BLOOD RULES, OK

Protect yourself in sport and play…
Be Blood Aware!

- *INFECTIONS*
- *TRANSMISSION*
- *PREVENTION*
- *RISK*
- *DISCRIMINATION*

Information about infectious diseases in sport for players, coaches, trainers, first aid personnel, officials and club administrators.

INFORMATION BOOKLET

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INTRODUCTION

Why do I need to be Blood Aware?

Although we usually think of sport as healthy activity, people have become much more aware and concerned about the transmission of diseases through participation in sport.

A number of blood-borne viruses have the potential to be transmitted during sporting contact. The more serious ones, HIV, hepatitis B and hepatitis C, can greatly affect your health. Even the more common infectious diseases such as colds and the flu may be spread during the close contact of sport and while not usually as serious, these illnesses will reduce your competitiveness and enjoyment of the game.

"It doesn't matter if you are an elite athlete or if its the local footy game just down the street, you'll have to know how to deal with the Blood Rule because you never know what viruses people have."

Dr. Ron McCoy
HIV & Hepatitis Specialist
Blood Rules, OK Video

Individuals and sporting clubs have the responsibility of playing their part in preventing the spread of infection through participation in sport. Players, officials, coaches, sports trainers and first aiders can be blood aware by following some simple guidelines and encouraging each other to do likewise. Clubs can be blood aware by adopting an infectious disease policy, providing information such as the pamphlet in the *Blood Rules, OK* kit to players, and maintaining a safe and clean environment for players and spectators alike.

In the light of HIV and other blood-borne viruses, attitudes to blood on the field or court have changed considerably in the past ten to twenty years. This booklet has been written to help people understand blood-borne viruses and other infectious diseases, how they are transmitted and what actions can be taken to prevent their spread through participation in sport.

We're not a contact sport!

Most people associate 'blood rules' with contact sports where the risk of collision and injury, and therefore blood spills, are greatest. However, all sports from time to time involve injury, and the playing field is only one area in which the risk of infection needs to be reduced.

"It's not the sport, it's the blood we should be concerned about."

Dr. Ron McCoy
HIV & Hepatitis Specialist
Blood Rules, OK Video

The social aspect of people's involvement in a sporting club may also expose them to infectious diseases that can be passed on through sexual activity and injecting drug use.

We don't attract people like that!

With the number of people who attend on match days - players, officials and spectators - or other events run by your club, it's possible that someone has a blood-borne virus. With some blood-borne viruses, a person with the virus may show few, if any, signs of infection for many years. Indeed, many people don't even know they have the sorts of viruses we're going to discuss in this booklet.

However, not knowing doesn't mean that the virus can't be transmitted. The best way to deal with the risks involved is to simply adopt preventative measures many of which are described later in this booklet.

We only have juniors!

Sure, some blood-borne viruses are more common in adults than children, but that doesn't make it impossible for children to be infected. Babies and children who are infected with hepatitis B, for example, can have the virus and show no symptoms.

We only have older players!

It's true that some sports mostly attract older adults, but being older is no guarantee of being free of the risk of infection.

How do I use this booklet?

You can use this book on its own or as an extra source of information when presenting or watching the video *"Blood Rules, OK"*. The booklet follows a similar format to the video. If you are responsible for presenting the video to others, you may like to pause the video at key points (times from beginning of opening scene are given) and discuss these with the group referring to the relevant chapters, one to five in the booklet. Information about how to obtain a copy of the video is contained on page 26 of this booklet.

There are eight chapters in this booklet…

Chapter 1 [1min:44sec]

Infections and How They're Transmitted, describes the most significant infectious diseases, blood-borne viruses, and how they are transmitted from person to person. Other infectious diseases that can be transmitted through close personal contact including sexual contact are briefly listed, with full descriptions contained in the Fact Sheets in Chapter 7.

Chapter 2 [5min:22sec]

Prevention on the Field outlines the ways in which people can best prevent the spread of blood-borne viruses and other infections on the playing field and in club facilities.

Chapter 3 [11min:48sec]

Discrimination and Exclusion of Players gives information to assist sporting clubs and associations an understanding of their rights and responsibilities in the event of it becoming known that a player or member is infected with a blood-borne virus. It also describes the rights of people who have a blood-borne virus in the context of their participation in sport.

Chapter 4 [14min:37sec & 20min:40sec]

Risk of Infection Through Sport provides information about the risk of infection by a blood-borne virus through participation in sport.

