

AGE GROUP AND COUNTRY OF ORIGIN OF CASES OF GONORRHOEA IN ENGLAND AND WALES*

WITH A COMPARISON OF THE INCIDENCE OF GONORRHOEA IN DENMARK

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Denmark, like England, is a small country, and yet the extensive influence she wields far exceeds her size. Particularly does this apply to the field of venereology. It is regarded, therefore, as a particular privilege to speak in this great city of Copenhagen which, with its State Serum Institute and Neisseria Centre contributing to the technical aspects of diagnosis throughout the world, and the World Health Organization Regional Office for Europe and the European Regional Office of the International Union against the Venereal Diseases—important no less in matters of policy—is a veritable headquarters for those who practise the subject.

Presented in this paper are some general observations on the six studies of the British Cooperative Clinical Group, which have been principally concerned with the country of origin of patients with gonorrhoea since 1952 (*Brit. Coop. Clin. Group*, 1956, 1960, 1962, 1963a, 1963b) and with their age groups since 1957 (*Brit. Coop. Clin. Group*, 1960a, 1962, 1963a, 1963b).

During these years the numbers of patients with gonorrhoea attending the venereal disease clinics of England and Wales have shown a significant and steady increase until in the last year there has at last been a fall, but whether this is temporary or permanent remains to be seen (Table I and Fig. 1).

The figures presented include only patients attending the venereal diseases clinics and take no account of those treated by other hospital departments, by general practitioners, or in the armed forces.

TABLE I

TOTAL NUMBER OF CASES OF GONORRHOEA ATTENDING
THE VENEREAL DISEASES CLINICS OF ENGLAND AND
WALES, 1952-62, BY SEX.

Year	Males	Females
1952	15,510	3,585
1953	15,242	4,021
1954	13,962	3,574
1955	14,079	3,766
1956	16,377	4,011
1957	19,620	4,761
1958	22,398	5,489
1959	24,964	6,380
1960	26,618	7,152
1961	29,519	7,588
1962	28,329	7,109

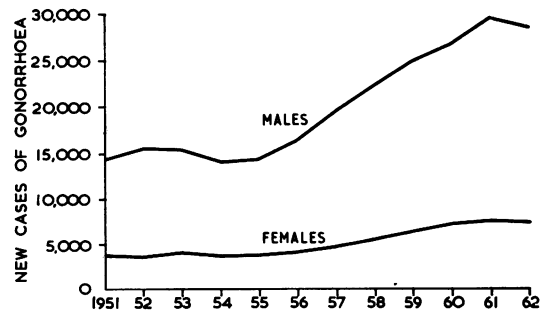


FIG. 1.—New cases of gonorrhoea in the clinics of England and Wales, 1951-62, by sex.

Country of Origin

National Coverage

The proportion of the national total covered by the Cooperative Group studies of the country of origin of gonorrhoea cases is shown in Table II (opposite).

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TABLE II
NATIONAL COVERAGE OBTAINED BY SIX BRITISH COOPERATIVE CLINICAL GROUP STUDIES, 1952-62, BY SEX

Year		1952 ¹	1955 ¹	1958 ¹	1960 ²	1961 ³	1962 ⁴	
No. of Clinics		84	84	101	150	150	166	
Sex	Male	National Total Cases in Survey	15,510 6,571	14,079 5,585	22,398 15,387	26,618 21,663	29,519 24,371	28,329 24,896
		Per cent. Coverage	42.4	39.7	68.7	81.0	82.3	87.8
	Female	National Total Cases in Survey	3,585 1,471	3,766 1,589	5,489 3,054	7,152 5,912	7,588 6,500	7,109 6,457
		Per cent. Coverage	41.0	42.2	55.6	82.7	85.7	90.8

¹ *Brit. J. vener. Dis.* (1960). 36, 233.
² *Ibid.* (1962). 38, 1.

³ *Ibid.* (1963). 39, 1.
⁴ *Ibid.* (1963). 39, 149.

The data of the 1954 study have been excluded as the number of clinics participating in that year was much lower than the average. The percentage national coverage has risen appreciably in the three most recent studies.

The percentages of West Indians, other immigrants, and persons born in the United Kingdom are shown in Table III and Fig. 2.

TABLE III

PERCENTAGES OF WEST INDIANS, OTHER IMMIGRANTS, AND UNITED KINGDOM-BORN PERSONS, 1952-62, BY SEX

Year			1952	1955	1958	1960	1961	1962
Sex	Male	West Indians	3.0	6.0	24.0	25.5	27.3	28.3
		Other Immigrants	27.3	26.7	24.5	25.0	25.5	27.7
		United Kingdom-Born	69.7	67.3	51.5	49.5	47.2	44.0
	Female	West Indians	0.5	1.1	5.9	7.9	9.8	11.7
		Other Immigrants	4.8	6.4	5.4	9.1	8.2	9.6
		United Kingdom-Born	94.7	92.5	88.7	83.0	82.0	78.7

The increasing relative importance of immigrants is well shown. The percentage of males born in the United Kingdom fell from 69.7 per cent. in 1952 to 44 per cent. in 1962 and of females from 94.7 to 78.7 per cent. The proportion of male West Indian immigrants rose significantly from a mere 3 per cent. in 1952 to 28.3 per cent. in 1962, and that of females from only 0.5 to 11.7 per cent. The proportion of all other immigrants remained throughout much the same for males (range 27.3-27.7 per cent.) but doubled for females from 4.8 to 9.6 per cent.

Estimated Total Numbers

The estimated total numbers of West Indians, other immigrants, and U.K.-born persons with gonorrhoea attending the venereal disease clinics of England and Wales, calculated from the British Cooperative Clinical Group studies, are shown in Table IV and Fig. 3 (overleaf). The breakdown for other immigrants is shown in Fig. 3a (overleaf).

