

Giardia Awareness Information Cards

Tool kit for putting together a Giardia Awareness Information Card

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Chapter 1

Introduction – aims and objectives of the Initiative

Health Challenge Wales

1. The key themes of Health Challenge Wales have been selected because they are considered to be those issues that constitute a significant proportion of the ill health that could be avoided. The prevention of infection, including sexually transmitted infections (STIs) is one of the key themes. This intervention is designed to prevent the transmission of Giardiasis a disease caused by *Giardia lamblia*. Although not technically an STI, Giardiasis can be transmitted by particular types of sexual activity and rates of infection amongst homosexual men are higher than in other groups of the population.
2. *Giardia lamblia* is a one celled protozoa that causes Giardiasis, a gastro-intestinal illness. Individuals are infected by consumption of contaminated food or water. Direct or indirect transfer of the parasite from human or animal faeces can also cause infection. Symptoms of Giardiasis include diarrhoea, stomach cramps, bloating, fatigue and weight loss. The symptoms may last for several weeks and individuals remains contagious for months.
3. Practicing homosexual men are at risk group for Giardiasisⁱ. *Giardia* is transmitted by unprotected anal sex and by oral-anal sex. Figures for infection rates amongst practicing homosexual men are difficult to isolate, since sexual orientation is not a generally regarded as an inquiry when Giardiasis is diagnosed. Research suggests that that the prevalence for infection within this group is 5-19%ⁱⁱ. Rates of infection in the UK are low 3220 cases were isolated in 2004, although the source of infection is not specified neither are the sufferers grouped in any wayⁱⁱⁱ.
4. Over the past three years figures for Giardia cases in Cardiff, the area of the pilot project, revealed that out of a total of 110 cases, 64 were males with a mean age of 35. This translates into a figure of 58%. In view of the average age it is a reasonable assumption that those males affected are likely to be sexually active and that some may partake in homosexual activities, although it should be noted that there is no hard evidence to support this assumption.
5. Research has consistently shown that the use of condoms is highly effective in the prevention of transmission of STIs. Use of condoms is also recommended as an effective barrier to the transmission of *Giardia lamblia* during anal or oral-anal sex^{iv}. However, levels of knowledge about Giardiasis in the general population are low, and the associations, where made, are primarily with contaminated water supplies.

6. This intervention is designed to raise awareness of Giardiasis within the homosexual population. It does so by providing a self selection information card placed at locations popular with homosexual men, as well as other location where there is a population of transient men for whom the information will be relevant. The information provided is simple, but is supported by details of other information sources, which can be followed up by the individual. Self protection through good personal hygiene practices and the use of condoms is advocated. In seeking to prevent infection this intervention addresses a key theme of Health Challenge Wales.

ⁱ J D Meyers, H A Kuharic & K K Holmes 'Giardia lamblia infection in homosexual men' British Journal of Venereal Disease Vol. 53 Issue 1 54-55. 1977

ⁱⁱ US Food and Drug Administration, January 1992

ⁱⁱⁱ HPA. Laboratory reports of all isolations in England and Wales 1986 – 2004.

^{iv} <http://www.tht.org.uk/health>

Chapter 2

Giardia Information Cards– Pre-considerations to running an Initiative

1. Initial considerations

Initial considerations for this project have to be addressed, including;

- What is the target group?
- Will the outcome have the desired outcome i.e. reducing Giardia incidents in the target group?
- How can the target group be reached?
- Who are the key partners in the initiative?
- How will the initiative be evaluated?
- Will the initiative deliver value for money?

2. Target Group

The target group for this initiative is homosexual men. This group has been selected because in homosexuals there is there both a large reservoir of infection (endemic level) and a prevalent mode of transmission. In a study in the United States *Giardia lamblia* was isolated from 13 percent of the homosexual and 3 percent of the heterosexual men^v. The target group therefore are the group in which infection is most likely, and for whom the information contained on the information card will be most relevant. There is also currently no advice available in Wales on Giardia; hence the Information Card will fill an information gap.

3. Achieving the desired outcome

The desired outcome for this intervention is to raise the levels of awareness and knowledge about Giardiasis and its methods of transmission amongst the homosexual community. It is acknowledged that the risk taking behaviour of this group is such that raising awareness and providing information about prevention of transmission may, of itself, not be enough to reduce infection levels. However it is considered that the provision of information may result in some behavioural change with consequent reduction of infection rates. Whilst this would be welcome, it is recognised that there are other factors that could contribute to a reduction. As such it would be impossible to isolate the effect of the Information Cards within this group of factors. Additionally, to measure the outcome from increase or reduction in infection rates would be impractical.