Chapter 5 [17min:30sec]

Prevention off the Field describes the steps people can take to reduce the risk of transmission of blood-borne viruses through sexual activity and use of injecting equipment. While these behaviours do not necessarily occur within the sporting context, they present the greatest risk of infection through the social side of your club or association.

Chapter 6

Becoming a "Blood Aware" Club has been written to encourage and guide sporting organisations to adopt policies and practices which protect the health of all participants.

Chapter 7

Fact Sheets provides more detailed information about the infectious diseases mentioned only briefly in the first chapter of the booklet. If you are worried about your health we strongly recommend you contact your doctor or local community health centre.

Chapter 8

Where to Go for Further Information lists some useful sources of information if you want to find out more about a particular topic, if you have concerns which you would like to discuss confidentially, or where to obtain copies of the educational resource kit *Blood Rules, OK*.

Blood-Borne Viruses

Viruses, like other microscopic organisms, live in, on and around us all the time. When they (a) exist in sufficient quantities, (b) are able to spread from someone or something (like food or animals) and (c) enter your body, they can cause disease. When our bodies are under stress, for example during periods of intensive training for competition, we are more susceptible to illness caused by these tiny germs.

Blood-borne viruses are those which are transmitted from one person's blood to another person's blood stream.

Hepatitis

Hepatitis means inflammation of the liver. The liver is responsible for filtering the blood and breaking down food and poisons in the body. Viral hepatitis (often simply called hepatitis) refers to a number of different viruses which affect the liver and can potentially cause fever, vomiting, jaundice (where the eyes and skin go yellow) or sometimes permanent liver damage, even cancer. Sometimes people with hepatitis have no obvious symptoms but may still be able to infect others. The most significant types of hepatitis are A, B & C and these are described below.

Several new types of hepatitis have been discovered in recent years (hepatitis D, E, & G), and it is possible that more strains will be identified in the future. Other forms of hepatitis (non-viral) can be caused by alcohol or drug abuse (including steroids).

Hepatitis A

Hepatitis A is passed on through contaminated food or water, or through oral contact indirectly with infected faeces (poo). This is why it's important to always wash your hands after going to the toilet and immediately prior to handling food.

In older children and adults the symptoms include fever, nausea, abdominal discomfort, dark urine, and yellow skin and eyes (called jaundice). Many people with hepatitis A show few or no symptoms, particularly children less than three years old.

Hepatitis A is not a chronic (prolonged) infection and people who've had hepatitis A cannot be reinfected. An effective vaccine is available.

Recommended fact sheets
http://www.health.gov.au/hfs/pubhth/strateg/hiv_hepc/hepc/index.htm
http://www.hepatitisaustralia.com

Hepatitis B

Hepatitis B is highly infectious - about 100 times more infectious than HIV. In Australia, most hepatitis B infections occur in adolescents and young adults. It is transmitted via body fluids (blood, semen, vaginal fluid, saliva or breast milk) from one person into another. Hepatitis B can be passed on during vaginal or anal sex, through sharing injecting equipment or body piercing and tattooing with improperly cleaned and sterilised equipment. Even sharing toothbrushes, razors, nail files, nail scissors or other personal equipment where small traces of blood may be present can be risky.

Symptoms of hepatitis B include loss of appetite, nausea, vomiting, pain in the abdomen and/or joints, fever and jaundice. Normally these symptoms disappear in a few weeks.

Some people who are infected with hepatitis B do not get ill and some show no symptoms at all. A small number, about 10% who look and feel well, will still be able to transmit the virus to others. Babies and children with hepatitis B are more likely than adults to be able to do this. An effective vaccine is available.

There have been a number of reported cases of hepatitis B being spread through sporting activities. These were mainly due to poor infection control measures in the past when the risks of infection through blood contact were not widely known. An increasing number of sports are encouraging players, coaches, officials, trainers, and first-aiders to be vaccinated against hepatitis B.

Hepatitis C

Hepatitis C is a blood-borne virus and is the most commonly reported notifiable infectious disease in Australia, with an estimated one in a hundred people infected. (Notifiable diseases are those that doctors must report to State or Territory Health Departments). In Australia, hepatitis C is most commonly transmitted through the sharing of contaminated needles, syringes and other injecting equipment by people who inject drugs.

Hepatitis C can also be spread by using body piercing and tattooing equipment which has not been properly cleaned and sterilised, as well as by sharing toothbrushes, razors, nail files, nail scissors or other personal equipment where small traces of blood may be present. Sexual transmission of hepatitis C is unlikely.