Males.—West Indian cases increased from 465 in 1952 to 8,059 in 1961, and then fell by 42 to 8,017 cases in 1962. The other male immigrants, who

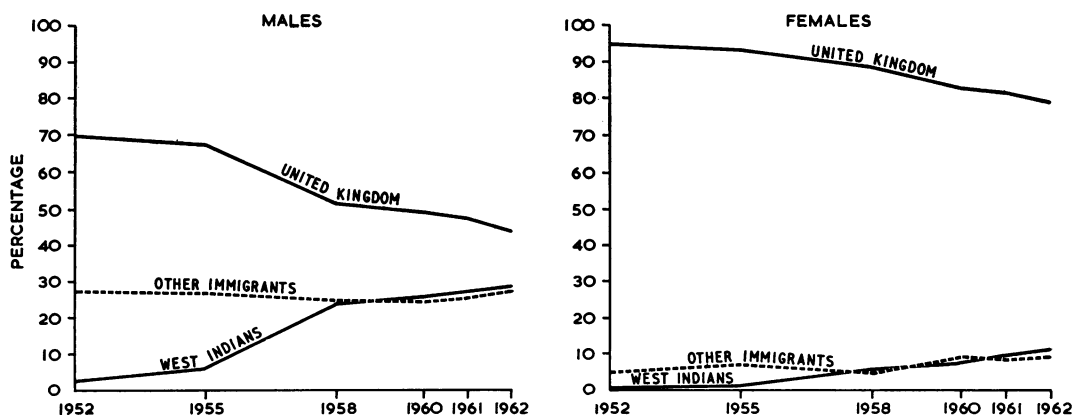


FIG. 2.—Estimated relative numbers of immigrants and U.K.-born persons with gonorrhoea, 1952-62, by sex.

TABLE IV
ESTIMATED TOTAL NUMBERS OF IMMIGRANTS AND OTHERS ATTENDING THE V.D. CLINICS OF ENGLAND AND WALES, 1952-62, BY SEX.

Year			1952 ^a	1955 ^a	1958 ^a	1960 ^a	1961 ^a	1962 ^b
Sex	Male	West Indians	465	845	5,375	6,788	8,059	8,017
		Other Immigrants	4,234	3,759	5,488	6,654	7,527	7,847
		United Kingdom-born	10,811	9,475	11,535	13,176	13,933	12,465
	Totals ¹		15,510	14,079	22,398	26,618	29,519	28,329
	Female	West Indians	18	41	324	565	744	832
		Other Immigrants	172	241	296	651	622	682
United Kingdom-born		3,395	3,484	4,869	5,936	6,222	5,595	
Totals ¹		3,585	3,786	5,489	7,152	7,588	7,109	

¹ Ministry of Health (1962).

² *Brit. J. vener. Dis.* (1960), 36, 233.

³ *Ibid.*, (1962), 38, 1.

⁴ *Ibid.*, (1963), 39, 1.

⁵ *Ibid.*, (1963), 39, 149.

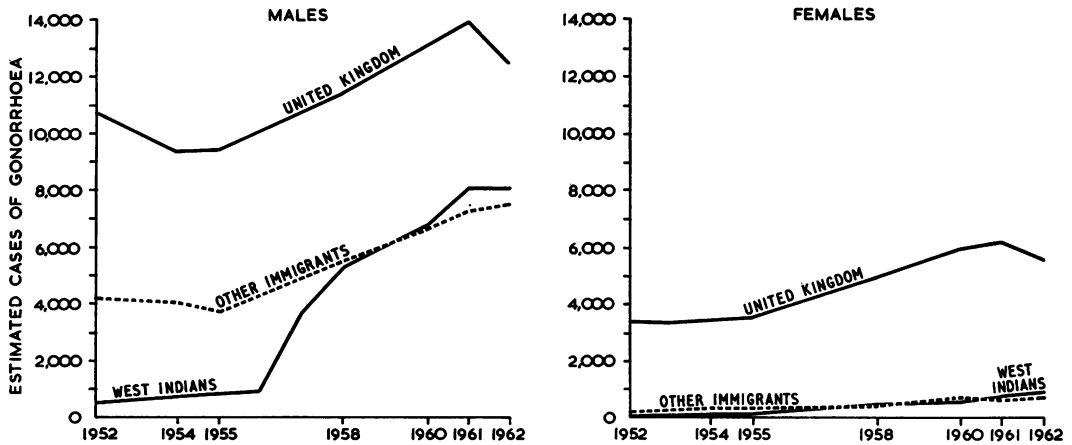


FIG. 3.—Cases of gonorrhoea in immigrants and U.K.-born persons, 1952-62, by sex.

include short-term visitors from the Continent of Europe showed an uninterrupted increase from 4,234 cases in 1952 to 7,527 in 1961 and 7,847 in 1962, which more than compensated for the decrease in West Indians. Males born in the United Kingdom increased from 10,811 in 1952 to 13,933 in 1961, but falling by no less than 1,468 to a total of 12,465 in 1962. Details of other male immigrants are shown in Fig. 3a (opposite).

Females.—There was an unbroken rise of both West Indian and other immigrants with gonorrhoea from 1952 to 1962. The number born in the United Kingdom increased from 3,395 in 1952 to 6,222 in 1961, but fell by 627 to 5,595 cases in 1962.

Thus, although there has been a fall of 4.0 per cent. in males and 6.3 per cent. in females between 1961 and 1962, this decrease has been accounted for in both sexes by the decrease in persons born in the United Kingdom. This was in spite of the passing of the Immigration Act late in 1961 and of the more recent failure of negotiations in Brussels, which

occasioned a certain amount of publicity. The reason for this change of trend, if it is confirmed, is not yet clear. But had Great Britain entered the Common Market the numbers of immigrants to this country is likely to have increased, and many of these might have contracted gonorrhoea after arrival here.

