SAFER SEX

It Could Just Save Your Life

Warning: This article contains explicit sexual information.

It is essential that teens with viral hepatitis practice "safer sex" to ensure they do not transmit hepatitis viruses to their partners and to protect themselves against contracting new diseases or infections.

More than 65 million people—about one in five Americans—are believed to be infected with a sexually transmitted viral infection other than HIV, the virus that causes AIDS. Most are incurable infections, including genital herpes, human papilloma virus (HPV) and the hepatitis B virus, which can cause chronic liver disease and cancer.

A hepatitis B vaccine is available and should be administered to all teens who have not yet received it because the prevalence of this sexually transmitted infection remains high. According to the Planned Parenthood Federation, it is estimated that 120,000 new sexually transmitted hepatitis B virus (HBV) infections occur annually, and young adults are the most commonly infected.

According to Planned Parenthood, there are about 750,000 people with sexually acquired HBV infections in the United States. Hepatitis B remains the only sexually transmitted disease that can be prevented by a vaccine.

Hepatitis D viruses are also found in blood and semen. Hepatitis C viruses are found in blood. These forms of viral hepatitis can cause liver disease and liver cancer, but unfortunately there are no vaccines to prevent their transmission. Only safer sex practices and standard precautions can prevent new infections.

Even if both partners have the same type of chronic hepatitis infection, safer sex practices should still be used—even if the woman is using birth control pills, an implant, diaphragm or spermicidal foams or jellies. It is possible for a person already infected with viral hepatitis to become infected with a second genotype or viral mutation of that type of viral hepatitis. This second, new infection can accelerate an existing liver disease

For maximum prevention, teens and adults should either abstain from sex or always practice "safer sex."

What Is Safer Sex?

Safer sex means taking action to make sure no one gets their partner's blood, semen or vaginal fluids in their body. Similarly, safer sex means you make sure your own body fluids don't enter your partner.

With safer sex, no body fluids enter a vagina, anus or mouth (during vaginal, anal or oral intercourse) or come into contact with mucous membranes, such as around the eyeballs or inside the nose.

The best way to prevent body fluids from reaching someone during intercourse is to use a condom. A condom is a sheath that fits over the penis. It can be made of latex (the safest condom available), plastic or animal tissue. It is also called a rubber, safe or jimmy.

Today, nearly as many women as men buy and carry condoms, according to Planned Parenthood. It catches a man's semen before, during and after he ejaculates or "comes." Some condoms have a nipple-shaped tip to hold the semen so it does not spill out.

Experts consistently recommend latex because some animal tissue, such as lambskin, has pores small enough for the hepatitis B virus, HIV and other sexually transmitted viruses or bacteria to pass through. Polyurethane condoms break more often than latex.

A study cited by Planned Parenthood observed heterosexual couples where one partner was HIV-infected and the other was not for an average of 20 months. It found:

- None of the uninfected partners among the 124 couples who used condoms consistently and correctly for vaginal or anal intercourse became infected with HIV.
- About 10 percent of the uninfected partners (12 of 121) became infected when condoms were used inconsistently for vaginal or anal intercourse.
- Of the 121 couples that used condoms inconsistently, 61 used condoms for at least half of their sexual contacts and 60 rarely or never used condoms. The rate of infection was 10.3 percent for the couples using condoms inconsistently and 15 percent for couples not using condoms.

In short, nothing guards against hepatitis viruses, HIV and STDs like a latex condom and other safer sex practices. Spermicidal foams and jellies, diaphragms, implants and other devices do not block body fluids and may not kill all of the harmful bacteria and viruses in your partner's secretions.

The female condom fits inside the vagina like the diaphragm and also covers the vulva. It is a pouch with flexible rings that is inserted into the vagina. It has the advantage of not requiring a man to maintain an erection during use. Although it is not as effective as the male condom, the female condom is a valuable option for women who want to protect themselves against viral hepatitis, STDs and unintended pregnancies. However the effectiveness of the female condom in preventing hepatitis virus transmission has not been studied extensively, according to CDC.

The birth control pill, IUDs, Norplant, Depo-Provera, vasectomies and tubal sterilizations offer great protection against pregnancy, but no protection against hepatitis viruses and STDs. Many people use latex condoms along with these birth control methods for the best protection against both pregnancy <u>and</u> sexually transmitted infections.