People with hepatitis C may initially show only mild, flu-like symptoms, or no symptoms at all. Symptoms that do appear include dark urine, signs of jaundice, nausea and tiredness.

Once infected with hepatitis C, over 70% of people will not clear the virus from their bodies, and as a result may be capable of transmitting the virus to others. No vaccine is available.

Human Immunodeficiency Virus (HIV)

Human immunodeficiency virus (HIV) is the blood-borne virus that can lead to AIDS (Acquired Immune Deficiency Syndrome). HIV can be passed on through anal or vaginal sex without a condom, through sharing equipment used for injecting drugs, from an infected mother to her baby during pregnancy, birth or breast feeding, and much less commonly, through oral sex where a person has cuts or sores in their mouth.

Some years after an HIV infection, a person's immune system can become so weak that it can no longer fight off infections, and this is when the person is said to have developed AIDS. A person with HIV gradually loses immune function along with certain immune cells, called CD4 T-lymphocytes.

HIV infection is detected by a blood test to see whether there are HIV antibodies present in the bloodstream (the body develops antibodies to fight HIV). In most people, if antibodies are present they can be detected within three months of infection.

Some of the common symptoms and physical signs of AIDS are also common to a number of other illnesses, and can include: recurrent fevers, chills and night sweats; extreme and constant tiredness; a persistent or dry cough; diarrhoea; decreased appetite; rapid weight loss, swollen lymph glands, white spots or unusual marks in the mouth, and purplish raised or flat marks or bumps on the skin.

About 50% of people with HIV will develop AIDS within 10 years, and close to 70% within 15 years. No vaccine is available for HIV and there is no cure for AIDS. There are a number of drug therapies that can delay the progression of HIV infection to AIDS.

Recommended fact sheets
http://www.health.gov.au/hfs/pubhth/strateg/hiv_hepc/hepc/index.htm
http://www.hepatitisaustralia.com

Other Infections

There are a number of other infectious diseases, caused by viruses, bacteria, fungi and tiny parasites that can have an effect on the health and performance of people participating in sport. Some may be transmitted during play, some through social activities after the game. The way in which they are passed on from person to person varies and some are more serious than others, particularly if left untreated. The fact sheets in the last chapter provides information about each of the following:

Bacterial Infections

- **Chlamydia, Pelvic Inflammatory Disease (PID) and Non-specific urethritis (NSU)**
- **Gonorrhoea**
- **Scrumpox**

Viral Infections

- **Influenza**
- **Genital Warts (HPV)**
- **Genital Herpes (HSV-1 and HSV-2)**

Fungal Infections

- **Tinea**
- **Thrush**

Parasitic Infections

- **Pubic Lice**
- **Scabies**

How infections can spread through sport

People can be exposed to infection through participation in sport in a variety of ways:

- Through blood to blood contact via broken skin and open wounds. Of most concern are the serious blood-borne viruses such as HIV and hepatitis C.
- Through contact between a person's broken skin, mouth, eyes and other mucous membranes with another person's infected body fluid (blood, saliva, semen and vaginal fluids). A number of serious infections are possible, including those which are sexually transmitted.
- Through exposure of the skin to another person's infected skin or body fluids. This may be via direct body to body contact or indirectly through the use of shared equipment (eg wrestling mats), clothing (eg jumpers, socks) and other surfaces that remain moist for a period of time (shower floors, rub down benches). These usually involve fungal skin infections such as tinea, viral infections such as warts, or parasites such as scabies.
- Through ingestion of contaminated food and drinks. If people handling food don't wash their hands properly, hepatitis A or a number of other infectious diseases, such as those which cause gastroenteritis, can be passed on.
- By breathing in airborne droplets of saliva or sputum when an infectious person coughs, sneezes or spits. The common cold and the flu are easily passed on from person to person in this way.

Further useful information about a range of infectious diseases can be found at the Department of Human Services Victoria public health website, including some multi-language information:

http://www.dhs.vic.gov.au/phb

Get Immunised

Immunisation is an effective and inexpensive way of significantly reducing your risk of:

- hepatitis A
- hepatitis B (strongly recommended for contact sports); and
- influenza.

