



Ministry
of Defence

Defence Statistics Health
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Reference: **FOI 2018/10121**

3 September 2018

Dear [REDACTED],

Thank you for your email of 30 July 2018 requesting the following information:

*"Under the FOI act, can you provide details of the number of UK Armed Forces personnel with diagnostic read code for a sexually transmitted disease for the dates 2016 to 2016.
If possible I would like the figures broken down by service, sex and the name of disease"*

I am treating your correspondence as a request for information under the Freedom of Information Act 2000.

A search for the information has now been completed within the Ministry of Defence, and I can confirm that information in scope of your request is held.

Between 1 January 2016 and 31 December 2016, **2,313** UK Armed Forces personnel have had a diagnostic Read code for a sexually transmitted disease (STD) entered into their electronic primary health care record¹. Please note that this includes personnel that are no longer serving.

Table 1: UK Armed Forces personnel with a Read code for a sexually transmitted disease by Service, gender and name of disease, numbers ^{1,2}

1 January 2016 to 31 December 2016

	All Services			Naval Service			Army			RAF		
	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female
All	2,313	2,050	263	514	473	41	1,422	1,255	167	378	323	55
Chlamydia	868	746	122	194	175	19	552	470	82	123	102	21
Genital Herpes	368	273	95	86	70	16	219	164	55	63	39	24
Genital Warts	391	369	22	73	~	~	261	247	14	57	~	~
Hepatitis B & C	36	~	~	~	~	0	31	~	~	~	~	0
HIV	50	41	9	8	8	0	36	27	9	6	6	0
PID ³ and epididymitis	614	594	20	151	~	~	335	~	~	128	~	~
Other ⁴	39	~	~	8	~	~	27	~	~	~	~	~

Source: DMICP

1. Personnel have been counted once per disease and only once overall, thus the sum of all STD categories will not equal the overall number of STDs i.e. if personnel had a Read code for Chlamydia and Genital Herpes, they would be counted once in each STD category in the table above but only once in the overall total.

2. Personnel who changed Service during the time period were counted in each Service they appeared in.

3. Pelvic Inflammatory Disorder.

4. Other STDs includes: Gonorrhoea, Molluscum contagiosa, Pediculosis Pubis, Syphilis, Trichomonas and unspecified STDs

~ In line with JSP 200 on statistical disclosure, figures less than five have been suppressed. Please see background notes for more information.

¹ Defence Medical Information Capability Programme (DMICP)

Under Section 16 (Advice and Assistance) you may find it helpful to note the following:

Please note, the figures presented are for all UK Armed Forces personnel who have served at some point between 1 January 2016 and 31 December 2016. This would include some personnel who only served for a short time and who have now left service.

UK Service personnel comprise the total strength of the military personnel employed by the Ministry of Defence. This includes:

- All UK Regular personnel and all Gurkha personnel.
- Volunteer Reserve personnel.
- Other Personnel including the Serving Regular Reserve, Sponsored Reserve, Military Provost Guard Service, Locally Engaged Personnel and elements of the Full Time Reserve Service (FTRS).

The conditions for inclusion were identified from the Sexual Health and HIV Activity Property Type (SHHAPT) coding. This is the way in which Public Health England have directed that Sexual Health and HIV activity be recorded both within Sexual Health clinics and within Defence Primary Health Care. Specific conditions have also been searched for and categorised in line with the SHHAPT coding.

It is Defence policy that Service personnel can choose to attend NHS and private sexual health clinics. Therefore, these figures may not represent all personnel who have had a STD within the time period.

For some of the conditions searched for sexual transmission is not the only route of transmission, therefore these figures may overestimate the number of personnel with an STD.

It is not possible to identify from the coded information which patients are currently experiencing a particular medical condition. The codes only show the number of personnel who have had a code entered in their record for a condition.

Defence Medical Information Capability Programme (DMICP) has a centralised data warehouse of coded information. It is the source of electronic, integrated healthcare records for primary healthcare and some MOD specialist care providers. DMICP was rolled out in 2007 and legacy medical data for currently serving personnel was migrated across during rollout.

Please note that if information was entered as free text in the patient record then it is not available in the DMICP data warehouse and will not be retrieved using the search for read codes.

DMICP is a live data source and is subject to change. Date of extract 17 August 2018.

The tables in this report have been scrutinised to ensure individual identities have not been revealed inadvertently. In line with JSP 200 (March 2016), all numbers less than five have been suppressed and presented as '~'. Where there is only one cell in a row or column that is less than five, the next smallest number (or numbers where there are tied values) has also been suppressed so that numbers cannot simply be derived from totals.

If you are not satisfied with this response or you wish to complain about any aspect of the handling of your request, then you should contact me in the first instance. If informal resolution is not possible and you are still dissatisfied then you may apply for an independent internal review by contacting the Information Rights Compliance team, 1st Floor, MOD Main Building, Whitehall, SW1A 2HB (e-mail CIO-FOI-IR@mod.uk). Please note that any request for an internal review must be made within 40 working days of the date on which the attempt to reach informal resolution has come to an end.

If you remain dissatisfied following an internal review, you may take your complaint to the Information Commissioner under the provisions of Section 50 of the Freedom of Information Act. Please note that

the Information Commissioner will not investigate your case until the MOD internal review process has been completed. Further details of the role and powers of the Information Commissioner can be found on the Commissioner's website, <http://www.ico.gov.uk>.

Yours sincerely

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