Rates per 100,000 in Immigrants

As the total numbers of the various immigrants in the population are not known, it is not possible accurately to define the venereal disease rates per 100,000 population in these groups. Recent estimates from figures supplied by the Home Office (Fig. 3b, opposite) suggest that the West Indians may number 250,000. If this is the case, perhaps 200,000 are males and 50,000 are females, the vast majority of whom are sexually-active adults. Applying these figures to the cases of gonorrhoea in this ethnic group, the rates estimated for 1961 would be 4,029.5 per 100,000 in males and 1,488 per 100,000 for females. These rates are extraordinarily high by any standards,

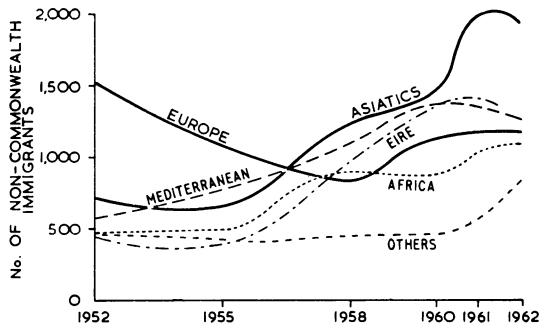


FIG. 3a.—Male immigrants with gonorrhoea other than West Indians, 1952-62.

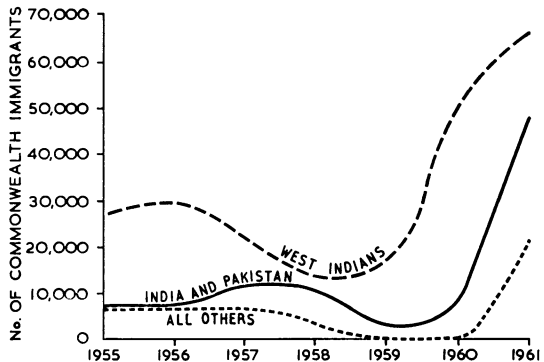


FIG. 3b.—Estimated net inward movement of Commonwealth citizens, 1955-61.

even for countries with extremely comprehensive reporting.

Taking the sexually-active population of England and Wales aged 15 to 45 years in 1961 as 10,603,000 for men and 9,068,000 for women, the remaining cases of gonorrhoea (the infections contracted by West Indians being excluded) would give rates of 202.4 per 100,000 for males and 75.5 per 100,000 for females of all other groups. The rates for West Indians are thus in the region of twenty times greater than for the rest of the population (19.9 for males and 19.7 for females).

Increase in Gonorrhoea, 1952-61

The proportion of the increase in gonorrhoea which occurred in the decade 1952 to 1961 is shown by country of origin in Table V and Fig. 4.

The West Indians were responsible for no less than 54.2 per cent. of the increase in males during the decade, other immigrants for 23.5 per cent., and men born in the United Kingdom for 22.3 per cent. In females, on the other hand, 70.7 per cent. of the increase occurred in women born in the United Kingdom.

TABLE V
PERCENTAGE INCREASE IN GONORRHOEA, BY COUNTRY OF ORIGIN, 1952-61. BY SEX. (BASED ON ESTIMATED NUMBERS)

Percentage Increase		Increase 1955-1958	Increase 1958-1961	Increase 1952-1961 Total	
Sex	Male	West Indians	54.5	37.7	54.2
		Other Immigrants	20.8	28.6	23.5
		United Kingdom-Born	24.7	33.7	22.3
Sex	Female	West Indians	16.4	20.0	18.1
		Other Immigrants	3.2	15.5	11.2
		United Kingdom-Born	80.4	64.5	70.7

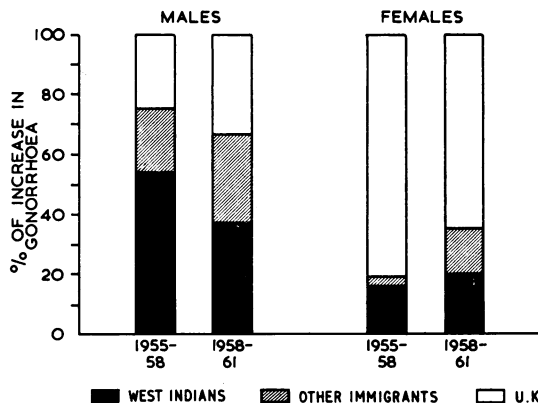


FIG. 4.—Percentage increase in gonorrhoea, by race and sex, 1955-61.

Age Group

National Coverage

The proportion of the national total covered by the Cooperative Group studies of age groups (Table VI) varies from 77.7 to 87.8 per cent. in males and from 86.1 to 90.8 per cent. in females.

TABLE VI
NATIONAL COVERAGE OBTAINED IN AGE GROUP STUDIES, 1957-62, BY SEX

Year		1957 ¹	1958 ¹	1960 ²	1961 ³	1962 ⁴	
No. of Clinics		148	148	150	150	166	
Sex	Male	National Total Cases in Study	19,620	22,398	26,618	29,519	28,329
		Per cent. coverage	78.0	77.7	81.0	82.3	87.8
		Female	National Total Cases in Study	4,761	5,489	7,152	7,588
Per cent. coverage	86.8		86.1	82.7	85.7	90.8	

¹ *Brit. J. vener. Dis.* (1960). 36, 216.

² *Ibid.* (1962). 38, 1.

³ *Ibid.* (1963). 39, 1.

⁴ *Ibid.* (1963). 39, 149.

