

Sexual Health Indicators List: Toronto Community Health Profiles

Indicator/Definition	Source	Main Use	Limitations
<p>Sexually Transmitted Infection Rates</p> <p># confirmed cases gonorrhoea /100,000 males</p> <p># confirmed cases of gonorrhoea/ 100,000 females in specified time period for ages, 15-19, 20-24 and 25+</p> <p># confirmed cases of chlamydia/100,000 males and</p> <p># confirmed cases of chlamydia /100,000 females in specified time period for ages, 15-19, 20-24 and 25+</p>	<p>Toronto Data: Data as of November 24, 2005, Toronto Public Health [RDIS]</p> <p>Population Data: Statistics Canada 2001 Census.</p> <p>Under the authority of the Health Promotion & Protection Act, laboratories and health professionals are required to report a number of communicable diseases (including sexually transmitted infections) to the Medical Officer of Health where the patient resides. From 1990 to November 24, 2005, the Ministry of Health and Long-Term Care's (MOHLTC), Reportable Diseases Information System (RDIS) was used to record reportable disease data.</p>	<p>To determine if there are neighbourhoods in the city with higher rates of sexually transmitted infections.</p> <p>To compare the distribution pattern of these infections with other health status indicators.</p>	<p>1. The number of cases and rates are under reported for several reasons including:</p> <ul style="list-style-type: none"> -Not all infections with a reportable communicable disease cause clinical signs and symptoms. -Individuals who do experience illness do not all seek medical care. -Health care providers do not always recognize that a diagnostic laboratory test is warranted. -Reports rely on a passive surveillance system, wherein laboratories, physicians, other health care providers, and institution administrators are entrusted to know the regulations, recognize a disease they are suspecting is on the reportable disease list, and promptly inform public health. -For some individuals, postal code data was either invalid, missing or non-residential and these cases could not be mapped to a neighbourhood. <p>2. Episode Date: Dates for episodes of diseases refer to the best estimates for when the disease was acquired. The date of symptom onset is usually the preferred date, but when that is unavailable the date a specimen was collected or the date the report was made to TPH are used.</p> <p>3. Place disease acquired: Cases summarized in this report reflect the neighbourhood of residence of each individual at the time of their diagnosis, not necessarily where they acquired the disease. See below</p>

Comments/notes:

- Date of download = November 24, 2005.
- Data for cases with episode dates between Jan 1, 2002 to Dec. 31, 2004.
- Geographic coding based on the PCCF + VERSION 4D - July 2004.
- There were a total of 24,225 cases of which 1,161 were not assigned a census tract because of either a missing/invalid address or clinic/business as address.