



HIV and STI trends in Wales

Surveillance Report, November 2007

Author: Communicable Disease Surveillance Centre

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Surveillance report on trends in the rates of STI in Wales

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Key points

- This report presents the latest data on the rates of HIV/AIDS and other sexually transmitted infection (STI) in Wales. Most data presented are complete to the end of December 2006. However, data reported from genitourinary medicine (GUM) clinics in Wales on Form KC60 are complete only up to the end of December 2005.
- The prevalence of HIV/AIDS in Wales continues to increase and in 2006 there were 884 Welsh residents receiving treatment for HIV/AIDS (30 per 100 000 population). The increase in prevalence in recent years has been partly due to better survival of those infected with HIV in the past, and the immigration of people into Wales who have acquired their infection overseas. However, there continues to be local transmission of HIV/AIDS, particularly in men who have sex with men (MSM), and this group still makes up a significant proportion of prevalent cases in Wales.
- Women continue to be over-represented in the heterosexual HIV positive population in Wales raising concerns that there are barriers to heterosexual men accessing HIV testing, particularly men in non-white ethnic groups.
- The number of HIV antibody tests carried out by laboratories in Wales continues to increase, with nearly 50 000 tests carried out in 2006 (1.7 tests per 100 population per year). Increases in the number of tests carried out is related to the introduction of antenatal screening for HIV, although there have been increases in other settings also. Between 2002 and 2006 the number of tests carried out in GUM almost doubled.
- One hundred and sixty-four new HIV positives were identified by laboratories in Wales in 2006 and reported to the HPA. Some of these cases will have been previously diagnosed elsewhere in the UK, and following data cleaning the HPA report 149 new cases of HIV infection in Wales in 2006. This is the highest number of new cases in Wales since the start of the epidemic and an increase from the previous year (119 cases).
- Forty eight percent of new HIV diagnoses were in people who probably acquired their infection through heterosexual sex; 36% of cases were in MSM. Route of transmission was not known for a higher proportion of cases in 2006 than in previous years (11%).
- No prospective new blood donors were screened positive for HIV in 2005 or 2006. However, there was one HIV positive blood donation from an existing donor in Wales in 2006 and three positive donations from existing donors in 2005. Blood from donors who are screened positive does not enter the blood supply and these donors are removed from the donor panel and are not called for donation again
- The latest KC60 data from GUM clinics in Wales indicate that the rate of STI is still increasing. Between 2004 and 2005 the number of new cases of anogenital chlamydia, syphilis, herpes and warts diagnosed in GUM clinics in Wales all increased. However, the number of new cases of uncomplicated gonorrhoea decreased slightly.
- The number of cases of infectious syphilis reported to the enhanced syphilis surveillance scheme increased from 49 in 2005 to 73 in 2006. The majority of cases continue to be in men reporting sex with men (MSM). However there has been a steady rise in the proportion of cases heterosexually acquired, from 22% in 2002 to 41% in 2006.

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- In 2005, there was an 11% increase in cases of uncomplicated anogenital chlamydia infection diagnosed in GUM, from 3542 episodes in 2004 to 3942 episodes in 2005. This represents a continuation of the recent trend in increasing rates of diagnoses, partly reflecting increased awareness and testing.
- A significant proportion of chlamydia testing is carried out in general practice. Data from the results of chlamydia laboratory tests on samples submitted from all sources indicate that the number of positive test results stabilised in 2006.
- In 2003 lymphogranuloma venereum (LGV) emerged as a serious infection of MSM in Europe. Five cases were identified in Wales in 2005, clustered in South West Wales. There is evidence that transmission occurred locally in some of these cases, raising the possibility of more widespread distribution in Wales. To date, however, no further cases have been reported from Wales.
- There are still barriers to effective surveillance of STI in Wales. KC60 data are not timely and neither laboratory nor KC60 data can provide data on the incidence of STI in Local Health Board resident populations. Also, voluntary reporting of STI by laboratories in Wales is not complete as some laboratories do not report routinely to the scheme. To address this, the Welsh Assembly Government has sponsored a project to develop and implement timely, person and area-based STI surveillance for Wales. The project is currently being piloted in the Wrexham and Cardiff areas.

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1. Introduction

This report brings together latest data on sexually transmitted infection (STI), including HIV/AIDS, in Wales. The report is based on data available at the time of publication. Please note that recent data may be liable to change.

The report has been prepared by NPHS Communicable Disease Surveillance Centre (CDSC) for the NPHS Sexual Health Programme. Assistance was provided by a small editorial team (Appendix 1). Any comments or queries relating to this report or requests for further information should be directed to:

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Further data may be available from the NPHS (www.nphs.wales.nhs.uk) and Health Protection Agency (www.hpa.co.uk) websites.

2. Suggested citation

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3. Sources of data

- Results of the Health Protection Agency (HPA) **Survey of Prevalent HIV Infections Diagnosed (SOPHID)** Scheme.
- Results of the National Public Health Service for Wales (NPHS) Communicable Disease Surveillance Centre **HIV Denominator Surveillance Scheme**. The results of clinical testing for HIV infection reported by the NPHS Microbiology laboratories at Cardiff, Swansea, Bangor and Rhyl and the NHS laboratories at Hereford and Royal Glamorgan Hospital, Llantrisant and gathered via Microbiology Datastore.
- Clinical reporting of **Newly Diagnosed HIV** to HPA.
- **Results of screening blood donated in Wales** to the Welsh Blood Service and National Blood Service (Merseyside and North Wales)
- **KC60 diagnostic statistics** submitted by departments of genitourinary medicine (GUM) in Wales to NPHS on behalf of the Welsh Assembly Government
- **CoSurv laboratory reports of STI** from all clinical diagnostic laboratories in Wales. These data exclude laboratory reports of *Neisseria gonorrhoea* and anogenital chlamydia from Newport Royal Gwent, and reports of anogenital chlamydia from Wrexham, Bridgend and Abergavenny hospitals. It should be noted that some of the other laboratories also do not report routinely to CoSurv.
- Results of **Enhanced Surveillance of Syphilis in Wales**: Clinical reports of infectious syphilis to NPHS CDSC from GUM clinics
- Results of HPA **Enhanced Surveillance of LGV**.

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4. HIV in Wales

4.1 HIV continues to be one of the most important communicable diseases in the UK. It is an infection associated with serious morbidity, high costs of treatment and care, significant mortality and high number of potential years of life lost. Further information about the epidemiology of HIV/AIDS in Wales is available from the NPHS website

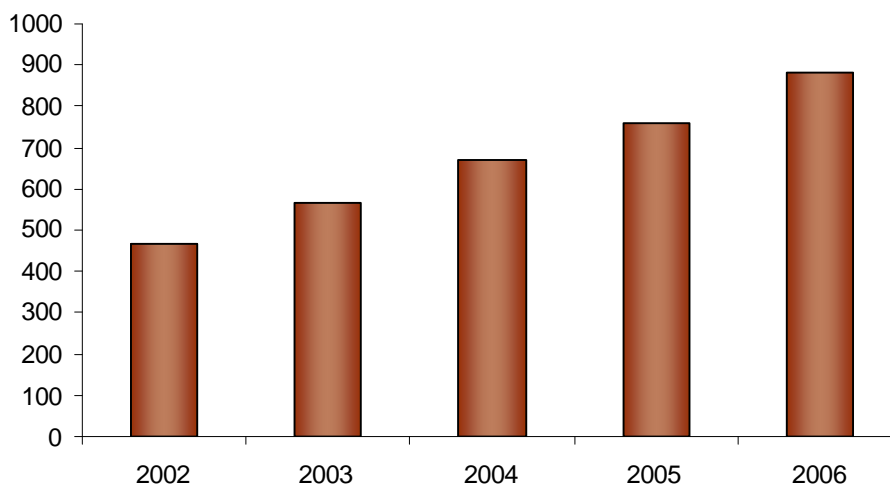
<http://www.wales.nhs.uk/sites3/page.cfm?orgId=457&pid=26424>. Further information on HIV/AIDS in the UK can be obtained from the HPA:
http://www.hpa.org.uk/infections/topics_az/hiv_and_sti/hiv/hiv.htm

4.2 Surveillance of the HIV epidemic in Wales is carried out using: Results of the HPA 'Survey of Prevalent HIV Infections Diagnosed' (SOPHID) Scheme, the results of all clinical testing for HIV infection reported by the NPHS Microbiology laboratories and NHS laboratories at Hereford and Royal Glamorgan Hospital (NPHS CDSC HIV denominator surveillance scheme), newly diagnosed HIV reported to HPA Centre for Infection HIV and STI Department, and results of screening blood donated in Wales to the Welsh Blood Service and National Blood Service (Merseyside and North Wales).

4.3 The best indication of the number of people living with HIV/AIDS in Wales is provided by the HPA SOPHID (Survey of prevalent HIV infection diagnosed) scheme which counts the number of people receiving HIV-related care. These data are used to assess the prevalence of HIV/AIDS by Local Health Board of residence and are useful in the planning and financing of HIV care services.

4.4 SOPHID data show a steady increase in the number of people living with HIV in Wales, from 468 in 2002 to 884 in 2006 (Figure 1). This increase reflects an increase in new diagnoses but also improved survival of cases due to better treatment.

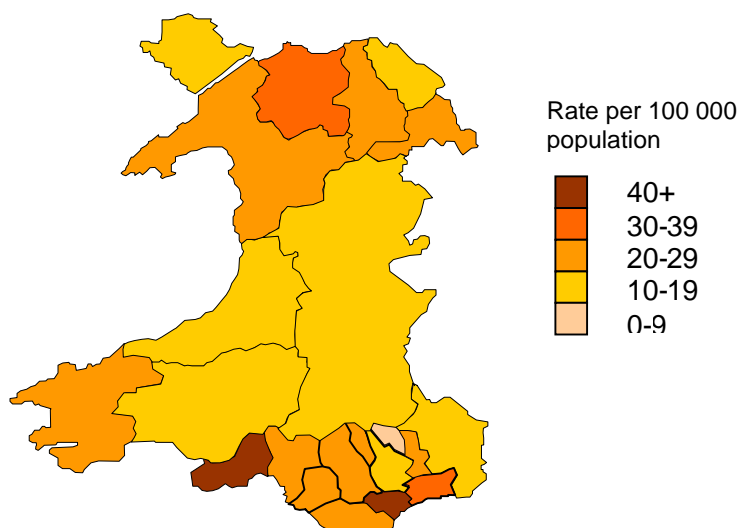
Figure 1. Number of people receiving HIV-related care in Wales, 2002-2006
(Source: SOPHID)



4.5 In 2006, prevalence of HIV/AIDS was highest in the urban centres of South Wales and along the North Wales coast (Figure 2).

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Figure 2. Prevalence of HIV in Wales by Local Health Board of residence. 2006 (Source: SOPHID)



4.6 In 2006 the majority of prevalent cases (40%) were 35 to 44 years old and 340 out of the 884 cases were reported as having an asymptomatic clinical stage of infection (Table 1). Number of cases in those aged 15 to 24 years increased from 43 in 2005 to 53 in 2006.

4.7 The largest group receiving treatment in 2006 was men who probably acquired their infection through sex with men (51%). Nearly all of these men (98%) were of white ethnicity (Table 2). This group increased by 15% from the previous year, from 394 in 2005 to 454 in 2006.