Percentage of Patients in Different Age Groups

The percentages are shown in Table VII, and are compared with recent figures from Denmark in Fig. 5.

TABLE VII
GONORRHOEA IN ENGLAND AND WALES PERCENTAGE AGE GROUPS, 1957-62, BY SEX

Year		1957	1958	1960	1961	1962
Sex	Male					
	15-19 yrs	5.5	6.1	6.4	6.3	7.0
	20-24 yrs	27.2	27.8	30.1	27.1	30.2
	Others	67.3	66.1	63.5	66.6	62.8
Sex	Female					
	15-19 yrs	22.7	23.7	26.3	25.8	24.5
	20-24 yrs	33.3	35.0	37.5	37.6	38.6
	Others	44.0	41.3	36.2	36.6	36.9

Estimated Total Numbers

From these figures, estimates have been made of the total number in each age group who attended the clinics of England and Wales (Table VIII and Fig. 6).

TABLE VIII
ESTIMATED TOTAL NUMBERS OF PATIENTS BY AGE GROUP, 1957-62, BY SEX

Year		1957	1958	1960	1961	1962
Sex	Male					
	15-19 yrs	1,079	1,366	1,704	1,860	1,983
	20-24 yrs	5,337	6,227	8,012	8,000	8,555
	Others	13,204	14,805	16,902	19,659	17,791
	Total	19,620	22,398	26,618	29,519	28,329
Sex	Female					
	15-19 yrs	1,080	1,301	1,881	1,958	1,742
	20-24 yrs	1,587	1,921	2,682	2,853	2,744
	Others	2,094	2,267	2,589	2,777	2,623
	Total	4,761	5,489	7,152	7,588	7,109

Male: Female Ratios

These are shown for the different age groups in Table IX and Fig. 7 (opposite).

It may be noted that the number of young persons of each sex, aged 15-19 years was approximately the same throughout (range 0.9 to 1.1). Of those aged

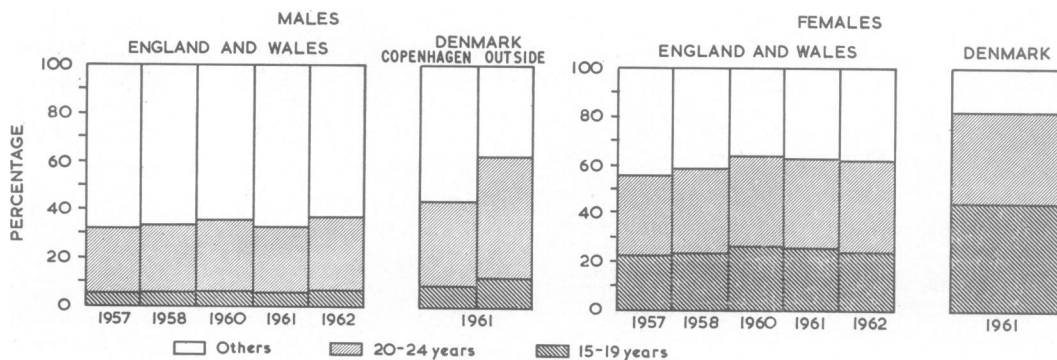


FIG. 5.—Percentage age groups in England and Wales, 1957-62, and in Denmark, 1961, by sex.

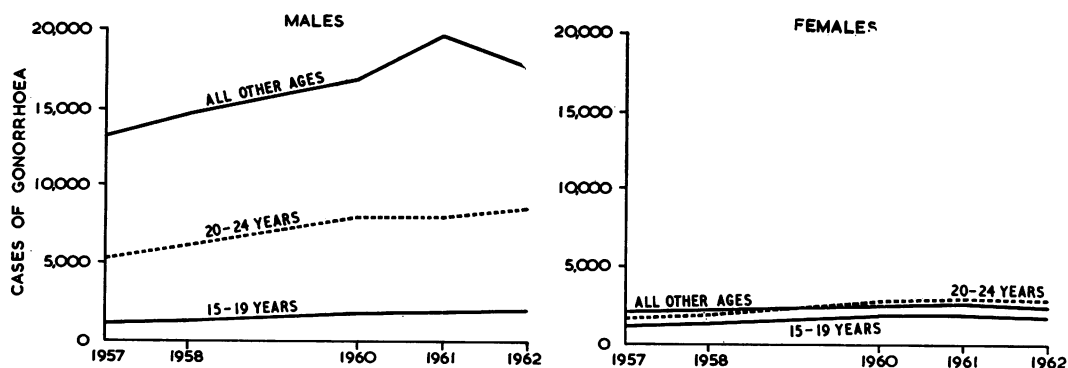


FIG. 6.—Estimated numbers of cases of gonorrhoea, 1957-62, by sex and age group.

TABLE IX

MALE : FEMALE RATIO, 1957-62, BY AGE GROUP
(No. of males to one female)

Year		1957	1958	1960	1961	1962
Age Group (yrs)	15-19	1.0	1.1	0.9	0.9	1.1
	20-24	3.4	3.2	3.0	3.1	3.1
	Others	6.3	6.5	6.5	7.1	6.9
	Total	4.1	4.1	3.7	3.9	4.0

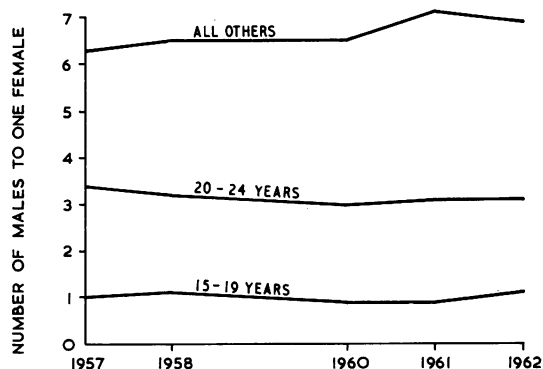


FIG. 7.—Male: Female ratio, by age group, 1957-62.