Some issues to discuss with your doctor about immunisation include:

- whether the vaccine you will be having is to be administered in doses over a period of time (eg hepatitis B);
- if there are normal physical responses following immunisation which may affect your performance in the short-term;
- if there might be a delay between when the vaccine is administered and when it's fully effective;
- whether the immunisation is for life or needs to be administered at regular intervals to keep up the immunity levels (eg influenza, for which a new vaccination is required each winter);
- whether it is possible that a vaccination does not lead to full immunity; and
- whether you have an existing medical condition that may preclude a vaccine being administered.

If you're planning to compete overseas or have an end of season trip which takes you out of Australia, it is wise to be immunised for infectious diseases that are prevalent in other countries. Seek advice from your medical practitioner well in advance of your trip.

Implement Blood Rules

All sports, at both professional and amateur levels, should implement blood rules:

- A player who is bleeding or has blood on their clothing must immediately leave the playing field or court and seek medical attention.
- The bleeding must be stopped, the wound dressed and blood on the player's body or clothing cleaned off before they return to the game.
- Play must cease until all blood on the ground or equipment is cleaned up.

Assume all Blood is Potentially Infectious

You should treat all blood and body fluids as though they are potentially infectious. When spills of blood or other body fluids happen:

- avoid direct contact with blood or body fluids;
- cover any cuts on your hands with a Band Aid;
- wear gloves.

If blood or other body fluids spill onto you or someone else or if contact has been made with an open wound, broken skin or mucous membranes (mouth, eyes, genitals) the following precautions are recommended:

- wash the area of contact thoroughly with soap and warm water;
- if the blood contacted your mouth or eyes, rinse very well with water;
- see your own doctor as soon as possible.

Once bleeding has stopped and you've cleaned up any blood or body fluids which found their way onto you or others, it's important to disinfect the area where the spill occurred. When doing this:

- wear gloves;
- place a paper towel over the spill and carefully mop it up;
- clean the surface with warm water and detergent or soap;
- disinfect the area by wiping with bleach (use a bleach containing 5.25% sodium hypochlorite) and dry with a clean paper towel; and
- when finished, remove gloves and put them along with the used paper towels in a sealed plastic bag and place in rubbish bin.

Don't Share Your Stuff

Adoption of strict personal hygiene measures is an important way to control the spread of blood-borne viruses and other infectious organisms.

"I won't share drinks. I won't share towels. If you're serious about your sport you won't put yourself at risk.."

Sarah "Sweetpea" Murphy
Kickboxer
Blood Rules, OK Video

Don't share clothing, razors, towels, face washers, nail clippers, drink bottles, mouth guards or any other personal equipment which may have blood, saliva or other body fluids present.

These fluids can be present in very minute quantities not visible to the human eye, but still harbour enough infectious organisms to spread infection from one person to another.

DISCRIMINATION AND EXCLUSION OF PLAYERS

State and Commonwealth anti-discrimination legislation makes it unlawful to discriminate against a person on the basis of their disability or impairment in many areas of public life, including sport, club membership, employment and the provision of goods and services.

The definition of a disability is very broad and includes physical, sensory, intellectual and psychiatric impairment. A disability is also defined as the presence in the body of an organism (such as HIV or one of the hepatitises) which may cause disease.

Consequently, under State and Commonwealth law, it is prohibited to discriminate against a person because he or she:

- is living with an infectious disease;
- is thought to be living with an infectious disease;
- may have an infectious disease in the future;
- is an associate of someone who has (or is presumed to have) infectious disease; or
- is a carer of someone who has an infectious disease.
- The same laws apply to the hepatitises and other blood-borne viruses.

We discriminate against a person when we treat or propose to treat them less favourably on the basis of an attribute or personal characteristic protected by law (such as their sex, race or disability including HIV status) than someone who does not have that attribute in the same or similar circumstances. This is *direct* discrimination.

Sometimes discrimination can be *indirect.* This occurs when an *unreasonable* requirement, condition or practise that is applied to everyone (and therefore appears neutral), in fact has a disproportionately negative impact on people with particular infections. In other words, some people may find it difficult to comply with an unreasonable requirement or policy because of an attribute protected by law (for example, because they have a blood-borne virus).

Discrimination can occur in many ways. For example, in sport it would be discrimination if we refused to allow someone to participate in a sporting team or to act as an official because they were carrying a blood-borne virus such as hepatitis C or HIV when they were able to effectively participate.

It is also discrimination to refuse membership of a public sporting club or to restrict the benefits of membership for someone on the basis of their actual or presumed HIV status (or other blood-borne viral infection).