4.8 In recent years there has been an increase in the number of people receiving treatment for HIV who probably acquired their infection through heterosexual sex. From 2005 to 2006 the number increased from 288 to 335 (16% increase); however, the proportion of heterosexual cases out of all HIV positive cases has remained constant (38%).

4.9 Sixty percent of prevalent cases who acquired their infection through heterosexual sex were from a non-White ethnic group, predominantly Black-African (Table 2). The number of prevalent cases reporting their ethnic group as black-African rose from 147 in 2005 to 183 in 2006 (24% increase). Females were over-represented, making up 75% of all Black-Africans receiving care for HIV in 2006 and living in Wales.

4.10 Information on the number of HIV antibody tests carried out in Wales per year is available from the NPHS CDSC HIV denominator scheme. The total number of HIV antibody tests being carried out in Wales has been increasing substantially over recent years, from 20763 in 2002 to 49606 in 2006 (Table 3).

4.11 This increase in testing has been largely due to the introduction of antenatal screening for HIV (Table 4). However the number of tests carried out on samples submitted from other sources have also increased, for example: GUM samples increased from 6351 in 2002 to 11396 in 2006, hospital in-patient samples have increased from 548 to 992 in the same period. Although the number of new positives has increased, the proportion of tests that are positive declined slightly from 0.4% in 2002 to 0.3% in 2006.

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4.12 As in previous years, the greatest numbers of HIV antibody tests in 2006 were carried out on people submitting sera from health facilities in South East Wales (Table 3). However, the testing rate was highest in North Wales at 2099 per 100,000 population, compared with 1604 per 100,000 in South East Wales and 1440 per 100,000 in the Mid and West.

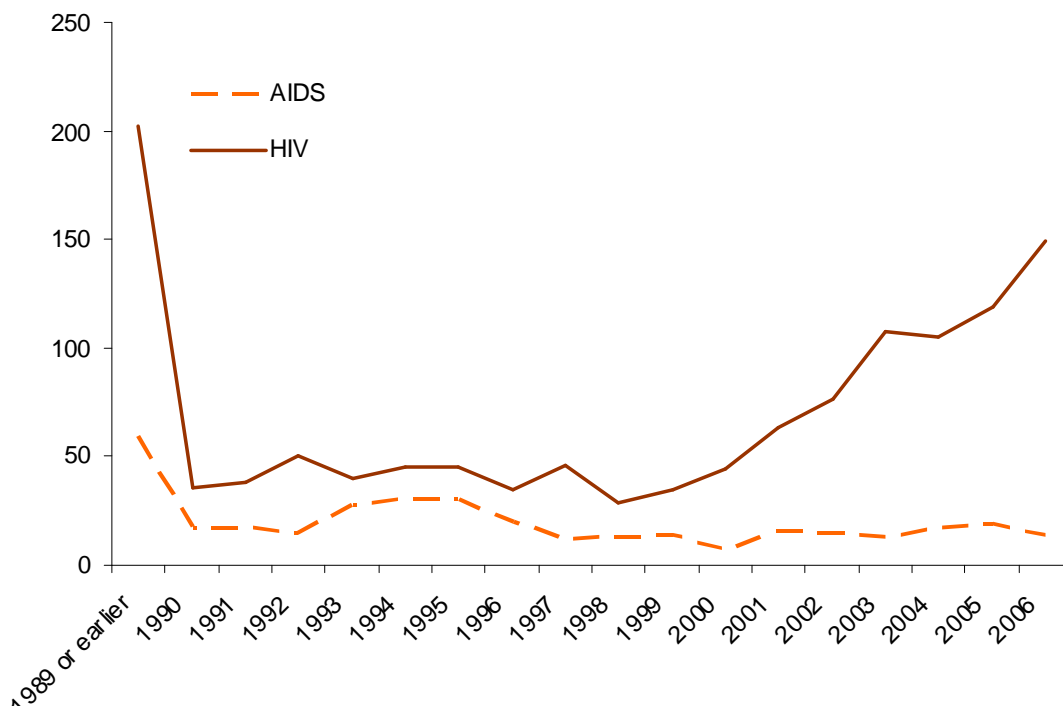
4.13 There has been a dramatic increase both in the number of tests carried out in women (13468 in 2002 to 34377 in 2006) and the number of new diagnoses in women in recent years, from 31 in 2002 to 73 in 2006 (41% to 45% of total new positives) (Table 4).

4.14 Of the 164 new positives identified in 2006, 114 submitted samples through genitourinary services, 25 through hospital in-patient departments, 8 through an ante-natal screening, 6 through their GP, 6 through hospital out-patient departments, 1 through the blood transfusion service and 1 through a fertility clinic. Three were from an undetermined source (Table 4).

4.15 Through the NPHS HIV Denominator Surveillance Scheme, probable route of infection was available for only 69 of the 164 of the newly diagnosed positives in 2006 (Table 5). More detailed information is available from the HPA's surveillance of clinical reporting of newly diagnosed HIV.

4.16 Although 164 new HIV positives were identified by laboratories in Wales in 2006 and reported to the HPA, some of these cases will have been previously diagnosed elsewhere in the UK. Following data cleaning, the HPA reported 149 new cases of HIV infection in Wales in 2006. This was the highest number of new cases in Wales since the start of the epidemic and an increase from the previous year (Figure 3). Fourteen new AIDS cases were reported from Wales in 2006.

Figure 3. Clinical reports of HIV* and AIDS in Wales, 1981–2006 by year of diagnosis

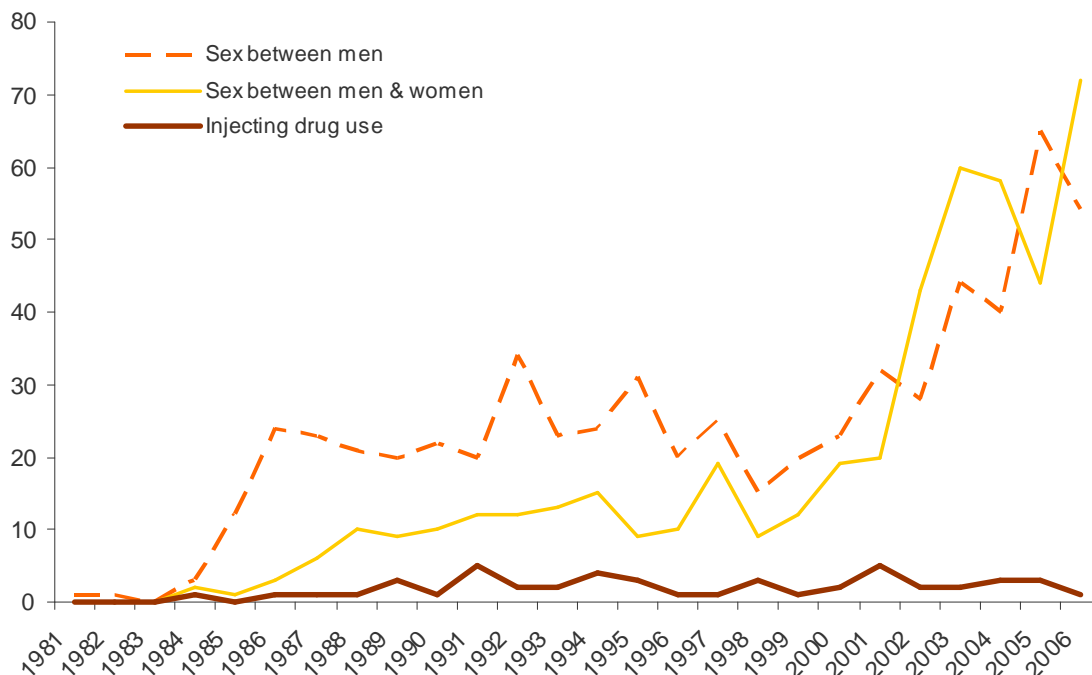


* Individuals with laboratory reports of infection plus those with AIDS or death reports for whom no matching laboratory report has been received

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4.17 During the 1980s and 1990s, newly diagnosed HIV positives were most frequently men who reported sex with other men (MSM). However the number of infections in patients reporting sex between men and women as their most likely source of infection has increased sharply in recent years. In 2005 there was a decrease in the number of new diagnoses of cases probably acquired by heterosexual sex, but in 2006 this number increased from 44 to 72 (37 to 48% of all cases; figure 4). The number of newly diagnosed HIV positives in Wales reporting injecting drug use as their most likely source of infection has remained low at less than 5 cases per year since 2001.

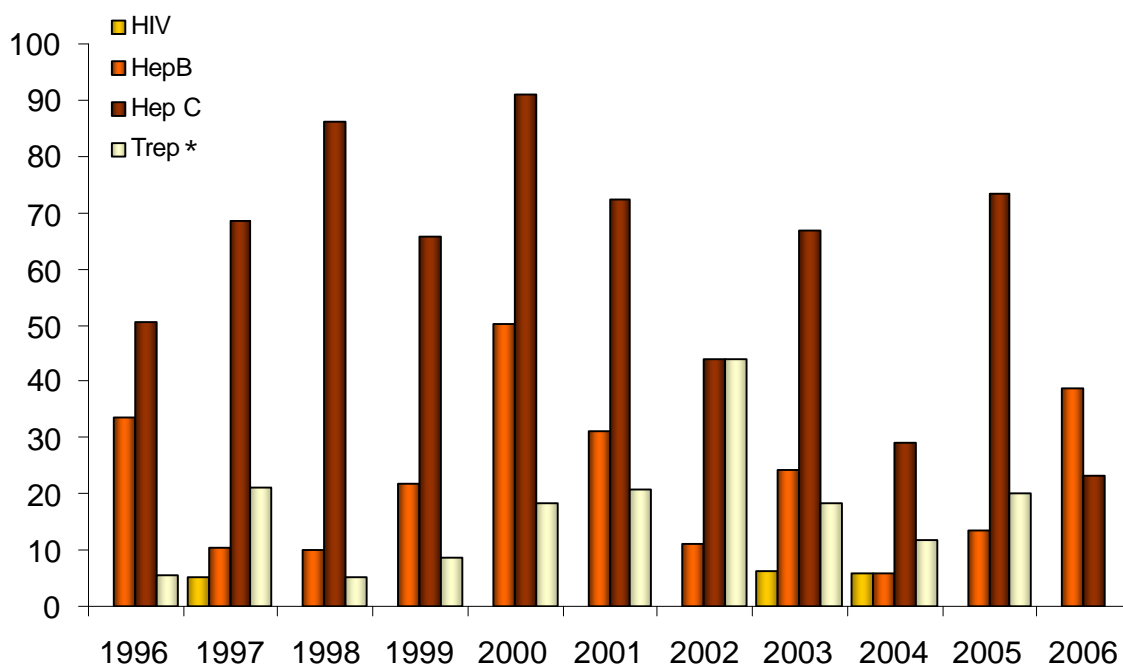
Figure 4. Clinical reports of HIV in Wales for selected exposure categories, 1981–2006, by year of diagnosis



4.18 Blood donations are routinely screened for HIV infection. Blood from donors who are screened positive does not enter the blood supply. Such donors are removed from the donor panel and are not called for donation again.

4.19 There were no prospective new blood donors screened positive for HIV in 2005 or 2006 (Table 6). Since 1997, there have only been two new donors that have screened positive for HIV (one in 2003 and one in 2004) (Figure 5).