20-24 years there were 3.0-3.4 times as many males as females, and for the other age groups 6.3-7.1 times as many.

Although these figures could indicate lessened promiscuity and better case-finding in the young than in the old, they more probably reflect the greater number of itinerant males, including immigrants, in the older age groups and the fact that older men frequently associate with younger women.

Rates per 100,000

Males.—The estimated total numbers and known figures of the population by age groups being

available, it is possible to work out rates per 100,000 by age group basing the calculations on clinic patients only. Comparable data for Denmark based on wider reporting have been published in recent years by Nielson (1961), Perdrup (1961), and Lind (1962). Hitherto this estimation has been possible in Great Britain only by using the data collected by the British Cooperative Clinical Group, but from 1963 the Ministry of Health is to note the age groups of patients with gonorrhoea (and of infectious syphilis) routinely each year, and calculations based on a 100 per cent. coverage should then be generally available.

The data here presented are based on the group studies of rates per 100,000 in those aged 15-19, 20-24, and 25 years and over. To be more realistic and to exclude the very young and very old, the rates for "other groups" have also been calculated on the basis of the sexually-active population aged 25-44 years (Table X, and Fig. 8, overleaf).

In males the rates were highest (392 to 583 per 100,000) in those aged 20-24 years and lowest (78 to 114 per 100,000) in those aged 15-19 years. The rate for "others", on the basis of the population aged 25-44 years, occupied an intermediate position (213 to 325 per 100,000). It is noted that the rates have continued to increase in those ages 20-24 years, but decreased between 1961 and 1962 both in those aged 15 to 19 years and in the older age groups.

Females.—The incidence per 100,000 in females is shown in Table X and Fig. 8. The highest rate was that for women aged 20 to 24 years, but in females those aged 15 to 19 years come second.

In both females and males the increase was proportionally much greater in young persons than in the older age groups between 1957 and 1960, but in all females the rates have been declining since 1961—although this has been less marked in those aged 20 to 24 years. Both the earlier rise and subsequent

TABLE X
ESTIMATED RATES PER 100,000 BY AGE GROUP, 1957-1962

Sex			Male					Female				
Year			1957	1958	1960	1961	1962	1957	1958	1960	1961	1962
Age Group (yrs)	15-19	Population Rate per 100,000	1,396 78.7	1,428 95.7	1,552 109.8	1,631 114.0	1,748 111.2	1,389 77.8	1,412 92.1	1,509 124.7	1,577 124.2	1,714 101.6
	20-24	Population Rate per 100,000	1,361 392.1	1,380 451.2	1,422 563.4	1,441 555.2	1,467 583.2	1,386 114.5	1,402 137.0	1,450 185.0	1,438 198.4	1,456 188.5
	All Other Age Groups	Population Rate per 100,000	18,891 69.9	18,966 78.1	19,096 88.5	19,274 102.0	19,400 91.9	20,484 10.2	20,551 11.0	20,726 12.5	20,805 13.3	20,848 12.5
	All Others on Basis of 25-44 yrs	Population Rate per 100,000	6,183 213.6	6,095 242.9	6,001 281.7	6,047 325.1	6,137 290.0	6,311 33.2	6,212 36.5	6,090 42.5	6,053 45.9	6,065 43.2

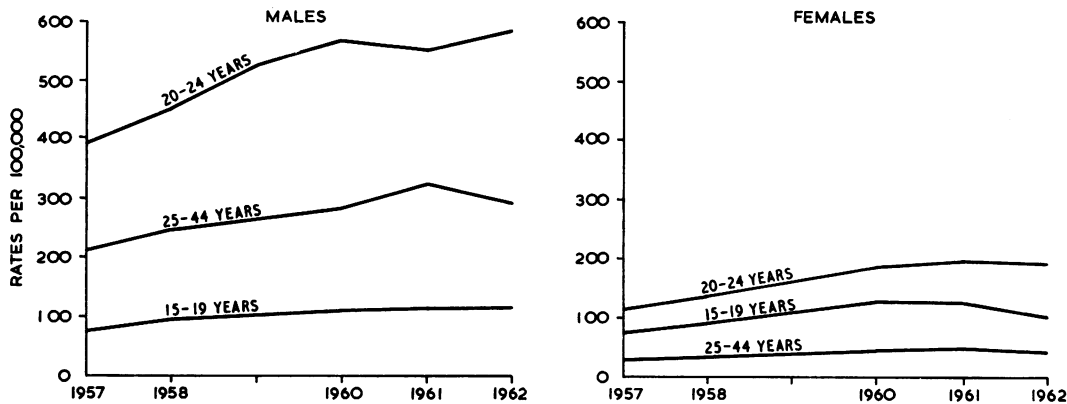


FIG. 8.—Incidence of gonorrhoea per 100,000, by sex and age group, 1957-62.

fall was less obvious in the oldest age group. Thus the calculated rates in teenagers decreased in 1962 in both sexes, and this is accentuated by the increasing population in this age group

In females, on the other hand, those aged 15 to 19 years were responsible for no less than 31·1 per cent. and those aged 15 to 24 years for just over three-quarters.

Increase in Gonorrhoea, 1957-1961

The percentage contributed by each age group to the increase in gonorrhoea between 1957 and 1961 is shown in Table XI and Fig. 9.

Two Major Problems

The problems of gonorrhoea in male West Indians and in predominantly United Kingdom-born female teenagers are summarized in Table XII (see Fig. 10).

