

Letters to
the Editor

Imported syphilis and other sexually transmitted infections among UK travellers to Russia and Poland

We wish to highlight an emerging risk associated with increased travel by UK residents to former eastern bloc countries.

In the last six months four patients have presented to the departments of genitourinary medicine at Oxford (3) and High Wycombe (1), with early acquired syphilis following heterosexual intercourse in Russia and Poland (1). Three were UK businessmen all of whom presented with a primary chancre, a condition now rare in the UK, and one man additionally had urethral gonorrhoea. It is of particular concern that all three of these patients had placed their sexual partners in the UK at risk of acquiring syphilis. One patient infected his wife and the wife of another patient is still undergoing investigation. The fourth patient is a Russian female who had been resident in the UK for some time and whose fiancé had recently visited her from Russia. She presented with pelvic infection but syphilis serology was positive and a history of a recent generalised rash was elicited. Her fiancé is undergoing investigation in Moscow.

In addition to these patients, in the last six months at least eight other males have presented with genital symptoms or for screening for sexually transmitted diseases following heterosexual intercourse in Russia, to the departments of genitourinary medicine at Oxford,

and all were found to have acquired at least one sexually transmitted infection.

Whilst the potential risk of acquiring HIV through sex abroad in sub Saharan Africa and south east Asia is well recognised and even mentioned in many holiday brochures, the risks associated with casual sexual contact in Russia and other former Eastern bloc countries are less well appreciated. The incidence of syphilis and other sexually transmitted disease has risen dramatically since the collapse of the Soviet Union, as reported recently in the news columns of the BMJ.^{1,2} It is clear that this trend poses serious risks to travellers, and also the prospect of secondary spread to sexual partners in the UK. A similar situation is now being described in Finland related to travel to Russia.³ This applies to the "traditional" venereal diseases such as syphilis as well as HIV infection. Physicians should be alert to these risks both in their advice to travellers and in those returning from Russia and other former Eastern bloc countries.

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- 1 Syphilis soars in Russia. *BMJ* 1995;311:77.
- 2 WHO fights "forgotten" diseases. *BMJ* 1996;312:659.
- 3 Increase of syphilis in Finland is related to the Russian epidemic. *Eurosurveillance* 1996;1:1.