes, symptoms, preventative measures, and treatment of VD.

3. To inform parents of the facts relating to venereal disease.

SUBJECT MATTER:

1. Syphilis - Nature, Symptoms, Treatment and Effects
   Extension Xerox Material

2. Gonorrhea - Nature, Symptoms, Treatment and Effects
   Extension Xerox Material

3. Suggestions For Programs in Screening For Venereal Disease
   Extension Xerox Material

METHODS:

1. Lecture (Group Meetings)

2. Circular Letter

3. Mass Media

4. Home Visits

5. Group Discussion

*Prepared by Extension Health Specialists.
6. Special Interest Meetings

7. Films: "VD - A New Focus"
   "VD Questions, VD Answers"
   Additional films are available through the State Health Department:
   "Quarter Million Teenagers"
   "VD Every 30 Seconds"
   "VD: Prevent It"

8. Printed Materials
   Strictly For Teenagers
   What Everyone Should Know About VD
   What You Should Know About VD
   Every Woman Should Know The Facts About Gonorrhea
   VD
   What You Should Know About VD
   VD - You'd Better Stop It, Because Nobody Else Can
   Facts You Should Know About VD But Probably Don't

Procedure:

1. In each major community in the county hold a special interest youth meeting on VD.

2. Arrange a special showing of the film "VD Questions, VD Answers" or "VD - A New Focus." Invite leaders of all EHC, church groups, PTA, etc. Solicit those present to carry the message to their groups. Furnish each one present with a copy of a venereal disease pamphlet.

3. Contact the principals of your local schools and offer an educational program on venereal disease. Personal contact is usually more effective. Solicit help and support from the local medical society. Invite physicians and registered nurses to be present to participate in the discussion and answer session.

Target Audience:

   Youth 15-19
   Young and Middle-Aged Adults

Resource Persons:

   Physicians, Registered Nurses, Public Health Educators, School Nurse, VD Epidemiologists, Pharmacists.

Resources:

   Xerox material entitled Venereal Disease will be available for distribution.

Follow-Up and Evaluation:

1. Pre-and post-test by short survey.
2. Check cures reported through the State Health Department.
A Youth Program About Venereal Disease Control

I. Target Audience - Youth

Potential Audience Groups: Schools, 4-H Clubs, Church Groups, Boy Scouts, Girl Scouts, Boys' Clubs, and Special Interest Youth Groups.


2. Show Film - "VD Questions, VD Answers."


4. Discussion.

III. Evaluation:

1. Pre- and Post-Test or

2. Question- and-Answer Session.
A WD Control Program for Young and Middle-Aged Adults

I. Target Audience: Young or Middle-Aged Adults

Potential Target Audiences: PTA's, EHC, Women's Church Organizations, Women's Sororities, Special Interest Groups.


2. Show film "VD Questions, VD Answers or "VD - A New Focus."


Suggestions for Including V.D. Education with Other Programs

1. Distribute a leaflet on V.D. with materials on physical fitness.
2. Include a V.D. film along with an immunization program.
3. Include a V.D. Fact Sheet with other communicable disease material.
4. Use older groups to pass on the knowledge to the youth.

Hints on How to Reach Youth on the Topic of V.D.

1. Be honest.
2. Be knowledgeable.
3. Be serious.
4. Do not moralize about sex. Remember the topic is V.D. --- just so happens sex is how you catch V.D.
5. Do not separate girls and boys (in a general program).

REMEMBER TO STRESS THAT VENEREAL DISEASE IS A COMMUNICABLE DISEASE.
The following current films on venereal disease are available on four-day loan from the Arkansas State Department of Health. Write Mrs. Ellen Lacefield, Division of Health Education, Arkansas State Department of Health, 4815 West Markham, Little Rock, Arkansas 72205, or District Extension Health Specialists, P. O. Box 391, Little Rock, Arkansas 72203. Indicate the title and dates films are needed. Allow at least three weeks for scheduling and mailing.

1. VD: A New Focus: 16 mm., color, 15 minutes. Informs young people of the simple facts about gonorrhea and syphilis, including the importance of recognizing the symptoms and seeking treatment. Host-narrator James Brolin, of the Marcus Welby, M.D. television series, exposes several myths surrounding VD. Stresses what can happen if VD is left untreated, and why patients should name their contacts. This film presents the entire scope of the problem — medical facts, myths, and the attitudes of young people concerning VD that often prevent prompt treatment. Particularly appropriate for junior high; can be used with senior high. Helps get discussion started.