TABLE XI
INCREASE IN GONORRHOEA 1957-61 BY AGE GROUP AND SEX (ESTIMATED NUMBERS)

Sex	Age Group (yrs)	1957	1961	Increase 1957-61	Per cent. of Increase
Male	15-19	1,079	1,860	781	7·9
	20-24	5,337	8,000	2,663	26·9
	Others	13,204	19,659	6,455	65·2
	Totals	19,626	29,519	9,899	100·0
Female	15-19	1,080	1,958	878	31·1
	20-24	1,587	2,853	1,266	44·8
	Others	2,094	2,777	683	24·1
	Totals	4,761	7,588	2,827	100·0

TABLE XII
TWO MAJOR PROBLEMS

Population	West Indian Males	Females aged 15-19 Mainly U.K.-born
Per cent. of Total Population	1·4	6·4
Per cent. of all Cases of Gonorrhoea in 1961	27·3	25·8
Per cent. of Increase in Cases of Gonorrhoea	54·2 (1952-1961)	31·1 (1957-1961)

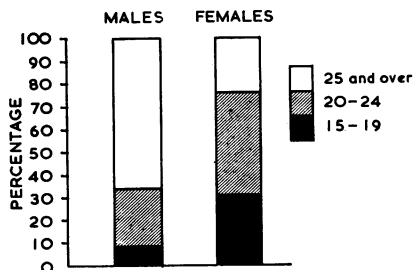


FIG. 9.—Percentage increase in cases of gonorrhoea by sex and age group, 1957-61.

In males, those aged 15 to 19 years accounted for only 7·9 per cent. and those over 24 years for just less than two-thirds.

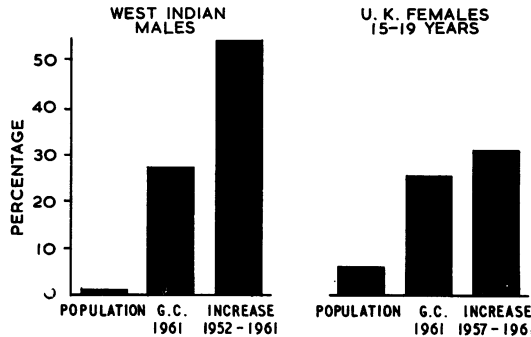


FIG. 10.—Percentage increase in cases of gonorrhoea between 1952 and 1961 in West Indian males and between 1957 and 1961 in U.K.-born teenage females, related to proportion of total population.

These indicate two problems, which, although obviously interwoven, are considered by the author

to be basically distinct. The distribution of the two groups of patients is quite different; the proportion of West Indian males with gonorrhoea decreased both in 1961 and 1962 as the size of the towns and cities became smaller, whereas the proportion of female teenagers aged 15-19 years increased (Table XIII). Moreover, the proportion of female teenagers born in the United Kingdom was also least in the larger towns and cities (in which in fact the proportion of all teenagers was least) and that is where the proportion of West Indian males was highest (Fig. 11).

TABLE XIII

PERCENTAGES OF ALL CASES OF GONORRHOEA ACCOUNTED FOR BY WEST INDIAN MALES AND FEMALE TEENAGERS (15-19 yrs), BY SIZE OF TOWNS, 1961-62

Towns and Cities	Percentage West Indian Males		Percentage Female Teenagers		Percentage Female teenagers predominantly U.K.-born	
	1961	1962	1961	1962	1961	1962
London	29.9	28.7	22.8	22.2	71.8	76.5
500,000 and Over	32.8	36.2	26.0	25.6	85.1	86.6
100,000-500,000	22.2	25.6	27.5	25.8	95.4	91.6
50,000-100,000	12.8	11.7	27.2	28.8	95.1	94.9
Under 50,000	10.3	10.7	47.7	37.5	95.1	96.4
Total	27.3	28.3	25.8	25.0	85.2	86.1

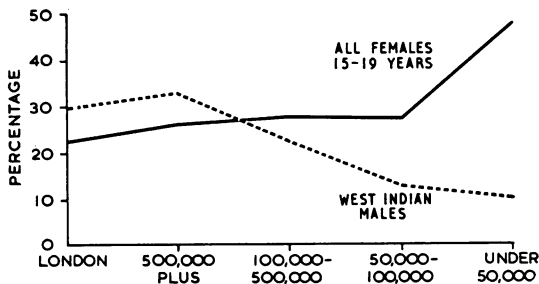


FIG. 11.—Percentage West Indian males and all teenage females in 1961, by size of town.

In addition, studies in 1960, 1961, and 1962 showed that, in the relatively few clinics in which the vast majority of West Indian males with gonorrhoea were treated, the proportion of female teenagers was actually lower than in the much larger number of other clinics in which relatively very few West Indian males with gonorrhoea were seen (Fig. 12).

Comparison with Denmark

Using the data of Lind (1962), some comparisons may be made with the situation in Denmark. The figures so obtained can, however, be used only to compare trends, as the reporting systems are quite

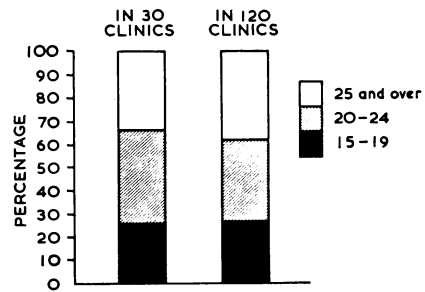


FIG. 12.—Percentage age groups of female patients in clinics at which 89.9 per cent. of male West Indian patients were treated in 1961 compared with all clinics taken together.

different in the two countries and the data of the United Kingdom relate to clinic patients only.