Figure 5. Rates (per 100,000 donations per year) of HIV, hepatitis B, hepatitis C and treponemal infection in prospective new blood donors in Wales, 1996-2006



*Trep refers to treponemal infection (most likely syphilis)

4.20 In 2005, there were three existing blood donors who screened positive for HIV and in 2006 there was one positive blood donor (Table 7). The previous time an established donor was screened HIV positive was in 2001.

5. Syphilis in Wales

5.1 Syphilis is caused by *Treponema pallidum* subspecies *pallidum*, a spirochete that is a bacteria-like organism. In the UK, syphilis infection has become more common in recent years, particularly amongst gay men. The condition is especially significant in women in pregnancy where infection can cause miscarriage, still birth, or foetal abnormality. Latest information on the epidemiology of syphilis in the Wales can be obtained from the NPHS website:

<http://www.wales.nhs.uk/sites3/page.cfm?orgId=457&pid=26759>

5.2 In 2005, 43 episodes of primary and secondary infectious syphilis were reported by GUM clinics in Wales on Form KC60. This compares to 39 episodes of primary and secondary infectious syphilis reported by GUM clinics in Wales in 2004, 50 in 2003, 13 in 2002 and 8 in 2001 (Table 8).

5.3 Of the reported episodes in 2005, 39 out of 43 were in men (91%) of whom 20 (51%) acquired their infection homosexually (Table 8). In 2004, 28 of 38 infections in men (74%) were acquired homosexually.

5.4 In 2005, the modal age groups for men were 25-34 (12 cases; 0.83 per 100 000 men) and 45-64 (12 cases; 0.83 per 100 000 men). In females, there were two episodes in patients aged 25-34 and one episode in ages 16-19 and 20-24 (Table 9).

5.5 In 2005 there were also 16 episodes of early latent syphilis, 30 episodes of other acquired syphilis and 5 epidemiological treatments of suspected syphilis (Table 8). 13 of the 16 episodes of early latent syphilis and 21 of the 30 episodes of other acquired syphilis were in males. Ten of the 13 episodes of early latent syphilis and 9 of the 21 episodes of other acquired syphilis in men were acquired homosexually.

5.6 As in 2004 the majority of syphilis episodes in 2005 (16 out of 43) were reported from Cardiff GUM clinic, although Swansea reported 7, Wrexham 4, Bridgend 2 and a number of other clinics throughout Wales reported 1 case each (Table 10). There was an increase of cases in mid and West Wales and North Wales from 5 in 2004 to 19 in 2005, while numbers in South East Wales decreased from 33 to 24.

5.7 An enhanced syphilis surveillance scheme was introduced in Wales in December 2002 (with retrospective data collection from January 2002). This scheme allows more timely surveillance of new cases of infectious syphilis than is available from KC60 surveillance and provides more detailed information on the behavioural characteristics of cases. Data to the end of 2006 are included in this report.

5.8 For the years 2002 to 2006 a total of 255 cases of infectious syphilis (includes KC60 codes A1-A3 and A9) were reported to CDSC through the enhanced surveillance scheme.

5.9 One hundred and fifteen reports were of primary infection, 63 of secondary syphilis, 3 were epidemiological treatment of suspected infection and 62 of early latent infection. The stage of infection was not reported for 12 cases. Late latent and tertiary infections were excluded from the database as they represent historic infection.

5.10 The majority of cases (186) were reported from clinics in South East Wales. 32 cases were reported from clinics in mid and West Wales and 37 from clinics in North Wales (Table 11, Figure 6). Cases in Mid and West Wales were reported from Swansea, Bridgend and Cardigan clinics only.

5.11 Of the 255 cases reported, 178 (70%) were in men reporting sex with men (MSM). However 45 men and 31 women (30% of cases) reported acquiring syphilis through heterosexual sex (Figure 7). This

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represents a rise in the proportion of cases acquired heterosexually; from 22% of all cases in 2002 to 27% in 2005 and 41% in 2006.

5.12 The majority of all cases were white (84%); for cases reporting heterosexual sex as their probable source of infection 32% were from a non-white ethnic group, whereas among homosexual and bisexual men only 4% were of non-white ethnic groups.

5.13 Forty three cases (17%) were known to be HIV positive.

Figure 6. Cases of infectious syphilis reported to NPHS CDSC through the enhanced surveillance scheme by month by region, 2002 to 2006

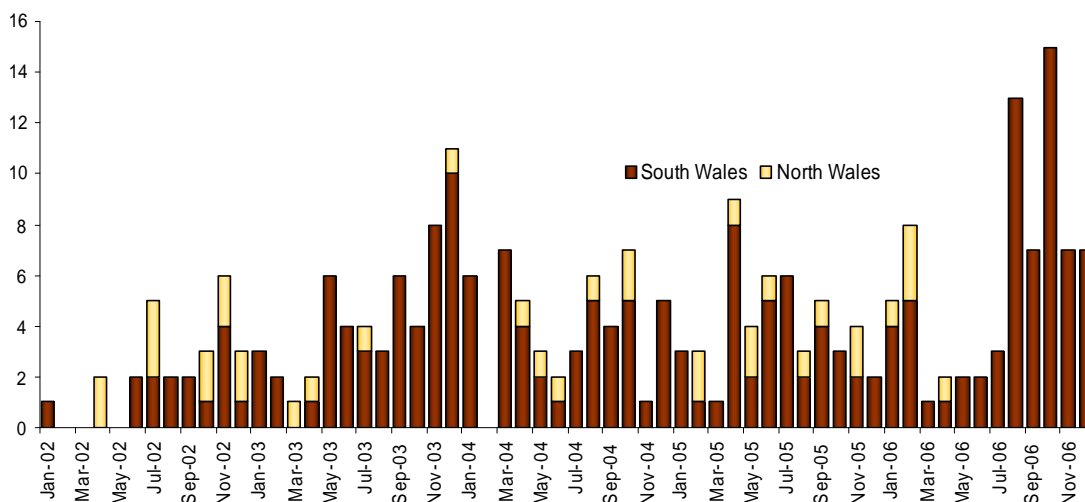
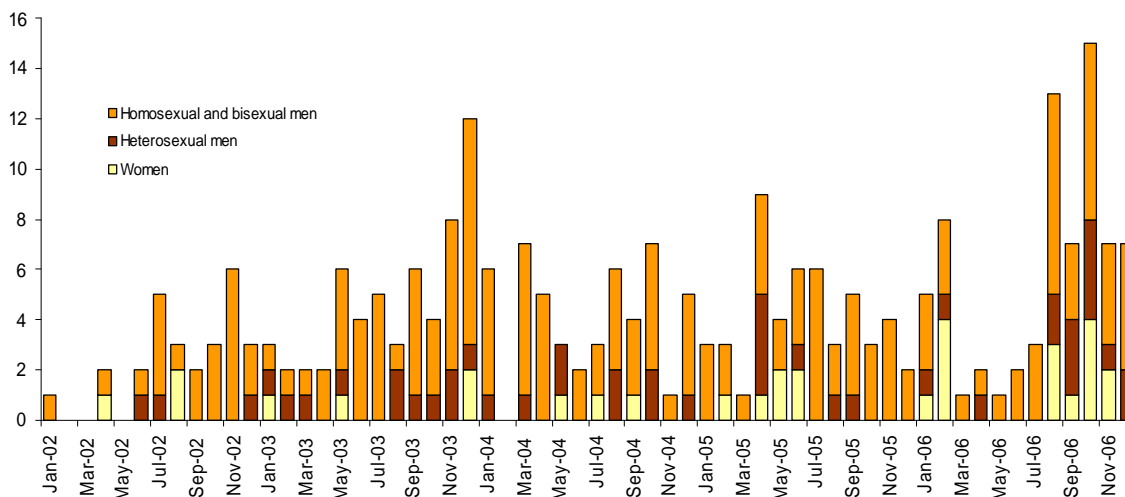


Figure 7. Cases of infectious syphilis reported to NPHS CDSC through the enhanced surveillance scheme by month by sex and sexual orientation, 2002 to 2006



5.14 Antibody to *Treponema pallidum* persists after treatment and recovery from acute syphilis. Blood donors and some hospital patients are tested routinely for antibody to syphilis which, if present, may indicate infection in the past rather than acute disease. Blood donations which have antibody to *T. pallidum* are not transfused.

5.15 No prospective new blood donors were screened positive for treponemal infection in 2006, in contrast to three positives in 2005 (Table 6, Figure 5). However, there were two positive donations from established donors in 2006 (Table 7).

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6. Gonorrhoea

6.1 Gonorrhoea is a sexually acquired infection caused by the bacterium *Neisseria gonorrhoeae*. After genital chlamydia, gonorrhoea is the second most common bacterial sexually transmitted infection in the UK. Further information on the epidemiology of gonorrhoea is available from the NPHS <http://www.wales.nhs.uk/sites3/page.cfm?orgId=457&pid=26781> and HPA website: http://www.hpa.org.uk/infections/topics_az/hiv_and_sti/sti-gonorrhoea/default.htm

6.2 In 2005, there were 533 episodes of uncomplicated gonorrhoea diagnosed in GUM clinics in Wales (18 new cases per 100,000 population). This compares to 35 per 100,000 in England, (26 per 100,000 for clinics outside London). One episode of gonococcal ophthalmia neonatorum and 188 epidemiological treatments of suspected gonorrhoea were reported by GUM clinics in Wales (Table 8).

6.3 The number of cases of uncomplicated gonorrhoea reported by GUM clinics in Wales in 2005 was lower than the previous year (Table 8), and represents a decrease of 21% (Figure 8). However, there has been a general increase in reported cases since 1994, with a slight decrease in cases between 2000 and 2002.

6.4 Eighty seven of the 381 episodes (23%) of uncomplicated gonorrhoea reported in males in 2005 were in men who have sex with men. This compares to 93 (20% of infections in men) in 2004.

6.5 One hundred and twenty five of these episodes of uncomplicated gonorrhoea (65 female; 60 male) were in teenagers (Table 9).

6.6 The clinic in Cardiff reported the highest number of cases of gonorrhoea (223) in 2005 (Table 12). Most clinics reported a slight decrease in cases between 2004 and 2005, apart from Carmarthen (1 in 2004, 4 in 2005) and Cardigan (0 in 2004, 1 in 2005). West Wales General Hospital and Llandudno clinics reported no change.