2. VD Questions, VD Answers: 16 mm., color, 14 1/2 minutes. New. Considered best film. This film is available through Cooperative Extension Service, P. O. Box 391, Little Rock, Arkansas 72203.

3. A Quarter Million Teenagers: 16 mm., color, 16 minutes. The film opens with a presentation of the great number of persons who contact syphilis and gonorrhea each year. "A Quarter Million Teenagers" approaches the subject purely from the standpoint of health and disease, avoiding any discussion of the moral issues involved. Particularly appropriate for senior high; can be used with junior high classes that have preliminary understanding of the reproductive system.

4. VD Every 30 Seconds: 16 mm., color, 17 minutes. Alerts young people to the high prevalence of venereal disease in their age group. Animated portions show how syphilis and gonorrhea invade the body, infect many organs if untreated, and cause permanent damage. Emphasizes the necessity for early treatment by a physician. Appropriate for junior and senior high school.

5. VD: Prevent It: 16 mm., color, 11 minutes. Venereal diseases are the most threatening of all communicable diseases. This film demonstrates that they are also easiest to prevent. It discusses some of the myths about VD, the possible consequences of untreated VD, and ways one can reduce the risk of infection. Appropriate for use with senior high. Good. Can use as a follow-up to "A Quarter Million Teenagers."
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<th>TITLE OF PUBLICATION</th>
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<td>Readers Digest - What You Should Know About V.D.</td>
<td>3M Company</td>
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<td>135 West, 50th Street</td>
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<td>Plain Talk About VD</td>
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<td>Some Questions and Answers About VD</td>
<td>American Social Health Assoc.</td>
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<td>Every Woman Should Know The Facts About Gonorrhea</td>
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Questions and Answers About VD Control*

1. What is America's number one communicable disease?
Venereal disease (Gonorrhea) (Syphilis) --- with the exception of the common cold.

2. How many new cases of gonorrhea and syphilis are there each year in the U. S.?
Gonorrhea - over one million; Syphilis - over 120,000.

3. Is VD spread only by prostitutes?
No. Only five to ten percent of new cases are spread by prostitutes.

4. Who is spreading VD to whom?
Over one-half of the new cases are found in teenagers and young adults under 25 years of age.

5. Is VD ever fatal?
Yes. Over 1,000 people in the U. S. die of VD each month.

6. Do pre-marital blood tests find cases of VD?
Yes - for syphilis one out of every 81 marriages.
No - for gonorrhea.

7. What is VD?
It is a disease spread by germs passed on during sexual or homosexual contact.

8. Can a person have both syphilis and gonorrhea at the same time?
Yes, but they are two separate diseases.

9. Can a person get VD from toilet seats, doorknobs, or shaking hands?
Almost never. Other than rare instances of kissing, VD is spread only by sexual contact.

*Source: V.D. - America's Growing Threat by Lindsay R. Curtis, M.D. Publishers Press, Salt Lake City, Utah
10. Will ordinary cleanliness prevent VD?
   No.

11. Is VD limited to the lower economic groups?
   No. VD has moved up in society.

**Syphilis**

12. What disease, considered by physicians, is medicine's "greatest imitator?"
   Syphilis.

13. How is syphilis spread during sexual contact or intercourse?
   A long cork-screw type germ called a spirochete is passed from the infected person to others.

14. What is the first sign of syphilis?
   A painless sore called a chancre; usually appears at the exposed area.

15. How long does it take a chancre to appear after infection?
   21 to 90 days.

16. Does the chancre have to be treated before it will go away?
   Whether treated or not it will disappear in about three weeks.

17. What other signs appear after the chancre goes away?
   Splitting headaches, fever, sore throat, hair falls out, rash over any part of the body (This is called secondary syphilis.)

18. What organs does syphilis attack?
   The vital organs - brain, heart, liver, and bones.

19. Will the secondary signs of syphilis go away without treatment?
   Yes - usually in about three weeks.
20. How long may the infected person remain free of symptoms before the "third stage" of the disease appears?
Right away or may go as long as 10 to 25 years.

21. What are the symptoms of the third stage?
The spirochetes quietly work on the vital organs.

22. During this Asymptomatic (no symptoms) stage, can an infected person infect others?
Yes - If a woman becomes pregnant during this time, the unborn child may become infected by contact with the mother’s blood stream through the placenta.

23. What if a mother has syphilis during pregnancy and is not treated?
A miscarriage can occur; baby may be born prematurely and die; or baby could be born with defects (blindness, deafness).