In Table XIV, the percentages of male teenagers in England and Wales are compared with those in Denmark, Copenhagen and the rest of the country being shown separately. These are percentage figures and it can fairly be stated that male teenagers form a higher percentage of all male cases of gonorrhoea in Denmark than in England and Wales (Fig. 13 overleaf).

Consolidated figures for males for all Denmark were not available to the author.

For females figures are available for the whole of Denmark, and again teenagers form a higher percentage of all female cases of gonorrhoea in Denmark than in England and Wales (Table XIV and Fig. 13).

TABLE XIV

PERCENTAGE OF ALL CASES OF GONORRHOEA ACCOUNTED FOR BY TEENAGERS (15-19 YEARS) IN ENGLAND AND WALES (1957-62) COMPARED WITH DENMARK (1957-61), BY SEX

Sex	Male			Female		
	England and Wales	Copenhagen*	Outside Copenhagen*	England and Wales	Denmark*	
Year	1957	5.5	8.1	13.6	22.7	32.5
	1958	6.1	9.0	15.3	23.7	31.3
	1959	—	9.1	15.3	—	34.2
	1960	6.4	10.1	19.1	26.3	41.5
	1961	6.3	9.5	15.2	25.8	43.0
	1962	7.0	—	—	24.5	—

* Data from Lind (1962).

Denmark, however, is a smaller country with fewer large cities and towns, and has no comparable immigration problem but, if the data relating to the percentages of cases of gonorrhoea accounted for by teenagers in the smaller towns of England and Wales are considered, the percentages in the two countries are much more closely comparable (Table XV and Fig. 14, overleaf).

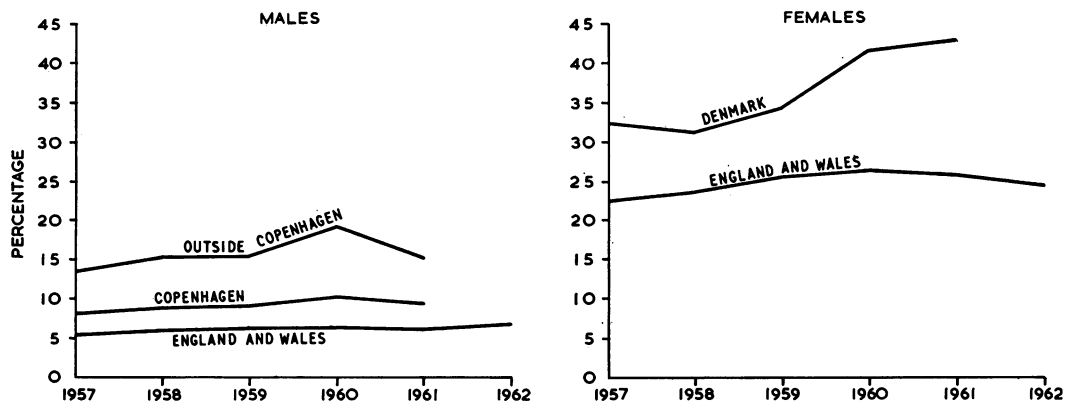


FIG. 13.—Percentage teenage patients in England (1957-62) and in Denmark (1957-61), by sex.

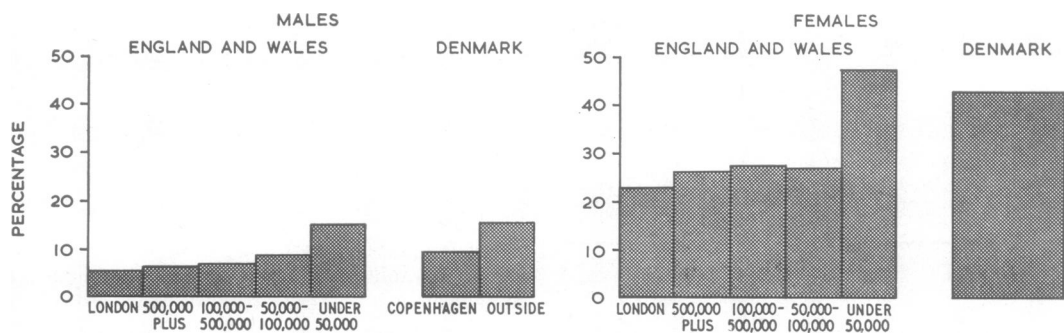


FIG. 14.—Percentage teenage patients in England (by size of town) and in Denmark, by sex, 1961.

TABLE XV

PERCENTAGE OF ALL CASES OF GONORRHOEA ACCOUNTED FOR BY TEENAGERS (15-19 YEARS) IN ENGLAND AND WALES COMPARED WITH DENMARK, BY SEX, IN 1961

Country		Males	Females
Denmark	Copenhagen	9.5	43.0
	Outside Copenhagen	15.2	43.0
England and Wales*	London 500,000 and Over	5.5	22.8
	100,000-500,000	6.1	26.0
	50,000-100,000	6.8	27.5
	Under 50,000	8.9	27.2
	Under 50,000	14.8	47.7

* Figures for 1961 by size of town from Table XIII.

TABLE XVI

CASES OF GONORRHOEA IN FEMALES AGED 15 TO 19 YEARS PER 100,000 POPULATION IN ENGLAND AND WALES COMPARED WITH DENMARK, 1957-62

Year	England and Wales*	Denmark†
1957	77.8	461
1958	92.1	466
1959	—	555
1960	124.7	775
1961	124.2	826
1962	101.6	—

* Clinic figures only (see Table X).

† Data from Lind (1962).

For females, the published Danish rates per 100,000 are several times greater than those for the clinics of England and Wales (Table XVI, and Fig. 15, opposite).

It has been indicated above, however, that much of these differences arise from differences in reporting.