Even Oral Sex Requires a Condom

Oral sex may not get one pregnant, but it can still transmit disease.

It is safer to put a condom on the penis before beginning oral sex to guard against secretions that may carry infection. It is important not to get secretions or semen in the mouth. A sore throat or small cuts on the gums may serve as entryways for viruses.

Vaginal secretions can also carry viruses, especially if a woman is having her period. Latex condoms can be cut with a scissors up the middle and then laid flat for oral sex on the vulva or anus. Latex dams or squares, which are thicker than plastic wrap and more likely to resist tearing, may be used. Latex gloves also provide STD protection.

Proper Use of Condoms

A condom just might save a life, and should be treated like the valuable tool it is. Store condoms in a cool, dry place. Long exposure to air, heat or light makes them more breakable. Do not store them continually in a back pocket, wallet, purse or glove compartment.

Check the expiration date to make sure the condom is fresh and safe. Throw away condoms that have expired, been very hot, carried around in a wallet, or washed in the

washer or dried in the dryer. If they appear dry, stiff or sticky, toss them. If there are any doubts about a condom, buy a new one.

Condoms usually come rolled into a ring shape. They are individually sealed in aluminum foil or plastic. When opening the condom package, do it carefully to avoid tearing the condom.

To minimize mistakes, both partners should know how to put on and use a condom. Planned Parenthood Federation recommends learning in a safe place free of pressure or frustration. Practice on one's own penis or on a penis-shaped object like a ketchup bottle, banana or cucumber.

To ensure maximum protection, never use a condom twice and always put a new condom on an erect penis before there's any genital, anal or oral contact.

If intercourse has already begun, pulling out and putting on a condom right before ejaculation may be too late for protection against hepatitis, STDs and pregnancy.

The male should put on a condom as early as possible at the very beginning of sex play rather than waiting until his partner is ready for penetration. It's also a good idea to have extra, new condoms around in case a condom is put on too soon or if he loses his erection.

A condom is like a sock, with a right and wrong side. First, unroll it about half an inch to see in which direction it is unrolling. Then put it on. If a male has not been circumcised, pull the foreskin back first. It should unroll easily down the penis. If it starts off on the wrong side, try again with a new condom. Don't be afraid to practice ahead of time.

Hold the tip of the condom gently between the fingers as it rolls down. This keeps out air bubbles or pockets that can increase the chance of a condom breaking. It also leaves space at the end for the cum or semen. Roll the condom down as far as it will go.

Anal intercourse increases the chance of viral transmission tremendously, because there can be small tears or bruises in the anus during sex, which makes one tremendously vulnerable to bloodborne infections like viral hepatitis and HIV.

For anal intercourse, lots of lubrication is helpful. Using a water-based lubricant is also helpful for vaginal intercourse. The lubricant goes on after the condom is put on, not before, or else it could allow the condom to slip off easily. Add more lubrication often.

Dry condoms break more easily than properly lubricated ones.

Using lubricant will make things go smoother and give added protection. Lubrication is especially helpful for women when they have intercourse for the first time, or if there is a tendency for soreness.

Always use a water-based lubricant (such as KY Jelly, Astroglide, Aqua Lube, Wet, Foreplay, or Probe) because oil breaks latex. Don't use vaseline, hand creams or lotions as a lubricant. Also, treatments for yeast infections contain oil and may break latex.

After ejaculation, hold the condom at the bottom of the penis so it doesn't slip off. Try to pull out while still erect or hard. The condom comes off only after the penis is completely out of the partner.

Use a condom only once.

Never use the same condom for vaginal and anal intercourse.

Talk Contraception Before the Heat of the Moment

It may be embarrassing to talk to a partner about contraception and condoms, but it's essential and should be done before a sexual situation begins. Don't wait until the heat of passion takes over. It can overwhelm good intentions.

Be honest about feelings and needs. Silence is not a virtue in this situation. Talking about condoms will make it easier for both partners. It can help create a relaxed mood and make sex even more enjoyable and safe.

Embarrassment should not become a health risk and increase chances of infection. It's important for partners to be open and share health concerns and sexual health history.

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