4. Reaching the Target Group

The intervention takes the form of provision of an Information Card which is distributed to premises likely to be visited by the target group with uptake through self selection. The premises are selected through local knowledge, and include gay pubs, clubs and saunas as well as premises which are frequented both by gay and straight men. These would include pubs and clubs and premises such as student unions and sports clubs. Consideration should also be given to providing cards to STI and GMU (genito-urinary medicine) clinics, GP surgeries and private clinics offering a Well Man service.

In the pilot project the cards were handed out at a large gay festival, (Mardi Gras) which is attended by over 40,000 individuals. Similar events can also be targeted for distribution of the cards. A total of 5,000 cards were distributed at the Mardi Gras by representatives of the Terence Higgins Trust who had their own stand at the event, as well as information displays on the fixed stands. A further 1,000 cards were also distributed by Trust outreach workers to gay venues in the city to supplement existing materials made available to the gay community by the Trust. The card template will also be used to produce additional cards in order to continue the programme on an ongoing basis.

5. Who are the key partners in the initiative?

The key partners to the pilot project were the local authority, the Terence Higgins Trust^{vi}, the National Public Health Service for Wales, through the CDSC and the CCDC, and the Local Health Board.

Other key partners may be the STI and GMU clinics, and GP practices. Gay and men's support groups may also be willing to be partners in this initiative, depending on their presence in the area in which the initiative is being run.

6. How will the initiative be evaluated?

This initiative is difficult to evaluate. Its purpose is to raise awareness of Giardiasis amongst a selected group of the population. To date no reliable evidence exists that indicates the base line level of knowledge amongst this group against which the effect of this project could be measured. It is also the case that comparisons with numbers of cases of Giardiasis being diagnosed pre- and post project will be unhelpful, since raising levels of awareness could have the effect of raising levels of diagnosis, as sufferers who had been unaware that they were infected could present and be clinically diagnosed. Whilst this would be encouraging, without accurate assessment of what caused the individuals to present for investigation it would be impossible to determine whether the Information Card was a factor. Such information is not routinely sought by clinicians. It is also the case that members of the homosexual community picking up the cards may be mobile and though becoming aware of the risk in the area running the intervention may present for diagnosis in another area. In such cases the case would be unrecorded in the area of the intervention.

Although not a wholly satisfactory method of evaluation it is considered that the uptake of the Information Cards should be used to measure the success of the initiative. The cards will be taken either by those wishing to inform themselves, or by those intending to pass them to others for their information. The number of cards being placed in the targeted premises would be known, and the sites monitored and replenished as necessary. The number of cards taken could be calculated. It is accepted that there will be loss of cards, some being taken and discarded and some being lost, but it is considered that the majority will be taken by individuals with a genuine interest in the information provided. It is therefore considered that the number of cards taken can be used as the method of evaluation for this intervention.

The information cards provide contact telephone numbers for organisations that can offer further advice if needed. In addition to the cards a fact sheet on Giardiasis has also been produced. In the pilot project this fact sheet is sent out to individuals who have been diagnosed with the infection and whose illness has subsequently been notified to the authority. Following the standard interview procedure the fact sheet is sent to the patient to supplement guidance given during the interview. The fact sheet contains the same type of information as is provided on the card but aims to target a broader audience.

When viewed as two separate entities the card and fact sheet represent a two pronged approach to raising levels of awareness and knowledge within the population as a whole. Therefore, a potential future increase in the number of notifications of Giardiasis could be taken as being indicative of the success of the project.

7. Will the initiative deliver value for money?

This intervention is inexpensive to run. The main costs to the local authority and its partners in the pilot project were in the collation of information for the Giardia Information Card and in its translation, art and design work, printing and dissemination. In the pilot project the initial run of 6000 cards cost £430 to produce.

Those running this initiative may wish to explore the possibility of obtaining commercial sponsorship to cover the costs of production, from condom manufacturers or from private clinics offering a Well Man programme. This will be a matter for local decision.

It is suggested that whether commercial sponsorship can be obtained or not, this initiative does deliver value for money in financial and in health and well being terms.

^v Phillips SC, Mildvan D, William DC, Gelb AM, White MC. "Sexual Transmission of Enteric Protozoa and Helminths in a Venereal-Disease-Clinic Population." The New England Journal of Medicine, 1981; Vol. 305 No. 11 (603-606).

^{vi} www.tht.org.uk

Chapter 3

Giardia Information Cards

The Scheme

Distribution of free credit card sized cards printed with personal health protection messages relating Giardiasis.

Preliminary steps

1. The first step to be taken in this project is the establishment of a multidisciplinary task group to take the project forward. This group, it is suggested will include the, Environmental Health Practitioners from the Communicable Disease team and staff, the National Public Health Service for Wales and organisations in the voluntary sector, including the local representatives of the Terence Higgins Trust.
2. There are a number of decisions to be made by the task group prior to the commencement of the initiative.
 1. The target group – in the pilot project members of the homosexual community were selected.
 2. The premises at which the initiative is to be run
 3. The health message/s to be put promoted

Selection of the premises at which the initiative will be run will be determined through selection of the target group. Local knowledge will advise the selection of the premises.

