



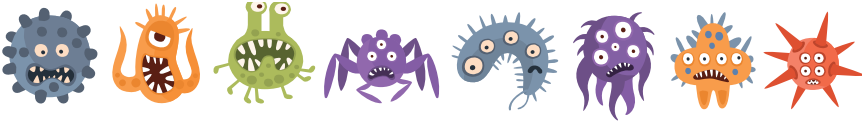
Centre
Hospitalier
de l'Ouest Vosgien

Welcome Brochure

FREE CENTER FOR INFORMATION, SCREENING AND DIAGNOSIS

CEGIDD

BLOODY DIARRHEA, HEPATITIS B, MYCOPLASMA, HERPES,



HUMAN PAPILLOMAVIRUS, SYPHILIS, CHLAMYDIA, HIV...

STIs – What if I were infected... without knowing it?

FREE SCREENING – AIDS, Hepatitis, Sexually Transmitted Infections

Pre-Exposure Prophylaxis (PrEP)

MONDAY & FRIDAY –
CH OUEST VOSGIEN
1280 AVENUE DE LA DIVISION
LECLERC
88300 NEUFCHÂTEAU

TUESDAY - THURSDAY
CH EMILE DURKHEIM
2 AVENUE ROBERT SCHUMANN
88000 ÉPINAL

FRIDAY AFTERNOON
CH INTERCOMMUNAL DES
HÔPITAUX DU MASSIF DES VOSGES
26 RUE DU NOUVEL-HÔPITAL
88000 SAINT-DIÉ-DES VOSGES

06 72 64 39 11

03 29 52 35 12

CEGIDD MISSIONS

- **Medical assessment:** evaluation of risks and prevention advice

- **Screening** tests for HIV, hepatitis, STIs (syphilis, chlamydia, herpes, gonorrhoea...).

- **Treatment of STIs.**

- **Referral** to specialists for HIV, hepatitis, or complicated STIs.

- **Pre-Exposure Prophylaxis (PrEP):** information, prescription, follow-up.

- **Post-Exposure Treatment (PEP)** within 48 hours after major risk.

- **Pregnancy testing, emergency contraception,** guidance for unwanted pregnancies.

- **Prevention and detection** of sexual violence, support for sexual orientation and gender identity issues.

- **Social support and connection** with associations.

- **Vaccination for sexually at-risk populations** (Hep A, Hep B, HPV, Mpox...)

SCREENING

What does the consultation involve?

Consultation includes a medical exam followed by nursing sample collection. Fasting is not required. Anonymity available on request.

What are the risks if you don't get tested?

STIs are often asymptomatic and may worsen over time.

Most STIs are easily curable if detected.

What should I do if I get an infection?

- Always use condoms.
- Seek appropriate medical care and return for follow-up.
- Inform all partners so they can be screened and treated.

IMPORTANT

If I engage in risky behavior without getting tested, I could infect my partners (if I'm infected)

In the case of a sexually transmitted infection (STI), **SEXUAL PARTNERS MUST BE TREATED AT THE SAME TIME** to prevent them from reinfesting one another.

Why I come...



"I want to know my status."

- "I had unprotected sex with several partners."
- "My partner cheated on me."
- "I had a condom failure with a casual partner."
- "My ex-partner informed me they are being treated for an STI."
- "I have genital symptoms."
- "I go to swingers' clubs."
- "I meet partners online or via social networks."
- "I frequent gay meeting places: saunas, bars..."

*"STIs have been rising c
ontinuously for 10 years!"*



- "I use drugs, I practice chemsex or slam and shared equipment"
- "I want information or a prescription for PrEP"
- "I travel and sometimes have sex abroad."
- "I live in / come from a high HIV/hepatitis prevalence country."
- "My ex-partner told me they are HIV- or hepatitis-positive."
- "I was a victim of sexual violence."
- "I am in prostitution."
- "I am starting a stable relationship and we would like to stop using condoms."



HAVE I TAKEN RISKS?

- Unprotected vaginal, anal, or oral sex.
- Protected sex but with condom failure.
- Drug use with shared equipment.
- Piercing/tattoo abroad or in poor hygiene.
- Blood exposure incidents.



