

Gonorrhoea in homosexual men and media coverage of the acquired immune deficiency syndrome in London 1982-3

Although the number of cases of the acquired immune deficiency syndrome in the United Kingdom is still low at 51 (June 1984), there has been considerable media and public interest. Gonorrhoea is one of the most common diseases acquired by homosexual men. It has a short incubation period, and in the absence of routinely collected data on changes in sexual behaviour it serves as a reasonable surrogate index. A decrease of 39% was reported in the number of homosexual men with gonorrhoea in Denver between the beginning of 1982 and 1983.¹ We attempted to assess whether reports of the acquired immune deficiency syndrome in the national newspapers and magazines for homosexual people and on television altered the number of cases of gonorrhoea among homosexual men attending our department.

Methods and results

Patients attending this department are screened for infection with *Neisseria gonorrhoea*. We calculated the rate of gonorrhoea (number of patients with gonorrhoea/total number of patients with and without gonorrhoea) among homosexual and bisexual, and heterosexual, men attending our department from January 1982 to September 1983. The coverage of the acquired immune deficiency syndrome in the national newspapers was assessed from the records of the Hall Carpenter Memorial Archives, a charity that subscribes to an agency that monitors references to homosexuality in national newspapers. Additional information was obtained from magazines published in London for homosexuals, the Haemophilia Society, the Gay Switchboard, and the Terrence Higgins Trust. Measurement was confined to the national newspapers published in London (including the London evening paper but excluding regional, Welsh, and Irish newspapers) and magazines published in London for homosexuals. Two indices were compiled: the number of references to the acquired immune deficiency syndrome and the length in column centimetres of articles. Television programmes broadcast in London were also recorded. Comparison between quarters was carried out using χ^2 analysis.

During the whole of 1982 and the first quarter of 1983 the rate of gonorrhoea among homosexual and bisexual men remained fairly constant (table). In the second and third quarters of 1983, however, there was a reduction. The rates in these two quarters were significantly lower than in any of the preceding quarters ($p < 0.02$). During the study there were no substantial changes in the number of homosexual men seen or the number of homosexual men with other conditions not requiring treatment that might have accounted for the reduced rate of gonorrhoea. There was no decrease in the rate in heterosexual men.

The number of references and column centimetres devoted to the acquired immune deficiency syndrome increased considerably in the second and third quarters of 1983, the same periods in which we observed the lowest rates of gonorrhoea. During these quarters the first front page reports in the national newspapers and six of the seven television programmes giving substantial coverage to the syndrome occurred. Relevant calls received by Gay Switchboard increased from about 900 in the last two quarters of 1982 and the first quarter of 1983 to 1692 and 1422 in the second and third quarters of 1983 respectively.

Comment

The temporal association between the reduction in the rate of gonorrhoea in homosexual men and the extensive increase in the media coverage of the acquired immune deficiency syndrome strongly suggests a link between the two. Homosexuals might reduce the risk of acquiring the syndrome by reducing their number of different

sexual partners, modifying criteria for selecting partners, and changing their preferred sexual activities. This study suggests that such changes may be occurring in London as in the United States.^{2,3}

- 1 Judson FN. Fear of AIDS and gonorrhoea rates in homosexual men. *Lancet* 1983;ii:159-60.
- 2 Golubiatnikov R, Pfister J, Tillotson T. Homosexual promiscuity and the fear of AIDS. *Lancet* 1983;ii:661.
- 3 Schecter MT, Jeffries E, Contance P, et al. Changes in sexual behaviour and fear of AIDS. *Lancet* 1984;i:1293.

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Covert manifestations of child abuse

Child abuse is the non-accidental attack or injury inflicted on children by people caring for them.¹ The characteristic stigmata of such injuries have been identified and referenced for most regions of the body.² We present the first report of three cases of penetrating ear trauma resulting from child abuse.

Case reports

Case 1—A 2 year old girl with bleeding ears was found to have bilateral posterior tears of the tympanic membrane when examined under anaesthesia. The tears subsequently healed, but she was readmitted a further three times within two months for bleeding ears. She was examined under anaesthesia again and found to have lacerations of both posterior meatal walls. The mother subsequently confessed to having caused the injuries with an orange stick. At the age of 11 the mother had been a victim of child abuse when she was forced into an incestuous relationship with her father; four of her siblings had died in mysterious circumstances.

Case 2—A 16 month old boy had had recurrent bleeding from his ears for 10 months, which had resulted in a haemoglobin concentration of 7.4 g/dl. Bilateral perforations and lacerations of the anterior meatal walls were noted on examination under anaesthesia. While he was in hospital his ears bled on five occasions, always when his mother was present. She had been observed to ram a feeding bottle into his mouth, causing a palatal tear, and we suspected that she had deliberately wrenched a transfusion cannula from his arm. She was limited to supervised visits, and no further bleeding occurred. The mother had been deaf as a child and had worn bilateral hearing aids, which she resented.

Case 3—A 10 month old girl was seen 13 times in seven months for a bleeding right ear. At four of the consultations new tears of the tympanic membrane were noted and lacerations were seen on the anterior and posterior meatal walls. A deep burn sustained to her left hand necessitated admission to another hospital for skin grafting. While she was in hospital her right ear bled profusely and she developed gross cerebrospinal otorrhea. On several occasions after mastoid exploration there was considerable loss of blood and cerebrospinal fluid and the ear padding was missing. The ears healed only when dressings that could not be tampered with were applied. After an episode of haematemesis endoscopy was performed. Three deep lacerations were seen in the posterior pharyngeal wall, which were consistent with

Rate of gonorrhoea (number of men infected/total number seen) and media coverage of the acquired immune deficiency syndrome, January 1982 to September 1983

	Rate of gonorrhoea		Media coverage					
	Homosexual and bisexual men	Heterosexual men	National newspapers		Homosexual magazines		Total	
			No of references	Column cm	No of references	Column cm	No of references	Column cm
January-March 1982	242/1462 (16.6%)	103/1634 (6.3%)	0	0	3	70	3	70
April-June 1982	253/1656 (15.3%)	127/1816 (6.9%)	0	0	4	91	4	91
July-September 1982	238/1552 (15.3%)	114/1760 (6.5%)	1	50	9	313	10	363
October-December 1982	187/1356 (13.8%)	104/1631 (6.4%)	1	12	7	335	8	347
January-March 1983	213/1460 (14.6%)	89/1686 (5.3%)	3	149	14	532	17*	681
April-June 1983	161/1529 (10.5%)	119/1700 (7.0%)	77	1920	46	1820	123†	3740
July-September 1983	148/1504 (9.8%)	180/1726 (10.4%)	76	1428	59	1332	135‡	2760

*One television programme. †Two television programmes. ‡General news coverage on television on three occasions and one television programme.