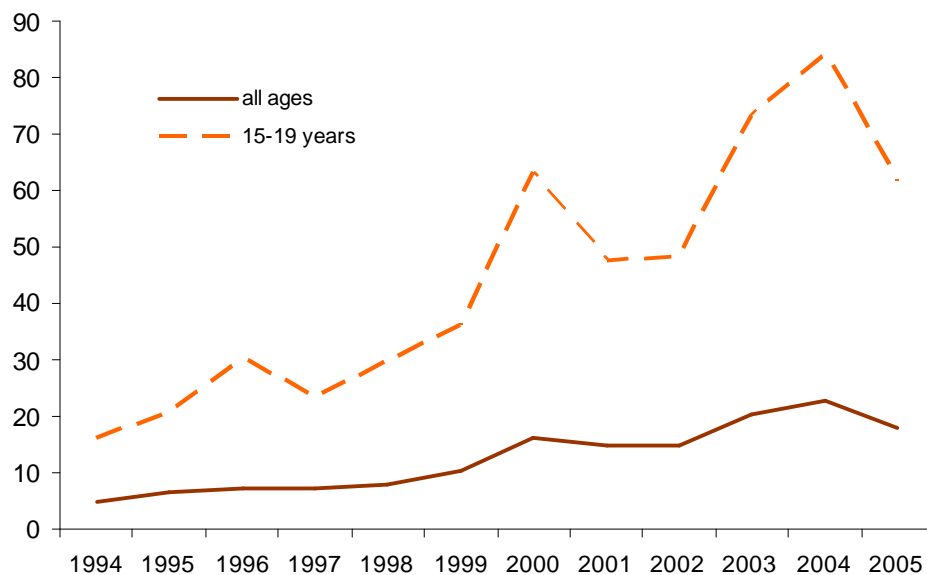
6.7 Gonorrhoea can occasionally cause serious complications. Five reports of gonococcal complications were reported from GUM in 2005 (Table 13), four of which were from South-East Wales (80%).

6.8 In 2006 there were a total of 359 laboratory reports of *Neisseria gonorrhoeae*, but this is likely to be an underestimate of cases in Wales as some laboratories do not report STI routinely via CoSurv. 174 of the 359 reports (48%) were reported by the laboratory in Cardiff (Tables 14).

6.9 As in previous years, in 2006 the rate of laboratory reports of *Neisseria gonorrhoeae* is highest in 15-24 year old males and females (Table 15), at 59 and 43 per 100,000 population respectively.

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Figure 8. Reports of uncomplicated gonorrhoea from GUM clinics in Wales on form KC60 per 100,000 population: teenagers and all ages



7. Genital chlamydia

7.1 Genital *Chlamydia trachomatis* is the most commonly diagnosed bacterial STI in the UK. Highest rates are seen in young people, especially men and women under 24 years. Genital chlamydial infection is an important reproductive health problem, because 10-30% of untreated infected women develop pelvic inflammatory disease (PID). A significant proportion of cases, particularly amongst women, are asymptomatic and so, are liable to remain undetected, putting women at risk of developing PID. For further information see the NPHS website:

<http://www.wales.nhs.uk/sites3/page.cfm?orgId=457&pid=27497> or HPA website:
http://www.hpa.org.uk/infections/topics_az/hiv_and_sti/sti-chlamydia/default.htm.

7.2 In 2005, there were 3942 episodes of uncomplicated chlamydia infection diagnosed in GUM compared to 3542 in 2004 (11% increase). In 2005 there were 124 episodes of complicated chlamydial infection, 3 episodes of chlamydia ophthalmia neonatorum, and 1760 episodes of epidemiological treatment of suspected chlamydia reported by GUM clinics in Wales (Table 8).

7.3 This represents a continuation of the recent trend in increasing rates of diagnoses, partly reflecting increased awareness and improved diagnostic techniques (Figure 9).

7.4 Unlike for HIV, syphilis and, to a lesser extent, gonorrhoea, only a very small proportion of men diagnosed with anogenital chlamydia report acquiring their infection through sex with men, and this appears to have remained steady in recent years. In 2005, 45 of the 3942 cases (1%) of uncomplicated chlamydia were in MSM.

7.5 In 2005, episodes of uncomplicated chlamydia were most frequently reported in 20-24 year old men and 16-19 year old women (Table 9).

7.6 South East Wales and Mid and West Wales regions reported decreases in cases but clinics in North Wales reported a large increase compared to previous years (from 650 in 2003 to 1348 in 2005) (Table 16). This increase may be partly due to the introduction of NAAT testing (nucleic acid amplification tests) in north Wales. In 2005, the GUM clinic in Cardiff reported the highest number of cases of uncomplicated chlamydia infection (1109).

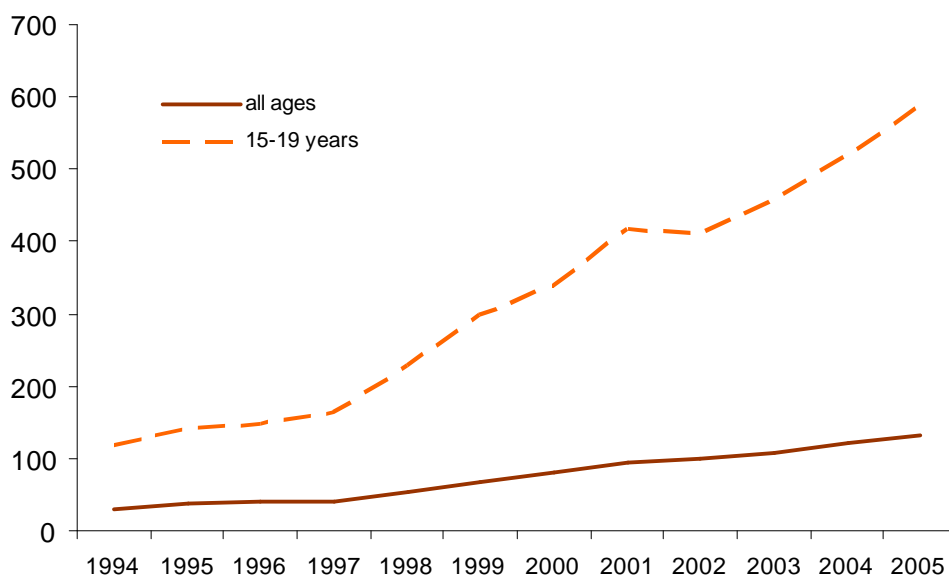
7.7 The number of episodes of complicated chlamydial infection shows a similar trend, with North Wales accounting for the largest increase from 31 in 2004 to 42 in 2005 (Table 17). The largest numbers of cases in 2005 were reported by Cardiff and Newport GUM clinics (25 cases each)

7.8 In 2006 there were a total of 4523 reports of anogenital chlamydia infection received from laboratories in Wales, equivalent to a rate of 153 per 100 000 population (Table 18). This is likely to be an underestimate as laboratories in Llantrisant, Newport and Wrexham do not report cases of STI via CoSurv. Laboratories at Cardiff and Swansea reported the highest number of cases (37% of laboratory reports from Cardiff, 26% from Swansea).

7.10 Rates of laboratory reporting were higher in females and highest in 15-24 year-olds, (Table 15).

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Figure 10. Reports of uncomplicated chlamydia from GUM clinics in Wales on form KC60 per 100,000 population: teenagers and all ages, 2005 data



8. Emergence of LGV

8.1 Lymphogranuloma venereum (LGV) is a sexually transmitted disease caused by a specific type of *Chlamydia trachomatis* (serovars L1, L2, and L3). LGV is highly prevalent in parts of Africa, Asia, and South America but has been rare in Western Europe for many decades. LGV is a chronic disease that has a variety of acute and late manifestations, starting with a small painless blister or sore where the infection entered the body, that might go unnoticed. Inflamed and swollen lymph glands may then appear in the groin (inguinal syndrome) and/or acute hemorrhagic proctitis (anorectal syndrome) develops. If left untreated, the symptoms can become more severe and cause lasting damage to health. More information about LGV is available from the HPA website:

http://www.hpa.org.uk/infections/topics_az/hiv_and_sti/LGV/general.htm.

8.2 Since 2003 a series of outbreaks of LGV have been reported in European cities among men who have sex with men (MSM). All current European outbreaks are of the L2 genotype. Most cases present with proctitis, are of white ethnicity, and are HIV-positive.

8.3 High levels of concurrent STI (gonorrhoea, syphilis, Hepatitis B virus, and genital herpes) are also seen. Transmission of Hepatitis C virus has been associated with the LGV outbreak in Rotterdam, Netherlands. Contact tracing has been of limited use as most cases report multiple sexual contacts, mostly anonymous. So far there is no indication that LGV has spread outside this specific sub-group.

8.4 In October 2004 the HPA launched an enhanced surveillance scheme for LGV to improve case ascertainment and awareness in the UK. By the end of 2006, 418 cases had been reported to the scheme. For further information about the surveillance scheme including guidelines for referral of specimens, see: http://www.hpa.org.uk/infections/topics_az/hiv_and_sti/LGV/enhanced_surv.htm.

8.5 A cluster of 5 cases of LGV were reported in MSM attending Swansea GUM in 2005. Three cases were laboratory confirmed and reported to HPA enhanced surveillance, the other two cases were diagnosed clinically. To date, no further cases have been reported from Wales.

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9. Other infections

9.1 Anogenital warts are usually small flat warts or growths found on or around the penis, anus or vagina. They are caused by the human papillomavirus (HPV). Warts are the most common viral STI diagnosed in the UK, with highest rates of new cases in 20-24 year old men and 16-19 year old women.

Certain HPV types have been associated with cervical cancer. Although these are different types to those that cause warts it is possible that the distribution of anogenital warts may reflect the distribution of other oncogenic types of HPV. Further details about the epidemiology of HPV in the UK can be found at the HPA website: http://www.hpa.org.uk/infections/topics_az/hiv_and_sti/sti-warts/default.htm

9.2 The number of new episodes of anogenital warts continues to increase steadily. In 2005, there were 3743 episodes of anogenital warts - first attack reported by GUM clinics in Wales (Table 8) compared to 3501 episodes reported in 2004.

9.3 In Wales, episodes were most frequently reported in 20-24 year old males and females in 2005 (Table 9).

9.4 The clinic in Cardiff reported the highest number of cases of anogenital warts – first attack in 2005 (888) (Table 19).

9.5 Genital herpes simplex virus (HSV) infection is the most common ulcerative sexually transmitted disease in the UK. It is associated with considerable physical and psychological morbidity and may frequently recur. It can cause severe systemic disease in neonates and immunosuppressed hosts and may facilitate HIV transmission. Many HSV infections are sub-clinical. There are two distinct subtypes of HSV. Type 2 is almost exclusively associated with genital infection. Type 1 causes oral herpes (or cold sores) but has increasingly been implicated in genital infections. In England and Wales, HSV-2 antibody prevalence is about 3% in men and 5% in women. See the HPA website for more information: http://www.hpa.org.uk/infections/topics_az/hiv_and_sti/sti-herpes/default.htm

9.6 In 2005, there were 642 episodes of anogenital herpes simplex - first attack reported by GUM clinics in Wales (Table 8) compared to 618 episodes reported in 2004.

9.7 In 2005, episodes were most frequently reported in 20-24 year old males and 16-19 year old females (Tables 9).

9.8 In 2005, the clinic in Cardiff reported the highest number of cases of anogenital herpes simplex – first attack (177) (Table 19).

9.9 Hepatitis B and hepatitis C are blood borne viruses that can also be transmitted sexually. Detailed information on the epidemiology of hepatitis B and C are available at: <http://www.wales.nhs.uk/sites3/page.cfm?orgid=457&pid=25438> and <http://www.wales.nhs.uk/sites3/page.cfm?orgid=457&pid=25496>. Information on the 'Viral Hepatitis Action Plan for Wales' is available at: <http://www.wales.nhs.uk/sites3/page.cfm?orgid=457&pid=25483>

9.10 In 2005 there were 19 new diagnoses of hepatitis B and 47 new diagnoses of hepatitis C in GUM clinics in Wales (Table 8). Clinics administered 514 hepatitis B vaccinations (first dose only), including 192 to MSM.