If risk occurred ♥ 48h ago → go to the emergency department.



WHEN CAN I BE TESTED?

- HIV results reliable after 6 weeks.
- Test in case of symptoms.
- No fasting required.

With STIs, there are rarely any symptoms!

And I don't have to fast to get tested!

The Main STIs

(Sexually Transmitted Infections)

Name	Possible signs after infection	Diagnosis	Complications if untreated	Treatment	Vaccination
Gonorrhea / "the clap"	Within 2-7 days on average: burning and/or yellow discharge from the penis, vagina, or anus; fever; lower abdominal pain; sore throat.	Local swab/sample	Risk of genital infections or infertility	Antibiotics	No vaccine
Hepatitis B	Within 30-180 days on average: fatigue, muscle and joint pain, nausea, a risk urine, yellowish skin tone (jaundice).	Blood test	Risk of cirrhosis, liver cancer, possible liver damage even if infection is treated.	Recovery without treatment is possible, but medical follow-up is essential.	Very effective vaccine that protects throughout life. Talk with a doctor.
Mycoplasma / Trichomoniasis	Between 4 and 28 days: discharge from the penis, anus, or vagina; burning; itching.	Local swab/sample	Infection of the newborn during childbirth if the mother is infected.	Antibiotics combined with local treatment (creams, ovules).	No vaccine
Genital herpes	On average 1 week (1 day to several years possible): painful small blisters/clusters on the genitals; itching that may be accompanied by fever; stomach pain, and pain during urination.	Medical examination, local sample of lesions using a cotton swab.	Infection of the newborn during childbirth if the mother is infected.	Prescription medication to reduce pain and shorten outbreaks. Treatment does not eliminate the virus; outbreaks may return.	No vaccine
Human papillomavirus (HPV)	On average 3 months (3 weeks to several years): warts (condylomas) on the genital organs or anus.	Medical examination	Rare risk of cancer	Local treatment of warts (cream, etc.).	Recommended for girls and boys between ages 11 and 14, with catch-up vaccination possible.
Syphilis	On average 3 weeks: polymorphic signs — chancere (usually painless sore), pimples or small plaques; red patches on the skin and mucous membranes.	Medical examination and blood test	Damage to the brain, arteries, and eyes; infection of the newborn if the mother is infected.	Antibiotics by injection or tablets	No vaccine
Chlamydia	Most often no sign of infection. Sometimes, 2 weeks later: burning, discharge, fever, lower abdominal pain, possibly sore throat.	Local swab/sample	Risks of salpingitis, infertility, ectopic pregnancy, and infection of the newborn if the mother is infected.	Antibiotics	No vaccine
HIV / AIDS	About 15 days after infection: fever, skin rash, fatigue, diarrhea, etc. Infection may then remain silent for a long phase (months or years); symptoms appear again as immunity weakens.	Blood test (self-test sold in pharmacies; rapid screening test, standard screening test)	Possible progression to AIDS; affecting the newborn if the mother is infected.	No treatment completely eliminates HIV, but treatment blocks progression with lifelong medication.	No vaccine



PrEP



A method of preventing HIV, the virus that causes AIDS

PrEP prevents HIV infection with antiretroviral medication.

Who is this for?

For high-risk populations: MSM, sex workers, migrants, trans people, drug injectors, HIV-negative partners.

STATUTE OF LIMITATIONS: UNDER WHAT CONDITIONS?

Prescription only, 100% reimbursed

What is the dosage?

Daily or event-driven dosing.



*To be effective,
PrEP must be
taken correctly.*

Some information




BEFORE THE CONSULTATION

No fasting required.

Bring vaccination record

MEN :

 • urine test may be requested (avoid urinating 1 hour before).

WOMEN :

 • vaginal sample may be taken (avoid menstrual period).

cegidd@ch-ouestvosgien.fr

AIDS Info Service 0800 840 800 (Anonymous & toll-free call)

Drug Information 0800 23 13 13

Hepatitis Information 0800 845 800