24. How can a person know if he has syphilis?
By having a blood test made by the local health unit or family physician. Microscopic examination of discharge from the sore.

25. How soon does a person develop syphilis after contact or exposure?
Within 24 hours.

26. What should a person do when has been exposed to infectious syphilis?
Consult a doctor or public health clinic immediately.

27. Can syphilis be cured?
Yes, promptly and rather easily.

28. How many untreated cases of syphilis are there at the present time?
About one million people in the United States.
29. What will happen to the cases of syphilis that are not treated?

About 25% will develop severe late symptoms.
1 in 200 will go blind
1 in 44 will become insane
1 in 25 will become crippled
1 in 13 will develop heart disease

GONORRHEA

30. Which is most prevalent – gonorrhea or syphilis?

Gonorrhea is about ten times as common as syphilis.

31. What is gonorrhea?

A dangerous, very contagious, sometimes extremely painful inflammation of the mucous membranes lining the inside of the sex organs.

32. What is the cause of gonorrhea?

During sexual contact, a germ called the gonococcus is passed from one infected person to another. Alias: "Clap" - "Dose" - "Strain"

33. How long does it take gonorrhea to develop after exposure?

One to eight days.

34. How does a person know if he or she has gonorrhea?

In the male, persistent discharge and pain on urination; in the female, some discharge from the vagina, usually no pain on urination.

35. How is gonorrhea diagnosed?

By an examination under a microscope of the discharge from the sex organ.

36. How difficult is gonorrhea to treat?

Relatively easy to treat; cure is almost 100%. Unfortunately, there is increasing evidence that the germ which causes gonorrhea is becoming more and more resistant to penicillin, especially in females.
37. What are the complications of untreated gonorrhea?
   Male - Sterility, Arthritis, Strictures.
   Female - Peritonitis, Infertility.

38. What is the danger to the baby if a mother has untreated gonorrhea?
   Possible blindness.

39. Does anyone ever die from the effects of gonorrhea?
   Yes, caused from blood stream infection or from peritonitis — especially in women.

VENEREAL DISEASE

40. Can you get VD from masturbating?
   As we have said, you usually get it from sexual contact with a person who has the infection.

41. Can you catch VD again after you have cured it by treatment or do you become immune?
   There is no immunity. You can have VD as often as exposed.

42. Can you tell by looking at a person if he has VD?
   No. Only medical examination and laboratory tests can detect VD.

43. Is VD inherited?
   No.

44. Can you cure yourself of VD like it says in some magazines?
   No.

45. What can be done to halt the rise in VD and to wipe it out?
   1. Awareness of the problem.
   2. Education.
46. What are some protective measures to prevent getting VD?

1. Reduce number of sex contacts
2. The use of a condom or prophylactic.
3. Use soap and water after contact.
4. Urinate after contact.

47. Does VD effect the female's menstrual cycle?
   Yes, it may, but not necessarily.

48. Do physicians have to report cases of VD to the parents of minors?
   No.

49. Can birth control pills cause VD?
   No.

50. Where is your local health department located?

VD - IT'S NOT OURS TO MORALIZE RATHER TO EDUCATE THE MIND WAYS TO BETTER CARE FOR THE BODY.
LECTURE: SYPHILIS

NATURE AND CAUSE OF THE DISEASE

Syphilis is an infectious disease caused by a germ with a formal name, treponema pallidum. Because this highly potent germ has a cork-screw-like shape when seen under a microscope, it is called a spirochete. It takes a special microscope called a darkfield to see this transparent germ. The spirochete is a fragile organism that can survive in open air for only a few seconds and cannot endure great temperature changes. The only place it can live for any length of time is in human body tissues and is transmitted from person to person almost exclusively by sexual contact. It is so incredibly infectious it is possible to transmit syphilis with only a single spirochete.

SYMPTOMS

1. Ten to ninety days after infection (average of 21), tissues surrounding the point of entry become irritated, sometimes producing a sore called a chancre. No pain or itching accompanies a chancre. This is primary syphilis.

2. Symptom-free period usually lasts two to ten weeks, although it may last up to six months.

3. Following the symptom-free period, a person may develop fever, sore throat, and severe headaches. Skin conditions may appear as sores and rashes. Hair may fall out in patches. This period can last from six months to two years. This is secondary syphilis.

EFFECTS OF SYPHILIS - THE KILLER

1. Sterility - inability to produce children.
2. Impotency - inability of male to perform sexually.

*Reviewed by Division of Communicable Disease, Arkansas State Department of Health.