9.11 Blood donations are routinely screened for hepatitis B and hepatitis C infection. Blood from donors who are screened positive does not enter the blood supply.

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9.12 During recent years Hepatitis C has been more prevalent than hepatitis B, HIV or syphilis in prospective Welsh blood donors (Figure 5); however, in 2006 there were 5 donations from prospective new donors positive for Hepatitis B and 3 for Hepatitis C (Table 6).

9.13 One established blood donor was screened positive for hepatitis B in 2006 compared with 1 in 2005 and 2 in 2004 (Table 7).

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Appendix 1

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NPHS Communicable Disease Surveillance Centre

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Table 1. Numbers of diagnosed HIV-infected patients resident in Wales by most advanced clinical stage, gender and age group when last seen for care in 2006*. Source: SOPHID scheme, HPA Centre for Infections.

Age group	<i>Clinical Stage of Infection</i>												<i>Total</i>	
	<i>Asymptomatic</i>		<i>Symptomatic pre-AIDS</i>		<i>AIDS</i>		<i>Death in 2006 in a patient with AIDS</i>		<i>Death in 2005 in a patient without AIDS</i>		<i>Not known</i>			
	<i>M</i>	<i>F</i>	<i>M</i>	<i>F</i>	<i>M</i>	<i>F</i>	<i>M</i>	<i>F</i>	<i>M</i>	<i>F</i>	<i>M</i>	<i>F</i>		
0-14	3	4	3	2	4	2	0	0	0	0	0	0	0	18
15-24	22	15	7	7	0	2	0	0	0	0	0	0	0	53
25-34	60	36	39	30	14	14	1	2	0	0	0	0	0	196
35-44	96	26	106	35	63	24	1	0	2	0	0	1	0	354
45-54	50	6	59	14	41	4	0	1	2	0	1	0	0	178
55+	17	5	31	4	22	5	0	0	1	0	0	0	0	85
Age not known	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Total	248	92	245	92	144	51	2	3	5	0	1	1	884	

Footnotes

* Patients with diagnosed HIV infection seen for statutory medical HIV-related care in 2006. This excludes infants born to HIV-infected women in the survey year but who were uninfected or whose infection status was indeterminate. At least 98% of indeterminate infants will subsequently be confirmed as uninfected.

Table 2. Numbers of diagnosed HIV-infected patients resident in Wales and seen for care in 2006* by ethnicity by sex by probable route of infection. Source: SOPHID scheme, HPA Centre for Infections.

Probable route of infection	Ethnicity																Total	
	White		Black – Caribbean		Black – African		Black – Other		Indian/Pakistani/Bangladeshi		Other/Mixed		Other – Asian/Oriental		Not Known			
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F		
Sex between men	446	0	2	0	0	0	0	0	0	0	0	5	0	1	0	0	0	454
Sex between men & women	67	68	2	1	41	129	0	0	1	4	6	4	0	12	0	0	0	335
Mother-to-child transmission	4	2	0	0	5	5	0	0	0	0	4	3	0	0	0	0	1	24
Other/Not known**	54	5	0	0	0	3	0	0	2	0	4	1	0	0	1	1	1	71
Total	571	75	4	1	46	137	0	0	3	4	19	8	1	12	1	2	884	

Footnotes

*Patients with diagnosed HIV infection seen for statutory medical HIV-related care in 2006. This excludes infants born to HIV-infected women in the survey year but who were uninfected or whose infection status was indeterminate. At least 98% of indeterminate infants will subsequently be confirmed as uninfected.

**Includes injecting drug use and blood/blood products recipient

Table 3. Number of people tested for HIV antibodies and number of people newly diagnosed HIV positive* in Wales 2002-2006 by region from which sera was submitted: NPHS CDSC HIV denominator scheme

Region (from which sera was submitted)	2002			2003			2004			2005			2006		
	total tested	new positives	(%)	total tested	new positives	(%)	total tested	new positives	(%)	total tested	new positives	(%)	total tested	new positives	(%)
Mid & West	4882	17	0.3	8218	14	0.2	9299	24	0.3	12058	24	0.2	14370	54	0.4
South & East	12074	46	0.4	14668	57	0.4	13730	61	0.4	20220	75	0.4	20620	86	0.4
North Wales	3744	13	0.3	4924	20	0.4	7670	15	0.2	8964	22	0.2	14173	24	0.2
Not known/ outside Wales	63	0	0.0	598	8	1.3	142	1	0.7	402	0	0.0	443	0	0.0
TOTAL	20763	76	0.4	28408	99	0.3	30841	101	0.3	41644	121	0.3	49606	164	0.3

*Data excludes patients previously tested positive for HIV in the UK

Table 4. Number of patients tested for HIV antibodies and number newly diagnosed positive* in Wales 2002-2006 by sex by facility of source sample: NPHS CDSC HIV denominator scheme

Facility	2002			2003			2004			2005			2006		
	Total tested (new positives)			Total tested (new positives)			Total tested (new positives)			Total tested (new positives)			Total tested (new positives)		
	Male	Female	Not known	Male	Female	Not known	Male	Female	Not known	Male	Female	Not known	Male	Female	Not known
GUM/STD clinic	3504 (27)	2829 (18)	18	3482 (31)	2882 (29)	22	4971 (39)	4116 (19)	72 (2)	6108 (54)	5070 (19)	206	6151 (72)	5218 (41)	27 (1)
GP	399 (2)	383	14	472 (1)	1211	57	497 (2)	1283 (1)	65	645 (2)	654	27	1720 (3)	3437 (3)	65
Hospital in patient	304 (7)	241 (4)	3	407 (6)	289 (3)	4	492 (7)	454 (2)	10	508	354 (1)	1	477 (9)	508 (16)	7
Hospital out patient	367 (3)	272 (5)	16 (1)	405 (2)	323	20	356 (2)	329 (1)	14	397 (1)	298 (1)	23	455 (4)	444 (2)	13
Casualty	12	7	0	11	3	0	14 (1)	3	1	27	15	0	17	8	0
Haemophilia centre	51	20	0	31	24	0	37	27	0	31	25	0	36	24	0
Blood transfusion service	96	97	0	78	78	1	79	77 (1)	2	99 (3)	102	0	54	75 (1)	1
Prison service	20	0	4	17	0	2	25	0	1	31	0	1	107	1	0
Ante-natal screen	0	5273 (2)	0	0	7901 (2)	0	0	6253 (2)	22	0	10270 (3)	0	0	12006 (8)	0
Drugs team	36	20	1	13	6	0	48	24	0	85	37	0	77	31	0
Renal unit	675	487	3	587	393	1	624	423	1	1592	1095	3	1767	1242	1
Bone bank	0	0	0	0	0	0	0	0	0	49 (1)	71	0	21	45	0
Forensic/post mortem	1	1	0	0	0	0	2	1	0	2	0	0	0	1	0
Fertility clinic	544	607	15	647	680	3	655	712	1	852	811	3	954	926 (1)	4
Private clinic	0	0	0	1	0	0	0	0	0	4	0	0	4	6	0
Other/undetermined	1047 (5)	3231 (2)	165	1282 (15)	6614 (10)	461	1343 (12)	7124 (10)	683	2016 (27)	9638 (9)	494	2819 (2)	10405 (1)	452
TOTAL	7056 (44)	13468 (31)	239 (1)	7433 (55)	20404 (44)	571	9154 (63)	20815 (36)	872 (2)	12446 (88)	28440 (33)	758	14659 (90)	34377 (73)	570 (1)

*Data excludes patients previously tested positive for HIV in the UK

Table 5. Number of people newly diagnosed HIV positive* in Wales 2002-2006 by sex and exposure category: NPHS CDSC HIV denominator scheme

Exposure group	2002			2003			2004			2005			2006		
	Total new positives			Total new positives			Total new positives			Total new positives			Total new positives		
	Male	Female	Not Known	Male	Female	Not Known	Male	Female	Not Known	Male	Female	Not Known	Male	Female	Not Known
Homosexual/bisexual men	24	-	-	24	-	-	22	-	-	38	-	-	34	-	-
Heterosexual: "high risk" partner**	0	2	0	0	1	0	0	0	0	0	0	0	3	5	0
Heterosexual: partner overseas	8	23	0	12	22	0	9	13	1	4	15	0	6	14	0
Heterosexual: partner UK	1	1	0	4	2	0	0	1	0	0	0	0	0	2	0
Intravenous drug abuse (IVDA)	2	1	0	0	0	0	4	0	0	2	1	0	1	0	0
IVDA and homosexual	0	-	-	0	-	-	0	-	-	0	-	-	1	-	-
Blood factor (Haemophiliacs)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Blood/tissue transfer (e.g. transfusion) overseas/UK	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
NSI/occupational exposure/bite/tattoo	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Mother to infant	0	0	0	0	1	0	1	1	0	0	0	0	0	3	0
Other multiple exposures	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Not known	9	4	1	15	18	0	27	21	1	44	17	0	45	49	1
Total	44	31	1	55	44	0	63	36	2	88	33	0	90	73	1

*Data excludes patients previously tested positive for HIV in the UK

**IDU, bisexual man or known HIV positive partner

Table 6. The number of blood donations from prospective new donors by area* of donation and number positive for HIV, Hepatitis B, Hepatitis C and treponemal infection 2002-2006**

Old Health Authority area	2002				2003				2004				2005				2006								
	No. Bled	Donations positive for:				No. Bled	Donations positive for:				No. Bled	Donations positive for:				No. Bled	Donations positive for:				No. Bled	Donations positive for:			
		HIV	HepB	HepC	Trep		HIV	HepB	HepC	Trep		HIV	HepB	HepC	Trep		HIV	HepB	HepC	Trep		HIV	HepB	HepC	Trep
East Dyfed	1500	0	0	0	0	1497	0	0	0	0	1518	0	0	0	0	1399	0	1	1	0	1308	0	0	0	0
Pembroke	660	0	0	0	0	569	0	0	1	0	641	0	0	0	0	582	0	0	1	0	469	0	0	0	0
Gwent	2339	0	0	2	1	2088	0	1	2	1	2159	0	0	1	0	1911	0	0	1	1	1656	0	0	1	0
Powys (south)	685	0	0	0	0	694	0	0	1	0	685	1	0	0	0	639	0	0	1	0	460	0	2	0	0
Mid Glamorgan	2555	0	0	1	0	2158	1	0	0	1	2386	0	2	3	0	2027	0	0	3	2	1660	0	1	0	0
South Glamorgan	3894	0	2	0	4	3577	0	3	3	1	4117	0	0	0	1	3506	0	1	2	0	3054	0	2	1	0
West Glamorgan	1915	0	0	3	1	1868	0	0	3	0	1820	0	0	1	0	1720	0	0	2	0	1702	0	0	1	0
North Wales (Gwynedd N, Clwyd)	4588	0	0	2	1	4034	0	0	2	0	3809	0	1	0	1	3216	0	0	0	0	2574	0	0	0	0
Total	18136	0	2	8	7	16485	1	4	12	3	17135	1	3	5	2	15000	0	2	11	3	12883	0	5	3	0

*Aggregate data provided by historic health authority areas

**Data for years 2002-2005 amended following notification of changes from Welsh Blood Service

Table 7. The number of blood donations from existing donors by area* of donation and number positive for HIV, Hepatitis B, Hepatitis C and treponemal infection 2002-2006**