3. Selection of the type of card to be used will have to be determined. The card used in the pilot project was credit card sized. Cards of this size and shape are common, as similar cards are issued by banks, transport companies and by other premises such as Video Hire Shops and libraries. The card will also fit easily into wallets and purses and is therefore user friendly.

The personal health protection messages regarding Giardiasis to be used and the number of different messages to be promoted will be a matter for local decision. The message to be promoted should simple and capable of being easily understood. The homosexual community use very robust language to describe practices and activities and care must be taken to ensure that the content of the cards, whilst being easily understood by the target group, does not give offence to members of the non-target group. It is suggested that bright colours should be used, to ensure that the cards are noticeable.

The bilingual Giardia Information card produced for the pilot project is shown as [Appendix 1](#).

Launching the Giardia Information Cards.

4. Prior to the launch it is important to ensure that the premises where cards will be available have sufficient number of cards to meet anticipated need. The cards should be made available at the premises from an agreed date, which will be the

launch date for the initiative, and will be available at the premises on and from that date.

5. Maximum impact can be achieved by launching the Giardia Information Cards on an agreed date with a high profile event and ensuring that there is as much media coverage of the launch event as possible. However, it is acknowledged that the nature of the information contained in the card and the identity of the target group may make such an event impractical. It is suggested that the launch of the card be limited to a press release targeted at the elements of the local media likely to deal with the issue in a responsible manner. This will raise levels of awareness in the target group about the cards and may also have the effect of causing individuals to seek out the cards, either for themselves or for their friends or family members.

Monitoring and maintaining the Initiative

6. In order to judge the success or otherwise of the scheme the evaluation work suggested in Chapter 2 of this tool kit should be undertaken on a regular basis. It is essential that the number of cards being placed in each of the target premises at the start of the initiative is known, and that the sites are revisited and monitored on a regular basis. The number of cards taken from each site should be calculated and those cards taken replaced. This will allow for calculation of the total number of cards taken to be undertaken, and will also allow for identification of those premises from which the greatest number of cards is taken, which information may be of value if further initiatives directed at the same target group are planned.
7. The fact sheet produced as part of this initiative is viewed as a free standing addition to the project. It can be provided to those requesting it, but is also supplied to diagnosed Giardiasis sufferers to supplement information they receive as part of the post diagnosis interview procedure. The project could be expanded through work with partnership organisations such that they could adopt the material and include it in their catalogue of information. This will be a matter for local decision based upon local need. The fact sheet is shown as [Appendix 2](#).

Appendix 1

Giardia Awareness Information Cards as used in the pilot project

See file – [**“12 b Giardia Information Card Appendix 1 \(Bi Ling\).pdf”**](#)

Appendix 2

CARDIFF COUNTY COUNCIL REGULATORY SERVICES ADVICE NOTES ON INFECTION

GIARDIASIS

What is giardiasis?

Giardiasis (pronounced GEE-are-DYE-uh-sis) is an illness caused by *Giardia lamblia*, a one-celled, microscopic parasite that lives in the intestines of people and animals. The parasite is found in every part of the U.K. and throughout the world.

What are the symptoms of giardiasis?

Diarrhoea, abdominal cramps, and nausea are the most common symptoms of giardiasis. These symptoms may lead to weight loss and dehydration. However, not everyone infected has symptoms.

How long after being infected do symptoms appear?

Symptoms usually appear 1-2 weeks after infection with the parasite.

How do you contract giardiasis?

- By direct contact with the droppings of infected animals or the stool of infected humans.
- By swallowing water contaminated with *Giardia* cysts (the infectious stage of the parasite), by consuming water from swimming pools, lakes, rivers, springs, ponds or streams contaminated with sewage or faeces from humans or animals.
- By eating raw or undercooked food contaminated with *Giardia* cysts.
- By hand to mouth transfer of cysts from surfaces (i.e., toys, bathroom fixtures, changing tables,) contaminated with microscopic amounts of stool from an infected person or animal.
- The illness can be transmitted as a result of participation in homosexual activities. Homosexual men are at greater risk. Anal sex is another means by which the disease may be contracted. If you take part in either of these acts it is important to observe scrupulous personal hygiene to avoid potential infection via a faecal – oral route.

What is the treatment for giardiasis?

If you have any queries regarding your symptoms you should consult your G.P. In most people symptoms are self-limiting, although they may last several weeks.

How can I prevent getting giardiasis in the future?