Nevertheless, in some instances, the law permits measures which are genuinely necessary to protect the health and safety of others. However, because of the limited ways in which HIV is transmitted and the universal precautions that should be in place for everyone, restrictions on equal opportunity for people living with HIV will rarely be necessary.

While divulging HIV or hepatitis status is not required under law, there may be circumstances (for example, if concerned about their health) when a player might consider telling a coach or trainer about their condition.

But remember, people who are HIV positive or who are living with other blood-borne viruses are legally entitled to have this information remain confidential, and other people are not entitled to access such information without the consent of the person in question. The fact that they may trust some people with this information does not mean that others have a right to be told. If proper precautions are being taken and blood rules are applied, there is, in fact, no need for others to know. Importantly, there is no medical or public health justification for mandatory testing or screening for HIV positive players.

While the *Disability Discrimination Act 1992* is applied consistently across Australia, specific provisions related to disability discrimination in sport and clubs vary under each State and Territory's equal opportunity law. For example, whether or not a particular club would fall within the provisions of the law varies from State to State. We recommend you talk to your local equal opportunity organisation to find out more about the specific provisions that apply in your state or territory in regard to sport, clubs and other related activities. Links to each of these can be found via the Human Rights and Equal Opportunities Commission website at: http://www.hreoc.gov.au/

A useful website for people aged under 18 years is produced by the National Children's and Youth Law Centre and presented on a state by state basis: http://www.lawstuff.org.au

RISK OF INFECTION THROUGH SPORT

The risk of being infected by one of the serious blood-borne viruses through participation in sport is very low.

"The chances [of being infected by HIV through sport] have been estimated to be 1 in 125 million. Your chances of getting killed driving to the football stadium are infinitely greater….."

Professor John Dwyer
Immunologist [ABC News]
Blood Rules, OK Video

By adopting an Infectious Diseases Policy and implementing Blood Rules and other preventive strategies consistently in your club, the risks are even lower.

Most contact with other people doesn't lead to us catching an infection. In order for an infection to be transmitted from one person to another *all* of the following must occur:

- the organism (virus, bacteria, fungi or parasite) must be in or on a person's body and still be able to be transmitted;
- the organism must leave the body of the person who has the virus;
- the organism must be able to survive in the environment;
- the organism must find its way onto or into another person; and
- the organism must be in sufficient quantity to infect that person.

Our body's immune system can fight many infections and it usually wins the battle. However, when it is weakened in some way or the infectious organism is strong enough or in sufficient quantity, our immune system may not be able to fight off these infections. Adequate nutrition, water intake and rest are important to help maintain a healthy immune system. Where it is available, immunisation can help our body's immune system to overcome an infection.

Infectious organisms don't always last long outside the body. Hepatitis B can survive for up to 3 weeks in dry blood and remain transmissible. While under some circumstances HIV can survive outside of the body for days, generally it will only survive for a matter of minutes. This is why nearly all people who become infected by a blood-borne virus do so through behaviours or means which pass the virus directly from one person's body to another's: sharing infected drug injecting equipment; unprotected vaginal, or anal sex; or transmission from mother to child in utero, during or soon after birth. In the past, the people most at risk of becoming infected with a blood-borne virus were those receiving transfusions of blood or blood products for treatment of an existing medical condition - such as haemophillia, kidney disease - or for trauma patients. With improvements in the screening of donated blood in Australia, the group at highest risk of infection with blood-borne viruses is with people who inject drugs.

Further information about risk can be found in Bulletin #1 on the new ANCAHRD website. http://www.ancahrd.org

If you want further information or have concerns about your risk of having been infected with a blood-borne virus, we strongly recommend you consult your doctor or visit your local community health service.

The AIDS, Hepatitis and Sexual Health Line Inc. provides information and counselling by telephone (03 9347 6133) and
e-mail. Go to their website at: http://www.aidshep.org.au

Safer Sex

Sport provides a place for meeting many people, including sexual partners. For some people, having sex is how they unwind after sport.

Of course, it's OK not to have sex, but when you do choose to be sexually active, then having safe sex is important.

"If you're going to be involved in sexual activities then it's important to protect yourself… and protect your partner."

Andrew Gaze
Melbourne Tigers & Boomers Captain, Five-time Olympian
Blood Rules, OK Video

It's possible to have sex in ways that avoid getting or passing on a blood-borne virus and most sexually transmissible infections. As indicated previously, the methods of infection vary for each sexually transmissable infection, but genital, or anal sex are risky if you don't have safe sex.