Old Health Authority area	2002				2003				2004				2005				2006								
	No. Bled	Donations positive for:				No. Bled	Donations positive for:				No. Bled	Donations positive for:				No. Bled	Donations positive for:								
		HIV	HepB	HepC	Trep		HIV	HepB	HepC	Trep		HIV	HepB	HepC	Trep		HIV	HepB	HepC	Trep					
East Dyfed	10438	0	0	0	0	10761	0	0	0	0	10876	0	0	0	0	10059	0	0	0	0	9830	0	0	0	0
Pembroke	6374	0	0	0	0	6515	0	0	0	0	6340	0	0	0	0	5651	0	0	0	0	5350	0	0	0	0
Gwent	20711	0	0	0	0	20017	0	0	0	1	20186	0	0	0	1	18164	0	0	1	0	17597	0	0	0	0
Powys (south)	5301	0	0	0	0	5304	0	0	0	0	5347	0	0	0	0	5060	0	0	0	0	4792	0	0	0	0
Mid Glamorgan	23554	0	0	1	0	24011	0	0	0	0	21889	0	0	0	0	20471	1	0	0	0	19111	0	1	1	1
South Glamorgan	24007	0	1	1	0	24286	0	0	0	0	25824	0	1	1	3	24442	2	0	0	0	23380	1	0	0	1
West Glamorgan	15090	0	0	1	0	15206	0	1	0	0	14647	0	0	0	1	14486	0	0	1	0	13551	0	0	0	0
North Wales (Gwynedd N, Clwyd)	30184	0	0	0	1	30586	0	0	0	0	27005	0	1	0	0	24556	0	1	0	0	23260	0	0	0	0
Total	135659	0	1	3	1	136686	0	1	0	1	132114	0	2	1	5	122889	3	1	2	0	116871	1	1	1	2

*Aggregate data provided by historic health authority areas

**Data for years 2002-2004 amended following notification of changes from Welsh Blood Service

Table 8a. Episodes of sexually transmitted infection reported by Genito-urinary clinics in Wales (Form KC60), 2001-2005

Old code	Old condition/episode (1995-2002)	New code	New condition/episode (2003 onwards)	2001			2002			2003			2004			2005		
				Males	MSM*	Females	Males	MSM	Females	Males	MSM	Females	Males	MSM	Females	Males	MSM	Females
A1,A2	Primary and secondary infectious syphilis	A1,A2	Unchanged	6	3	2	13	10	0	47	29	3	38	28	1	39	20	4
A3	Early latent syphilis	A3	Unchanged	3	0	0	15	5	2	12	3	2	18	11	2	13	10	3
A4,A5,A6	Other acquired syphilis	A4,A5,A6	Unchanged	16	0	6	22	5	12	13	3	6	24	7	11	21	9	9
A7	Congenital syphilis, aged under 2 years	A7	Unchanged	0		0	0		0		0	1		0	0		0	
A8	Congenital syphilis, aged 2 or over	A8	Unchanged	0		0	2		0		0	0		1	0		0	
A9	Epidemiological treatment of suspected syphilis	A9	Unchanged	0	0	0	2	0	2	1	1	1	6	5	1	5	1	0
B1,B2	Uncomplicated gonorrhoea	B1,B2	Unchanged	300	74	131	300	58	138	404	74	189	457	93	220	381	87	152
B3	Gonococcal ophthalmia neonatorum	B3	Unchanged	0		0	0		1	1		0		0	1		0	
B4	Epidemiological treatment of suspected gonorrhoea	B4	Unchanged	77	19	60	62	12	91	82	19	92	111	20	96	103	20	85
B5	Gonococcal complications	B5	Complicated gonococcal infection - including PID and epididymitis	3	0	4	2	0	4	4	0	6	3	0	6	2	0	3
C1-3	Chancroid/ Donovanosis/ LGV	C1-3	Unchanged	0		0	1		1	1		3	0		1	2		1
C4a,C4c	Uncomplicated chlamydial infection	C4a,C4c	Unchanged	1124	34	1643	1179	33	1716	1359	44	1769	1622	38	1920	1903	45	2039
C4b	Complicated chlamydial infection	C4b	Complicated chlamydial infection - including PID and epididymitis	22	0	113	18	1	98	30	0	98	25	2	106	25	2	99
C4d	Chlamydia ophthalmia neonatorum	C4d	Unchanged	0		0	1		0	1		0		0	2		1	
C4e	Epidemiological treatment of suspected chlamydia	C4e	Unchanged	793	66	424	898	39	550	843	44	535	1038	60	719	1042	64	718
C4h	Uncomplicated non-gonococcal/non-specific urethritis in males	C4h	Uncomplicated non-gonococcal/non-specific urethritis in males or treatment of mucopurulent cervicitis in females	1627	57		1766	91		2027	89	159	2354	85	286	2391	79	397
C4i	Epidemiological treatment of NSGI	C4i	Unchanged	172	10	774	159	15	703	194	13	679	189	14	679	188	11	598
C5	Complicated non-gonococcal/non-specific infection	C5	Complicated infection(non-chlamydial/non-gonococcal) - including PID and epididymitis	86	1	317	77	2	276	78	2	352	105	2	403	119	4	394
C6a	Trichomoniasis	C6a	Unchanged	12		82	2		62	2		46	2		52	6		72
C6b	Anaerobic/bacterial vaginosis and male infection	C6b	Anaerobic / bacterial vaginosis and anaerobic balanitis	21		1810	33		2042	45		2242	65		2639	79		2873

Table 8b. Episodes of sexually transmitted infection reported by Genito-urinary clinics in Wales (Form KC60), 2001-2005

Old code	Old condition/episode (1995-2002)	New code	New condition/episode (2003 onwards)	2001			2002			2003			2004			2005		
				Males	MSM*	Females	Males	MSM	Females	Males	MSM	Females	Males	MSM	Females	Males	MSM	Females
C6c	Other vaginosis/vaginitis/balanitis	C6c	Unchanged	581		237	495		140	591		141	672		139	706		144
C7a	Anogenital candidosis	C7a	Unchanged	299		1947	237		1974	249		1972	262		2322	400		2629
C7b	Epidemiological treatment of C6 and C7	C7b	Unchanged	24		23	83		58	62		51	64		63	61		67
C8-9	Scabies/Pediculosis pubis	C8-9	Unchanged	115	18	24	82	13	28	69	11	11	74	14	9	80	21	7
C10a	Anogenital herpes simplex - first attack	C10a	Unchanged	202	10	340	216	10	398	209	5	401	207	9	411	225	6	417
C10b	Anogenital herpes simplex - recurrence	C10b	Unchanged	147	10	161	157	10	200	159	4	207	180	8	201	201	10	207
C11a	Anogenital warts - first attack	C11a	Unchanged	1744	49	1594	1740	55	1513	1748	57	1632	1871	65	1630	1949	63	1794
C11b	Anogenital warts - recurrence	C11b	Unchanged	1041	21	545	974	30	544	960	26	461	976	28	562	913	33	540
C11c	Anogenital warts - reregistered cases	C11c	Unchanged	366		309	321		243	368		309	414		338	351		313
C12	Molluscum contagiosum	C12	Unchanged	150	2	95	158	2	85	171	4	120	229	4	151	247	7	146
C13	Antigen positive hepatitis B	C13A	Viral hepatitis B (HbsAg positive): first diagnosis**	16	2	5	17	5	12	12	2	5	20	4	2	15	1	4
		C13B	**number of which were acute viral hepatitis B							1	0	1	0	0	0	2	0	4
		C13C	Viral hepatitis B: subsequent presentation							3	0	1	2	0	1	3	1	22
C14	Other viral hepatitis	C14	Viral hepatitis C: first diagnosis	34	1	16	51	5	18	45	0	28	39	2	20	34	1	13
D2a	Urinary tract infection	D2a	Unchanged	17		94	17		100	30		115	37		169	43		138
D2b	Other conditions requiring treatment at GUM clinic	D2b	Unchanged	1013		654	1078		900	1169		1084	1358		1202	1452		1237
D3	Other episodes not requiring treatment	D3	Unchanged	3301		2990	3834		3362	3841		3201	4735		4034	5492		4467
E1a	Asymptomatic HIV infection - first presentation	E1a	New HIV diagnosis: asymptomatic	28	13	15	26	18	13	31	18	24	43	22	15	49	27	14
E2a	HIV infection with symptoms, not AIDS, first presentation	E2a	New HIV diagnosis: symptomatic (not AIDS)	34	24	6	23	18	12	18	7	13	17	6	6	15	12	6
E1b	Asymptomatic HIV infection - subsequent presentation	E1B,E2B	Subsequent HIV presentation (not AIDS)	148		34	150		53	190		68	347		128	686		232
E2b	HIV infection with symptoms, not AIDS, subsequent presentation			265		48	263		56									
E3a	AIDS - first presentation	E3A1	AIDS: first presentation - new HIV diagnosis	16	7	1	20	14	9	4	2	2	5	1	2	3	0	0
		E3A2	AIDS: first presentation - HIV diagnosed previously							0	0	0	0	0	2	0	0	0
E3b	AIDS - subsequent presentation	E3b	AIDS - subsequent presentation	198	0	44	213	0	51	125		37	166		45	174		41

Table 8c. Episodes of sexually transmitted infection reported by Genito-urinary clinics in Wales (Form KC60), 2001-2005

Old code	Old condition/episode (1995-2002)	New code	New condition/episode (2003 onwards)	2001			2002			2003			2004			2005		
				Males	MSM*	Females	Males	MSM	Females	Males	MSM	Females	Males	MSM	Females	Males	MSM	Females
P1a	HIV antibody counselling - with testing	P1a	HIV antibody test (no sexual health screen)	2466	356	1833	3578	527	2886	1056	225	612	830	106	551	969	135	604
P1b	HIV antibody counselling - without testing	P1b	HIV antibody test offered and refused	567	55	512	2179	164	2142	3401	169	3179	4455	136	4276	4784	131	4432
P2	Hepatitis B vaccination	P2	Hepatitis B vaccination (1st dose only)	295	139	60	388	217	80	312	160	107	370	188	138	376	192	138
P3	Family Planning	P3	Contraception (excluding condom provision)	30		277	113		398			198			291			367
P4a	Cervical Cytology - minor abnormality	P4a	Unchanged			84			86			69			81			91
P4b	Cervical Cytology - major abnormality	P4b	Unchanged			8			13			11			7			15
				Services provided														
No old code		S1	Sexual health screen (no HIV antibody test)							6399	191	6367	7295	163	7252	7018	143	7088
No old code		S2	HIV antibody test and sexual health screen							3075	330	2964	3962	371	3608	5793	538	5186
Total initial contacts				15194	940	16178	18933	1323	19948	29443	1529	29583	34676	1478	34711	38363	1669	38262

* MSM = Men having sex with men, recorded on the KC60 form as homosexually acquired. Information on whether homosexually acquired not collected for all conditions

Table 9. Episodes of sexually transmitted infection reported by Genito-urinary clinics in Wales (form KC60), 2005