- Wash hands with soap and water after using the toilet and before handling food.
- Avoid water or food that may be contaminated and wash all raw vegetables and fruit before eating.
- Wash hands after contact with animals.
- Avoid drinking water from lakes, rivers, springs, ponds, or streams.
When travelling in countries where the water supply may be unsafe, avoid drinking unboiled tap water and avoid uncooked foods washed with unboiled tap water. Bottled or canned beverages or pasteurised fruit drinks, and steaming hot coffee and tea are safe to drink. You should check the label on bottled water to make sure it has been properly filtered before drinking.

Am I at risk of passing the infection on?

If you work as a food handler, health care worker or have close contact with young children, you should stay off work until you have been clear of symptoms for 48hrs. You should inform your employer.

If the infection is in a young child you must keep them away from playgroups or nursery until they have been free of symptoms for 48hrs.

You may still be infectious for a period of weeks after your symptoms have subsided and in this period you should be extra careful about personal hygiene and ensure you or your child wash their hands thoroughly with soap and water after using the toilet and before handling food.

This fact sheet is for information only and is not meant to be used as a substitute for consultation with your G.P. Further information on this and other types of food poisoning may be obtained from the Infectious Disease Control section of Cardiff County Council, Regulatory Services by telephoning:

Cardiff [029] 20871659 or 20871161 or 20871124

WHAT IS GIARDIASIS?

It is an illness caused by a parasite called Giardia.

WHAT ARE THE SYMPTOMS?

Diarrhoea, abdominal pain, nausea and occasional weight loss. These symptoms can persist for several months.

HOW CAN YOU GET IT?

- ▶ Direct contact with stools/droppings from infected people/animals.
- ▶ Swallowing contaminated water.
- ▶ Eating raw/undercooked contaminated food.
- ▶ Hand to mouth transfer.

WHY IS IT A PROBLEM?

One person can pass millions of infected parasites every day. Anal sex activities present a higher risk of infection.

HOW CAN YOU AVOID IT?

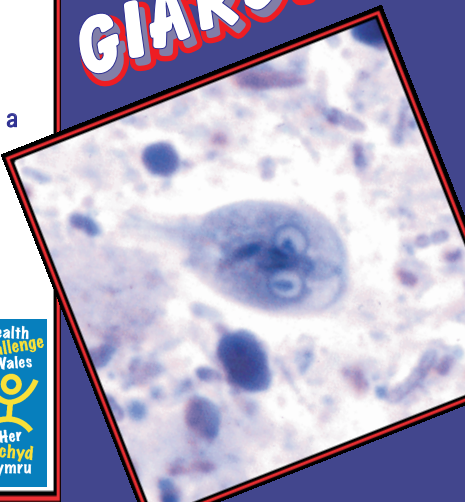
- ▶ Wash hands with soap and water after using the toilet/before handling food/after contact with animals.
- ▶ Use a barrier between mouth and anus; such as a flattened condom or a dental dam.
- ▶ Avoid drinking water from recreational sources.



This card has been produced as a joint initiative between Cardiff County Council and Terrence Higgins Trust Cymru. Should you need more information telephone: THT Direct 0845 12 21 200 NHS Direct 0845 4647 or contact your GP.



GIARDIASIS



BETH YW GIARDIASIS?

Salwch a achosir gan barasit o'r enw Giardia.

BETH YW'R SYMPTOMAU?

Dolur rhydd, poen abdomenol, cyfog a cholli pwysau o bryd i'w gilydd. Gall y symptomau hyn barhau am sawl mis.

SUT ALLWCH EI GAEL?

- ▶ Cysylltiad uniongyrchol â chach/gollyngiadau o bobl/anifeiliaid heintiedig.
- ▶ Llyncu dwr heintiedig.
- ▶ Bwyta bwyd heintiedig amrwd/heb ei goginio'n gywir.
- ▶ Trosglwyddiad o'r law i'r geg.

PAM MAE'N BŵBLEM?

Gall un person basio miliynau o barasitiaid heintiedig pob dydd. Mae gweithgareddau rhyw rhefrol yn creu risg haint uwch.

SUT ALLWCH EI OSGOI?

- ▶ Golchi'ch dwylo â sebon a dwr ar ôl defnyddio'r toiled/cyn ymdrin â bwyd/ar ôl cysylltiad ag anifeiliaid.
- ▶ Defnyddio rhwystr rhwng y geg a'r anws; megis condom gwag neu debyg.
- ▶ Osgoi yfed dwr o ffynonellau nad ydynt yn gyfleusterau swyddogol.



Cynhyrchwyd y cerdyn hwn fel menter ar y cyd rhwng Cyngor Sir Caerdydd a Terrence Higgins Trust Cymru.

Pe bai angen mwy o wybodaeth arnoch, Ffoniwch:

THT Direct 0845 12 21 200

GIG Uniongyrchol 0845 4647

neu cysylltwch â'ch Meddyg.



GIARDIASIS

