



How to Prevent Sexually Transmitted Diseases

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What are sexually transmitted diseases (STDs)?

Sexually transmitted diseases (STDs) are infections that are spread by sexual contact. Sexually transmitted diseases can cause severe damage to your body—even death. Except for colds and flu, STDs are the most common contagious (easily spread) diseases in the United States, with millions of new cases of STDs each year. Although some STDs can be treated and cured, others cannot.

How are STDs transmitted?

A person with an STD can pass it to others by contact with skin, genitals, mouth, rectum, or body fluids. Anyone who has sexual contact—vaginal, anal, or oral sex—with another person may get an STD. People with an STD may not have any symptoms and may not know they have it. Even if there are no symptoms, your health can be affected.

What causes STDs?

Sexually transmitted diseases are caused by bacterial or viral infections. Sexually transmitted diseases caused by bacteria are treated with antibiotics. Those caused by viruses cannot be cured, but symptoms can be treated.

What are the risk factors for STDs?

The following factors increase the risk of STDs:

- More than one sexual partner
- A partner who has or has had more than one sexual partner
- Sex with someone who has an STD
- History of STDs
- Use of intravenous drugs (injected into a vein) or partner use of intravenous drugs Adolescents have a higher risk of getting an STD than adults.

What are some of the most common STDs?

- Chlamydia (see the FAQ [Gonorrhea, Chlamydia, and Syphilis](#))
- Gonorrhea (see the FAQ [Gonorrhea, Chlamydia, and Syphilis](#))
- Genital herpes (see the FAQ [Genital Herpes](#))
- Human immunodeficiency virus (HIV) infection (see the FAQ [HIV and Women](#))
- Human papillomavirus (HPV) infection (see the FAQ [Human Papillomavirus Infection](#))
- Syphilis (see the FAQ [Gonorrhea, Chlamydia, and Syphilis](#))
- Trichomoniasis (see the FAQ [Vaginitis](#))
- Hepatitis B (see the FAQ [Protecting Yourself Against Hepatitis B](#))

How can I reduce the risk of getting an STD?

There are many ways you can reduce your risk of getting an STD:

- Know your sexual partners and limit their number—Your partner’s sexual history is as important as your own. The more partners you or your partners have, the higher your risk of getting an STD.
- Use a latex condom—Using a latex condom every time you have vaginal, oral, or anal sex decreases the chances of infection. Condoms lubricated with spermicides do not offer extra protection. Frequent use of some spermicides can increase the risk of HIV.
- Avoid risky sex practices—Sexual acts that tear or break the skin carry a higher risk of STDs. Even small cuts that do not bleed let germs pass back and forth. Anal sex poses a high risk because tissues in the rectum tear easily. Body fluids also can carry STDs. Having any unprotected sexual contact with an infected person poses a high risk of getting an STD.
- Get immunized—Vaccinations are available that will help prevent hepatitis B and some types of HPV (see the FAQs [Human Papillomavirus Vaccines](#) and [Protecting Yourself Against Hepatitis B](#)).

How can STDs affect pregnancy?

Having an STD during pregnancy can harm the baby if it is passed to him or her. Gonorrhea and chlamydia both can cause health problems in the infant ranging from eye infections to pneumonia. Syphilis may cause miscarriage or stillbirth. Human immunodeficiency virus infection can occur in a baby. If you are pregnant and you or your partner have had—or may have—an STD, inform your health care provider. Your baby may be at risk. Tests for some STDs are offered routinely during prenatal care. It is best to treat the STD early to decrease the chances that your baby also will contract the disease. You and your partner both may have to be treated.

If you have further questions, contact your obstetrician–gynecologist.

Designed as an aid to patients, this document sets forth current information and opinions related to women’s health. The information does not dictate an exclusive course of treatment or procedure to be followed and should not be construed as excluding other acceptable methods of practice. Variations, taking into account the needs of the individual patient, resources, and limitations unique to institution or type of practice, may be appropriate.