Code	Condition	Sex	Under 15	15	16-19	20-24	25-34	35-44	45-64	65 and over	Age unknown	All ages
A1,A2	Primary and secondary infectious syphilis	M	0	0	2	3	12	10	12	0	0	39
		F	0	0	1	1	2	0	0	0	0	4
B1,B2	Uncomplicated gonorrhoea	M	1	1	58	127	96	55	38	4	1	381
		F	1	2	62	49	28	4	6	0	0	152
B1,B2	Uncomplicated gonorrhoea - homosexually acquired	M	0	0	8	24	26	15	13	0	1	87
		F										
C4a,C4c	Uncomplicated chlamydial infection	M	1	4	330	831	554	123	50	6	4	1903
		F	1	23	815	802	318	64	16	0	0	2039
C10a	Anogenital herpes simplex - first attack	M	0	1	20	72	65	41	25	1	0	225
		F	5	11	122	117	98	34	28	1	1	417
C11a	Anogenital warts - first attack	M	0	1	241	772	577	246	106	6	0	1949
		F	10	29	589	605	367	131	59	4	0	1794

Table 10. Episodes of primary and secondary infectious syphilis (and number homosexually acquired) per year by GUM clinic and region of GUM clinic: KC60 data, 2001-2005

Region	Clinic	2001	2002	2003	2004	2005
South & East	Aberdare	0	0	0	0	1
	Cardiff	0	8 (6)	32 (26)	25 (21)	16 (13)
	Llantrisant	1 (0)	0	1 (0)	3 (0)	2
	Newport	0	0	4 (0)	6 (5)	5
	Total	1 (0)	8 (6)	37 (26)	33 (26)	24 (13)
Mid & West	Bridgend	0	0	0	0	2 (1)
	Port Talbot	0	0	1 (1)	0	0
	Swansea	0	0	4 (0)	2 (0)	7 (4)
	Aberystwyth	1 (0)	0	0	1 (1)	0
	Builth Wells*	-	-	0	0	0
	Cardigan**	-	-	-	0	0
	Lampeter***	-	-	-	0	0
	Newtown [§]	-	-	-	0	0
	Carmarthen	-	-	0	0	0
	Pond Street ^{§§}	-	-	0	0	0
	West Wales General Hospital	0	0	0	0	1 (1)
	Llanelli	-	-	0	0	0
	Haverfordwest	0	0	0	0	0
	Pembroke	0	0	0	0	0
Total	1 (0)	0	5 (1)	3 (1)	10 (6)	
North Wales	Bangor	0	0	3 (0)	0	1
	Bodelwyddan	0	2 (2)	2 (0)	2 (1)	2
	Holyhead	0	0	0	0	1
	Llandudno	0	0	0	0	1
	Pwllheli	1 (0)	0	0	0	0
	Wrexham	5 (3)	3 (2)	3 (2)	0	4 (1)
	Total	6 (3)	5 (4)	8 (2)	2 (1)	9 (1)
Wales	8 (3)	13 (10)	50 (29)	39 (28)	43 (20)	

*Builth Wells clinic opened in quarter 3 of 2003

**Cardigan clinic opened in quarter 4 of 2004

***Lampeter clinic opened in June 2004 and closed end of 2005

§Newtown clinic opened in quarter 2 2004

§§Llanelli and Carmarthen Pond Street clinics started reporting separately in 2003; before this, data from Llanelli was aggregated with West Wales General Hospital.

Table 11. Episodes of infectious syphilis* reported to NPHS CDSC through the enhanced surveillance scheme by clinics in Wales (A1, A2 only)

Region	Clinic	2002	2003	2004	2005	2006**
South & East	Aberdare	0	0	0	1	1 (1)
	Cardiff	12 (8)	41 (33)	35 (25)	23 (20)	32 (22)
	Llantrisant	4 (2)	4 (3)	1 (1)	3 (2)	9 (5)
	Newport	0	0	0	4 (2)	16 (9)
	Total	16 (10)	45 (36)	36 (26)	31 (24)	58 (37)
Mid & West	Bridgend	0	0	2 (1)	1 (1)	2
	Port Talbot	0	0	0	0	0
	Swansea	0	7 (5)	5 (3)	7 (6)	7 (7)
	Aberystwyth	0	0	0	0	0
	Builth Wells***	-	0	0	0	0
	Cardigan [§]	-	-	-	0	1
	Lampeter ^{§§}	-	-	-	0	0
	Newtown [#]	-	-	-	0	0
	Carmarthen Pond Street ^{##}	-	-	0	0	0
	West Wales General Hospital	0	0	0	0	0
	Llanelli	-	0	0	0	0
	Haverfordwest	0	0	0	0	0
	Pembroke	0	0	0	0	0
	Total	0	7 (5)	7 (4)	8 (7)	10 (7)
	North Wales	Bangor	3 (1)	3 (2)	2 (1)	1 (1)
Bodelwyddan		3 (2)	1	2 (2)	0	3 (3)
Holyhead		0	0	0	0	0
Llandudno		0	0	0	0	0
Pwllheli		0	0	0	0	0
Wrexham		5 (3)	1	2	9 (5)	1 (1)
Total		11 (6)	5 (2)	6 (3)	10 (6)	5 (5)
Wales	27 (16)	57 (43)	49 (33)	49 (37)	73 (49)	

*Data includes A1, A2, A3, A9 and stage of infection not known. Figures may differ from KC60 data due to differences in data collection methods.

**Note that data for recent years may change as reports come in

***Builth Wells clinic opened in quarter 3 of 2003

§Cardigan clinic opened in quarter 4 of 2004

§§Lampeter clinic opened in June 2004 and closed end of 2005

#Newtown clinic opened in quarter 2 2004

##Llanelli and Carmarthen Pond Street clinics started reporting separately in 2003; before this, data from Llanelli was aggregated with West Wales General Hospital

Table 12. Episodes of post-pubertal uncomplicated gonorrhoea (and number homosexually acquired) per year by GUM clinic and region of GUM clinic: KC60 data, 2001-2005

Region	Clinic	2001	2002	2003	2004	2005
South & East	Aberdare	17 (1)	5 (0)	36 (0)	28	13
	Cardiff	134 (51)	159 (37)	150 (51)	237 (66)	223 (61)
	Llantrisant	39 (4)	32 (0)	81 (1)	57	48 (1)
	Newport	95 (0)	81 (6)	126 (5)	105 (6)	95 (7)
	Total	285 (56)	277 (43)	393 (57)	427 (72)	379 (69)
Mid & West	Bridgend	19 (0)	16 (0)	19 (0)	12 (1)	8 (0)
	Port Talbot	8 (2)	6 (2)	8 (4)	18 (1)	9 (1)
	Swansea	43 (5)	55 (4)	74 (3)	71 (4)	35 (9)
	Aberystwyth	0	0	1 (1)	4 (1)	3 (1)
	Builth Wells*	-	-	0	1 (1)	1 (0)
	Cardigan**	-	-	-	0	1 (0)
	Lampeter***	-	-	-	0	0
	Newtown [§]	-	-	-	0	0
	Carmarthen Pond Street ^{§§}	-	-	0	1 (0)	4 (0)
	West Wales General Hospital	13 (4)	15 (0)	4 (1)	10 (0)	10 (1)
	Llanelli	-	-	7 (0)	6 (0)	5 (0)
	Haverfordwest	4 (0)	4 (0)	2 (0)	20 (0)	5 (0)
	Pembroke	2 (0)	1 (0)	3 (0)	11 (1)	6 (0)
	Total	89 (11)	95 (6)	118 (9)	154 (9)	88 (12)
North Wales	Bangor	4 (0)	7 (0)	11 (0)	11 (0)	5 (0)
	Bodelwyddan	26 (2)	32 (4)	22 (7)	45 (11)	26 (5)
	Holyhead	1 (0)	0	1 (0)	2 (0)	1 (0)
	Llandudno	3 (0)	3 (0)	3 (0)	2 (0)	2 (0)
	Pwllheli	1 (0)	0	3 (0)	0	0
	Wrexham	22 (5)	22 (5)	42 (2)	36 (1)	33 (1)
	Total	57 (7)	64 (9)	82 (9)	96 (12)	67 (6)
Wales	431 (74)	438 (58)	593 (75)	677 (93)	533 (87)	

*Builth Wells clinic opened in quarter 3 of 2003

**Cardigan clinic opened in quarter 4 of 2004

***Lampeter clinic opened in June 2004 and closed end of 2005

§Newtown clinic opened in quarter 2 2004

§§Llanelli and Carmarthen Pond Street clinics started reporting separately in 2003; before this, data from Llanelli was aggregated with West Wales General Hospital.

Table 13. Episodes of gonococcal complications (B5) per year by GUM clinic and region of GUM clinic: KC60 data, 2001-2005

Region	Clinic	2001	2002	2003	2004	2005
South & East	Aberdare	0	0	0	0	0
	Cardiff	3 (0)	4 (0)	3 (0)	2 (0)	3 (0)
	Llantrisant	1 (0)	0	2 (0)	2 (0)	0
	Newport	0	0	3 (0)	1 (0)	1 (0)
	Total	4 (0)	4 (0)	8 (0)	5 (0)	4 (0)
Mid & West	Bridgend	0	0	0	0	0
	Port Talbot	0	0	0	0	0
	Swansea	2 (0)	0	0	1 (0)	0
	Aberystwyth	0	0	0	0	0
	Builth Wells*	-	-	0	0	0
	Cardigan**	-	-	-	0	0
	Lampeter***	-	-	-	0	0
	Newtown [§]	-	-	-	0	0
	Carmarthen Pond Street ^{§§}	-	-	0	0	0
	West Wales General Hospital	0	0	0	0	0
	Llanelli	-	-	0	0	0
	Haverfordwest	0	0	0	0	0
	Pembroke	0	0	0	0	0
	Total	2 (0)	0	0	1 (0)	0 (0)
North Wales	Bangor	0	0	0	0	0
	Bodelwyddan	0	2 (0)	2 (0)	1 (0)	0
	Holyhead	0	0	0	0	0
	Llandudno	0	0	0	0	0
	Pwllheli	0	0	0	0	0
	Wrexham	1 (0)	0	0	2 (0)	1 (0)
	Total	1 (0)	2 (0)	2 (0)	3 (0)	1 (0)
Wales	7 (0)	6 (0)	10 (0)	9 (0)	5 (0)	

*Builth Wells clinic opened in quarter 3 of 2003

**Cardigan clinic opened in quarter 4 of 2004

***Lampeter clinic opened in June 2004 and closed end of 2005

§Newtown clinic opened in quarter 2 2004

§§Llanelli and Carmarthen Pond Street clinics started reporting separately in 2003; before this, data from Llanelli was aggregated with West Wales General Hospital.

