

# Warning—VD on the Rise

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VENEREAL DISEASE is a general name given to diseases caused by germs that are passed from one person to another by skin-to-skin contact—usually by intimate sexual contact. The two most common venereal diseases are SYPHILIS and GONORRHEA. These two serious and dangerous diseases strike people of all races, classes and ages, in all areas of the country. Teenagers and young adults are attacked at the rate of 1,500 a day! In Michigan alone, it costs the taxpayers about \$1.5 million to maintain in state institutions persons afflicted with syphilitic psychosis.

Most people are unaware that there is a worldwide epidemic of venereal diseases. In the U.S. there were more reported cases of gonorrhea than there were of hepatitis, measles, meningitis, rheumatic fever, and tuberculosis put together in 1968.

In 1969 the U.S. Public Health Service survey stated that they estimated the number of cases of gonorrhea at 1.5 million and syphilis cases at 70,000. Both diseases have spread rapidly since then.

In Detroit the Department of Public Health and private clinics like Open City's report a doubling of the number of cases of VD they've seen in the last year.

Although VD can cause infections, sterility, and brain damage, very little is being done to fight it. Many people think that syphilis is dangerous and that gonorrhea is just a nuisance, but it's not true—both are dangerous.

Gonorrhea can cause sterility and arthritis in women and blindness in children who are born to infected mothers. In its late stages syphilis can cause heart disease, blindness, and brain damage.

The trouble with VD is that people often don't suspect that they have it, or even that there is anything wrong with them until the late (and most dangerous) stages of the disease.

For men the symptoms of gonorrhea are painful urinating and/or a yellowish discharge from the penis. For women the symptoms are a grey, foul-smelling discharge and pain during intercourse. But often a woman has no symptoms at all if the infection stays in her vagina. She can, however, still transmit the disease.

If the germ travels up a woman's vagina into her uterus she experiences severe pain. No woman should wait until the disease is that far progressed since the chances of such complications are sterility and chronic infection will be much greater.

The early sign of syphilis in both men and women is the appearance of a chancre, which is a round, raised flat sore about one-quarter to one-half inch in diameter. The chancre usually appears on the genital organs and is usually painless. Just as in the case of gonorrhea, it is harder for a woman to detect the disease, since the chancre may be in her vagina, and therefore, not visible.

The second stage of syphilis may produce body rashes and falling hair. Those symptoms may cease without any medication, as will the chancre, but the disease remains.

Doctors' diagnosis and treatment of VD is often very poor, especially for women who have gonorrhea. Gram stains, the usual test for gonorrhea, is accurate for only 6 out of 10 people! The Chocolate Agar Culture, also used to test women, is a little better—accurate for 8 out of 10. The Thayer-Martin Culture is the newest and most effective test, but most doctors do not use it. So a woman may get a "negative" on her test and still have gonorrhea. Even if

her infection is discovered, a woman with gonorrhea is not always safe. Hospitals and clinics often treat women with 2.4 million units of penicillin, the effective dose for men. A woman needs twice that much.

A woman can find out if she is sterile by having a salpinogram, an x-ray which will show if her fallopian tubes are blocked by scar tissue or not. Sterility is incurable.

Gonorrhea does not make men sterile. It can, however, cause fibrous bands in their urethras which have to be removed by operation.

Syphilis is diagnosed by a blood test, or if a chancre is present, by looking for syphilis germs on pieces of the chancre under a Darkfield Microscope. Anyone who has gonorrhea should demand a test for syphilis also. The treatment for syphilis is penicillin.

Many doctors do not realize that there are penicillin-resistant strains of VD. After treatment you should wait two weeks and then have another checkup. If you still have VD, get new medicine or a new doctor.

The VD epidemic could be stopped, and since neither gonorrhea or syphilis are crippling until their later stages, there is no reason why they need be a threat. Yet last year 96 people were admitted to mental hospitals in New York City from brain damage due to syphilis!

Why is medical treatment and information about VD so hard to get? One reason is that our puritanical society still sees anything associated with sexual intercourse as sinful and disgusting, and so it pretends that VD does not exist—at least “nice” people don’t get it.

Another reason is that medicine in the U.S. is a male-dominated profession. Maybe if men had such serious repercussions from gonorrhea as women do, they would use better tests to detect it and accurate dosages of medicine to cure it. We also need more women doctors.

The real problem, of course, is that the medical profession is a money-making business and not a public service which people have control over. Preventive health care (meaning checkups every month or so) is necessary to prevent the spread of VD and other crippling diseases. Preventive medicine makes big money-making operations and extended hospitalization unnecessary.

## **WARNING!!!**

1. Anyone with either Syphilis or Gonorrhea may pass it to other persons before realizing that they are infected.
2. There is no vaccine to protect against either of these diseases.
3. There is no lasting immunity against either disease, and both can be caught any number of times.
4. They are different diseases caused by different germs. You may have both at the same time.
5. Germs are passed from one person to another—usually through intimate sexual contact.
6. The right drug, properly given, is the only cure for either disease. Quick treatment is important. Both diseases can be cured rather easily, but any damage already done cannot be repaired.
7. Anyone suspecting that they have been exposed to either syphilis or gonorrhea should go immediately to a doctor and ask to be examined for both diseases.



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