

# ASSESSING PATIENT EXPERIENCES OF AN STI DIAGNOSIS

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## **Introduction:**

Patients who receive a diagnosis of a sexually transmitted infection (STI) can have a diverse range of experiences. There are many aspects which come together to create an overall positive or negative experience, including the communication with the clinician, the nature of the STI and the use of technology in providing a diagnosis. There is need to clarify how to create the most positive experience of an STI diagnosis for patients, and to implement best practice in sexual health.

## **Methods:**

Telephone interviews were conducted with patients who attended a specialist sexual health clinic in Western Australia and were subsequently diagnosed with a notifiable STI (chlamydia, gonorrhoea, syphilis, hepatitis B, hepatitis C or HIV). These semi-structured interviews were transcribed and deidentified. The transcriptions underwent phenomenological qualitative analysis for themes.

## **Results:**

Four main themes emerged as having the most impact on a patient's individual experiences. Positive aspects included staff qualities of compassion, honesty and non-judgemental attitudes. Negative aspects included shock at an unexpected diagnosis, anxiety at waiting for results and perceptions of stigma, both internal and societal. The reason for attending the clinic also influenced overall experiences, with some patients prompted by notification by sexual contacts, and others attending for routine check-ups or for non-STI reasons. Finally, the method by which patients were contacted was also important, and technology such as telephone or SMS contributed to perceptions of convenience and relative anonymity.

## **Conclusion:**

Receiving an STI diagnosis is an experience made up of many facets which come together to create an overall impression on a patient. Understanding this complexity is critical to ensuring that clinicians and services which provide diagnoses are able to meet the needs of individual patients.

## **Disclosure of Interest Statement:**

No conflict of interest identified.