4. Syphilitic optic atrophy - affects vision.

5. Tabes dorsalis - severe leg pains, difficulty in walking, paralysis.

6. Cardiovascular syphilis - aneurysm (swelling of aorta).

7. Late benign syphilis - skin lesions occurring in the brain or liver and bone lesions causing pain and swelling.

8. Many other malfunctions of the vital organs.

Syphilis in pregnancy is called congenital. It can cause:

1. Stillbirth.
2. Blindness.
3. Deafness.
5. Other malfunctions of the vital organs.

METHODS OF DETECTION

1. A darkfield microscopic examination.
2. A standard VDRL serology (blood test).

TREATMENT

1. Syphilis can be cured in almost all stages with penicillin administered by a physician. If cannot be cured at home.
2. Other antibiotics can be substituted if you are allergic to penicillin; however, they are not as effective.

MOST SUSCEPTIBLE PERSONS

1. Anyone can contract a venereal disease if exposed to an infected person.
2. Most VD occurs in young people.
3. People with several sex partners are more likely to contract VD.

PREVENTIVE MEASURES

1. Learn the effects of VD.
2. Use a prophylactic or rubber.
3. Wash with soap and water before and after contact.
4. Urinate as soon as possible after intercourse.
5. Women should douche after intercourse.

None of these methods are fool-proof.

SCREENING and/or TREATMENT CONTACT:

1. Private physician.
2. Local health unit.
LECTURE: GONORRHEA

NATURE AND CAUSE OF THE DISEASE

Gonorrhea is caused by a germ called the gonococcus. When viewed through a microscope gonococci are seen in pairs, each resembling a small biscuit or a whole coffee bean. Like the spirochete of syphilis, gonococci thrive in the warm, moist mucus membrane tissues that line body openings. When exposed to air or subjected to slight temperature changes, they quickly die. In virtually every case of gonorrhea, the germ is passed from the mucus membrane tissue of the infected person to those of another person during sexual intercourse or sexual contact. If this disease is left untreated, it can cause sterility in both men and women. Like syphilis, it primarily attacks the sexual organs and urinary tract.

SYMPTOMS

1. In the male the visual sign is a discharge, a thick white or yellow pus, from the penis which may begin two-to-eight days or more after exposure.

2. A painful burning sensation when urinating.

3. A feeling of frequent need to urinate.

4. An unexplained swelling in the testes or groin.

5. A long-lasting sore throat.

6. In the female if a discharge is present it may be itchy and thick. However, many women may have a clap-type discharge and not notice it.

7. Women in late gonorrhea will experience some pain associated with damage to internal reproductive organs.

*Prepared by District Extension Health Specialists.*
8. Painful urination is not a common sign of gonorrhea in women.

9. Approximately 80 per cent of women with gonorrhea have no noticeable symptoms.

The early symptoms of gonorrhea, like those of syphilis, will disappear without treatment if they are ignored or go unnoticed. However, the disease is still present and should be treated.

EFFECTS OF GONORRHEA - THE CRIPPLER

In the Male
1. Sterility - inability to father.
2. Arthritis - inflammation of joints.
3. Strictures - scars that obstruct the flow or urine.
4. Infection of prostrate glands.

In the Female
1. Peritonitis - acute infection in abdominal cavity.
2. Infertility - unable to have children.
3. Infection of fallopian tubes and ovaries.

METHODS OF DETECTION

1. A gonococci culture or smear of the discharge by a microscopic examination.

2. Note: A blood test, as in syphilis, does not detect gonorrhea.

Due to the difficulty in detecting gonorrhea in women, physicians will treat any woman known to have been exposed to gonorrhea, even if no infection can be proven.

TREATMENT

The treatment of gonorrhea requires administration by a physician of penicillin or other antibiotics in doses strong enough to kill the gonococci. As in the case of syphilis, gonorrhea can almost-always be cured,
but organs or tissues already damaged cannot be repaired. Unfortunately, there is increasing evidence that the germ which causes gonorrhea is becoming more and more resistant to penicillin, especially in females.

MOST SUSCEPTIBLE PERSONS

1. Anyone can contract a venereal disease if exposed to an infected person.
2. Most VD occurs in young people.
3. People with several sex partners are more likely to contract VD.

PREVENTIVE MEASURES

1. Learn the facts about VD.
2. Use a prophylactic or rubber.
3. Wash with soap and water before and after contact.
4. Urinate as soon as possible after intercourse.

None of these methods are fool-proof.

SCREENING and/or TREATMENT CONTACT:

1. Private physician.
2. Local health unit.

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