Table 14. Laboratory reports of *Neisseria gonorrhoeae by reporting laboratory and year, 2002-2006**

Laboratory	Year				
	2002	2003	2004	2005	2006
Abergavenny Nevill Hall	3	0	0	0	4
Aberystwyth Bronglais	4	1	1	1	0
Bangor NPHS	12	17	13	7	13
Bridgend Princess of Wales	0	0	0	0	0
Cardiff NPHS	177	130	247	234	174
Carmarthen NPHS	1	8	7	13	19
Haverfordwest Withybush	5	4	13	4	11
Llantrisant Royal Glamorgan	0	20	97	80	36
Merthyr Tydfil Prince Charles	1	2	1	1	0
Newport Royal Gwent	0	0	0	0	0
Rhyl NPHS	30	16	34	16	16
Swansea NPHS	63	80	84	41	86**
Wrexham Maelor	0	1	33	18	0
Outside Wales	0	0	1	0	0
Total	296	279	531	415	359

*Includes all anogenital specimens positive for *Neisseria gonorrhoea*

**Due to system error, duplicates were present in Swansea 2006 data. Data was therefore de-duplicated at CDSC.

Table 15. Rates (per 100,000 population) of laboratory reports* of gonorrhoea and anogenital chlamydia by sex by age group, 2002-2006

Organism	Year	Sex	Age-group					Total**	
			15-24	25-34	35-44	45-54	55-64		
<i>Neisseria gonorrhoeae</i>	2002	F	34.08	10.91	6.13	1.02	1.13	6.63	
		M	45.50	37.88	16.38	6.31	1.17	13.89	
	2003	F	31.72	7.31	2.80	1.54	0.00	5.42	
		M	46.68	30.06	17.63	6.38	0.56	13.47	
	2004	F	73.44	18.94	3.70	1.03	0.53	12.32	
		M	95.62	55.60	20.43	8.00	0.55	23.77	
	2005	F	50.95	16.26	1.38	3.08	1.04	9.01	
		M	65.99	44.14	20.51	7.48	4.82	19.06	
	2006	F	42.54	13.36	2.76	0.51	0.00	7.30	
		M	58.94	43.53	17.58	10.15	1.07	17.11	
	Anogenital chlamydia***	2002	F	805.39	195.20	35.38	5.61	0.57	129.38
			M	250.55	130.54	32.26	8.41	3.50	54.87
2003		F	861.34	188.40	27.07	6.68	0.00	135.95	
		M	262.75	156.80	33.80	6.91	1.68	61.24	
2004		F	1223.71	293.36	40.66	11.81	1.59	196.03	
		M	400.89	207.44	36.49	13.87	4.37	87.36	
2005		F	1212.71	264.23	43.72	9.74	2.59	190.75	
		M	439.80	232.77	39.55	11.22	2.14	95.70	
2006		F	1165.44	267.13	36.36	8.71	2.08	183.98	
		M	448.87	223.70	54.69	13.90	4.82	98.41	

* Excludes laboratory reports of *Neisseria gonorrhoeae* and anogenital chlamydia from Newport Royal Gwent, and reports of anogenital chlamydia from Wrexham, Bridgend and Abergavenny hospitals.

** Total ONS population of females/males was used as denominator for total rate

*** Includes all anogenital specimens positive for *Chlamydia trachomatis* or *Chlamydia spp.*

Table 16. Episodes of uncomplicated chlamydial infection (and number homosexually acquired) per year by GUM clinic and region of GUM clinic: KC60 data, 2001-2005

Region	Clinic	2001	2002	2003	2004	2005
South & East	Aberdare	52 (0)	39 (0)	31	35	38
	Cardiff	812 (22)	1041 (27)	890 (35)	1173 (27)	1109 (26)
	Llantrisant	171 (0)	154 (1)	182	168	178
	Newport	511 (0)	488 (2)	545 (3)	488 (2)	485 (4)
	Total	1543 (22)	1722 (30)	1648 (38)	1864 (29)	1810 (30)
Mid & West	Bridgend	63 (0)	40 (0)	64	53	61
	Port Talbot	70 (0)	72 (0)	77 (1)	77	44
	Swansea	372 (5)	298 (0)	467 (1)	507 (4)	392 (4)
	Aberystwyth	13	27	35	41 (1)	25 (1)
	Builth Wells*	-	-	5	13	20
	Cardigan**	-	-	-	10	4
	Lampeter***	-	-	-	6	9 (1)
	Newtown§	-	-	-	5	6
	Carmarthen Pond Street§§	-	-	8	13	18
	West Wales General Hospital	84	75	62	67	65
	Llanelli	-	-	65	78	60
	Haverfordwest	28 (0)	32 (0)	36	48	55
	Pembroke	10 (0)	18 (0)	12	21	25
	Total	640 (5)	562 (0)	831 (2)	939 (5)	784 (6)
North Wales	Bangor	55 (0)	71 (0)	73	119	292
	Bodelwyddan	165 (5)	165 (1)	160 (3)	193 (2)	300 (6)
	Holyhead	10 (0)	21 (0)	20	22	66
	Llandudno	31 (0)	28 (0)	29	42	115
	Pwllheli	9 (0)	10 (0)	13	32	39
	Wrexham	311 (2)	316 (2)	354 (1)	331 (2)	536 (3)
	Total	581 (7)	611 (3)	650 (4)	739 (4)	1348 (9)
Wales		2767 (34)	2895 (33)	3128 (44)	3542 (38)	3942 (45)

*Builth Wells clinic opened in quarter 3 of 2003

**Cardigan clinic opened in quarter 4 of 2004

***Lampeter clinic opened in June 2004 and closed end of 2005

§Newtown clinic opened in quarter 2 2004

§§Llanelli and Carmarthen Pond Street clinics started reporting separately in 2003; before this, data from Llanelli was aggregated with West Wales General Hospital.

Table 17. Episodes of complicated chlamydial infection (C4b) per year by GUM clinic and region of GUM clinic: KC60 data, 2001-2005

Region	Clinic	2001	2002	2003	2004	2005
South & East	Aberdare	1 (0)	0	9 (0)	2 (0)	6 (0)
	Cardiff	14 (0)	29 (1)	22 (0)	38 (2)	25 (1)
	Llantrisant	4 (0)	4 (0)	9 (0)	6 (0)	4 (0)
	Newport	36 (0)	28 (0)	13 (0)	13 (0)	25 (0)
	Total	55 (0)	61 (1)	53 (0)	59 (2)	60 (1)
Mid & West	Bridgend	7 (0)	2 (0)	1 (0)	1 (0)	3 (0)
	Port Talbot	3 (0)	0	0	0	1 (0)
	Swansea	3 (0)	6 (0)	9 (0)	13 (0)	6 (0)
	Aberystwyth	0	0	0	2	0
	Builth Wells*	-	-	0	0	0
	Cardigan**	-	-	-	0	1 (1)
	Lampeter***	-	-	-	0	0
	Newtown [§]	-	-	-	0	0
	Carmarthen Pond Street ^{§§}	-	-	2	2	6
	West Wales General Hospital	24	13	6	9	5
	Llanelli	-	-	14	5	0
	Haverfordwest	13 (0)	5 (0)	11 (0)	6 (0)	0
	Pembroke	4 (0)	7 (0)	6 (0)	3 (0)	0
	Total	54 (0)	32 (0)	49 (0)	41 (0)	22 (1)
North Wales	Bangor	4 (0)	6 (0)	6 (0)	8 (0)	15 (0)
	Bodelwyddan	6 (0)	2 (0)	6 (0)	5 (0)	7 (0)
	Holyhead	0	0	1 (0)	0	0
	Llandudno	2 (0)	0	0	0	0
	Pwllheli	1 (0)	0	1 (0)	1 (0)	0
	Wrexham	13 (0)	14 (0)	12 (0)	17 (0)	20 (0)
	Total	26 (0)	22 (0)	26 (0)	31 (0)	42 (0)
Wales		135 (0)	116 (1)	128 (0)	131 (2)	124 (2)

*Builth Wells clinic opened in quarter 3 of 2003

**Cardigan clinic opened in quarter 4 of 2004

***Lampeter clinic opened in June 2004 and closed end of 2005

§Newtown clinic opened in quarter 2 2004

§§Llanelli and Carmarthen Pond Street clinics started reporting separately in 2003; before this, data from Llanelli was aggregated with West Wales General Hospital.

Table 18. Laboratory reports of anogenital chlamydia* by reporting laboratory and year, 2002-2006

Laboratory	2002	2003	2004	2005	2006
Abergavenny Nevill Hall	0	0	0	0	0
Aberystwyth Bronglais	80	115	115	90	148
Bangor NPHS	205	199	331	606	513
Bridgend Princess of Wales	0	0	0	0	0
Cardiff NPHS	1366	1470	1894	1770	1575
Carmarthen NPHS	83	165	236	224	293
Haverfordwest Withybush	63	103	38	14	13
Llantrisant Royal Glamorgan	0	0	297	371	203
Merthyr Tydfil Prince Charles	27	55	5	0	0
Newport Royal Gwent	0	0	0	0	0
Rhyl NPHS	194	191	218	269	381
Swansea NPHS	714	660	1153	987	1126
Wrexham Maelor	0	0	0	0	0
Outside Wales	0	0	6	0	1
Total	2732	2958	4293	4331	4253

*Includes all anogenital specimens positive for *Chlamydia trachomatis* or *Chlamydia spp.*

Table 19. New episodes of selected conditions by GUM clinic (KC60 data): 2005 data

Region	Syphilis	Gonorrhoea	Chlamydia	NSU-male	Trichomoniasis	Anaerobic/ bacterial vaginosis	Candidosis	Herpes	Warts	Incoming telephone calls for clinical advice or results	First attendances...	...of which new patients	
	A1,A2	B1,B2	C4a,C4c	C4h	C6a	C6b	C7a	C10a	C11a	(as on QS1)			
South & East	Aberdare	1	13	38	54	2	56	37	3	105	-	559	380
	Cardiff	16	223	1109	635	17	823	950	177	888	4054	11771	6203
	Llantrisant	2	48	178	188	9	250	198	64	278	-	2234	1417
	Newport	5	95	485	449	17	333	290	112	578	4542	4590	3279
	Total	24	379	1810	1326	45	1462	1475	356	1849	8596	19154	11279
Mid & West	Bridgend	2	8	61	44	1	81	47	3	111	-	563	363
	Port Talbot	0	9	44	30	2	58	65	8	102	231	740	387
	Swansea	7	35	392	219	9	306	377	65	501	2593	5426	2881
	Aberystwyth	0	3	25	3	2	4	11	1	26	446	326	280
	Builth Wells	0	1	20	6	0	8	16	1	24	249	206	187
	Cardigan	0	1	4	4	0	14	12	0	18	271	201	174
	Lampeter	0	0	9	2	0	11	4	0	13	201	125	115
	Newtown	0	0	6	6	0	8	10	0	30	195	178	165
	Carmarthen Pond St	0	4	18	86	0	21	20	4	37	214	371	249
	West Wales General Hospital	1	10	65	185	0	29	36	15	66	643	787	439
	Llanelli	0	5	60	217	4	69	51	18	87	884	828	527
	Haverfordwest	0	5	55	146	0	62	93	8	69	459	601	481
	Pembroke	0	6	25	151	0	28	25	5	45	205	289	0
	Total	10	87	784	1099	18	699	767	128	1129	6591	10641	6248
North Wales	Bangor	1	5	292	38	2	113	122	29	145	1271	1553	1149
	Bodelwyddan	2	26	300	93	6	286	270	38	243	1790	2621	1558
	Holyhead	1	1	66	2	0	15	24	6	27	204	291	241
	Llandudno	1	2	115	13	0	54	57	23	48	398	621	446
	Pwllheli	0	0	39	4	0	15	21	8	26	191	235	182
	Wrexham	4	33	536	213	7	308	293	54	276	2471	3037	1801
	Total	9	67	1348	363	15	791	787	158	765	6325	8358	5377
Wales	43	533	3942	2788	78	2952	3029	642	3743	21512	38153	22904	