Indeed, it is a fact that countries with the best anti-venereal disease organizations, and consequently with the best reporting services, appear paradoxically to have the most cases of gonorrhoea. Nevertheless, it is noticeable that, whereas the problem of gonorrhoea in teenage females in Denmark was still increasing up to 1961, this trend had apparently ceased, at least for the time being, in England and Wales.

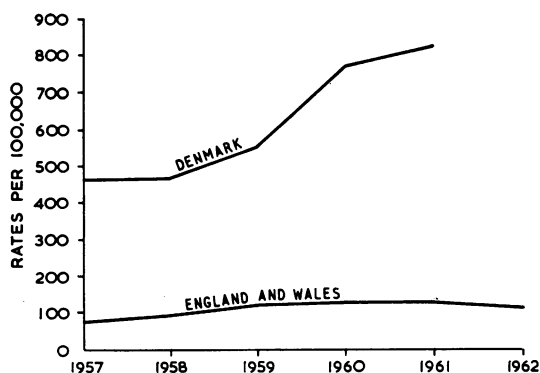


FIG. 15.—Number of cases of gonorrhoea per 100,000 female teenagers in England and Wales (1957–62) and in Denmark (1957–61).

Summary and Conclusions

- (1) The studies of the British Cooperative Clinical Group relating to the country of origin and age group of patients with gonorrhoea between 1952 and 1962 are reviewed. Between 1952 and 1961 the total number of cases in both sexes showed a steady rise, but there was a fall between 1961 and 1962.
- (2) From the national coverage obtained in these studies the estimated total numbers (by sex, age group, and country of origin) of persons attending the clinics of England and Wales have been calculated. In 1962, only 44 per cent. of the males with gonorrhoea were born in the United Kingdom compared with 78.7 per cent. of the females. In the same year, 28.3 per cent. of the males and 11.7 per cent. of the females with gonorrhoea were West Indians, and this ethnic minority it is calculated shows a rate per 100,000 nearly twenty times higher than that of the rest of the sexually-active population.
- (3) Between 1952 and 1961, the West Indians were responsible for 54.2 per cent. of the increase in males, and women born in the United Kingdom for 70.7 per cent. of the increase in females. The total numbers fell between 1961 and 1962, but the number of immigrants of both sexes with gonorrhoea increased. Had Britain achieved entry to the Common Market doubtless the numbers of immigrants contracting gonorrhoea after arrival in this country would have further increased.
- (4) In males in 1962, the estimated rates per 100,000 (relating only to male persons attending the clinics) were 111.2 for those

aged 15–19 years, 583.2 for those aged 20–24 years, and 290.0 for the rest of the sexually-active male population. The rates for males aged 15–19 years fell in 1962 after rising from 1957 to 1961.

- (5) In females in 1962, the estimated rates per 100,000 were 101.6 for those aged 15–19 years, 188.5 for those aged 20–24 years, and 43.2 for the rest of the sexually-active female population. The rates for females aged 15–19 years increased between 1957 and 1960, steadied in 1961, and decreased in 1962. Population increases have contributed to the falling rates in teenagers in both sexes. Females aged 15–19 years were responsible for no less than 31.1 per cent. of the increase between 1957 and 1961.
- (6) The two major problems of the West Indian males and mainly United Kingdom-born female teenagers with gonorrhoea, although interwoven, are considered—for a number of reasons stated—to be essentially different.
- (7) Trends in relation to teenagers with gonorrhoea in England and Wales are compared with those in Denmark.

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L'âge et le pays d'origine des malades atteints de blennorrhagie en Angleterre et au pays de Galles

RÉSUMÉ

(1) L'auteur passe en revue les enquêtes du groupe médical coopératif britannique sur l'âge et le pays d'origine des malades atteints de blennorrhagie de 1952 à 1962. Le taux augmenta régulièrement de 1952 à 1961 pour les deux sexes, mais diminua entre 1961 et 1962.

(2) Le nombre de malades fréquentant les cliniques antivénéériennes a été calculé à partir du taux national.

En 1962 44% des hommes et 78,7% des femmes atteints de gonorrhée étaient natifs du Royaume-Uni, tandis que 23,8% des hommes et 11,7% des femmes étaient des Indes occidentales; il y eut donc parmi cette minorité raciale vingt fois plus de malades que chez le reste de la population sexuellement active.

(3) De 1952 à 1961, 52,2% de l'augmentation chez les hommes fut dû aux immigrants des Indes occidentales, tandis que 70,7% de l'augmentation chez les femmes fut dû aux indigènes du Royaume-Uni. Le taux global diminua de 1961 à 1962, mais les immigrants des deux sexes atteints de blennorragie furent plus nombreux.

(4) En 1962, 111,2 sur 100.000 hommes âgés de 15 à 19 ans, 583,2 âgés de 20 à 24 ans, et 290,0 du reste des hommes sexuellement actifs furent atteints de blennorragie. Ces chiffres ont rapport seulement aux malades fréquentant les cliniques publiques. Le taux pour les jeunes gens de 15 à 19 ans diminua en 1962 après avoir augmenté de 1957 à 1961.

(5) En 1962, 101,6 sur 100.000 femmes âgées de 15 à 19 ans, 188,5 âgées de 20 à 24 ans, et 43,2 du reste des femmes sexuellement actives furent atteintes de blennorragie. Le taux pour celles âgées de 15 à 19 ans augmenta de 1957 à 1960, resta le même en 1961, et diminua en 1962; les jeunes filles furent responsables pour 31,1% de l'augmentation entre 1957 et 1961.

(6) Pour des raisons diverses, on regarde les deux grandes questions—celle des immigrants mâles des Indes occidentales et celle des jeunes filles de moins de 20 ans (la plupart nées au Royaume-Uni)—comme des problèmes différents, malgré leur entremêlement.