If you are having sex, condoms used with water based lubricant greatly reduce the chance of an infection being passed from one person to another during genital, anal or oral sex. Although oral sex is considered a low risk activity for both partners, any cuts or sores in or around the mouth, may make the transmission of infectious organisms possible. A dam (or Lollye), a thin square of latex rubber which is held over the vaginal or anal area during oral sex, can be used. If you have trouble buying one (usually available from a chemist or sexual health centre) then a condom carefully cut down one side can be used instead.

Other safe sex practices include:

- kissing;
- cuddling or stroking;
- body-to-body rubbing or erotic massage;
- masturbation (touching your own genitals); and
- mutual masturbation (touching each other's genitals).

Recommended sexual health websites for young people can be found at:

http://www.health.qld.gov.au/sexhealth/youth (Queensland Health)

http://www.sxetc.org (an international website for teens by teens produced by the School of Social Work, State University of New Jersey)

Safer Drug Use

If you're injecting drugs, it's important that you do so in ways that reduce your risk of exposure to HIV, hepatitis B, hepatitis C and other infections. This means making sure that needles and syringes are used once only, that your hands, and other injecting equipment and surfaces used for mixing up are clean.

Injecting equipment should never be shared. If you share equipment used for injecting drugs (needles, syringes, spoons, swabs, tourniquets, filters or water) you risk exposure to, or potentially spreading blood-borne viruses. If injecting others or helping others to inject, care should be taken to avoid getting any splashes of their blood on you and if this does happen, to clean it up with warm soapy water as soon as possible.

When you have finished, dispose of your needles and syringes so that they can't be re-used or stepped on by others. Some council and club facilities have a specially designed disposal bin which you should use. If you use a needle and syringe program (NSP) you can return your used gear in a sharps container which is provided by the NSP. If neither of these options are available, you can put your sharps in a strong plastic bottle with a screw top and return this to the NSP or put it into an ordinary bin.

Stepping on a used needle can be a very frightening experience for anyone, and although the risks are actually quite low, it's better to prevent these situations from occurring if possible.

To locate your closest NSP, contact the organisation in your state listed at the back of this booklet in the *Where to Go for Further Information* section.

Recommended web page about safer drug use can be found at:

http://www.accessinfo.org.au/safe2.htm (Access Information Centre at the Alfred)

Develop an Infectious Diseases Policy

"Blood rules" exist in many sports, but mostly these relate only to what happens on the playing field. For a sporting organisation to be truly blood aware, policies and practice need to extend to all aspects of the club's operation.

Many sports have already developed infectious diseases policies, so if you need to develop one, you may be able to adapt an existing one. You might like to look at the guidelines which have been developed by **Sports Medicine Australia (http://www.smasa.asn.au** or **http://www.sport.net.au/smawa)**.

Blood Rules in Action

Blood rules seek to prevent the transmission of infectious diseases such as hepatitis B, hepatitis C and HIV during body contact and collision sports. They have been designed to protect the injured player, team mates, the opposition and sporting officials.

Simply put, a blood rule dictates that any player who is bleeding must leave the playing area for immediate attention from a medical or first aid officer. The player is not allowed to continue playing until the bleeding has stopped, the wound dressed and there is no blood remaining on clothing or visible on the skin. Any clothing or equipment that has been contaminated must also be cleaned or replaced before play continues.

If bleeding re-occurs, the individual concerned must again leave the playing area until bleeding ceases. Where it is not possible to control the bleeding and securely cover the wound, the person involved must cease active participation in the game.

Because all traces of blood need to be cleaned up before a person can continue playing he/she may be off the field or court for some time. Your club might want to consider having interchange players if teams do not already have some.

Sports First Aid Practice

Sporting organisations should ensure that:

- individuals with a current first aid certificate are present at training and competitions;
- a complete first aid kit is always available, including a supply of gloves;
- protective eye wear and resuscitation bags or disposable mouth-to-mouth devices should also be available;
- there is access to a telephone to contact emergency services if necessary; and
- relevant people (ie coaches, first aiders, officials) know the location of the nearest hospital emergency centre.

Sports first aid officers or anyone else responsible for treating bleeding people or handling blood contaminated materials should:

- wear disposable latex gloves. Gloves offer two way protection for both the person wearing the gloves and the person being treated. Not wearing gloves places first aid staff at risk of infection from sites such as under or around fingernails where skin tears are common;
- use a new set of gloves to treat each person, and dispose of immediately after use; and
- wash hands with soap and water as soon as possible after gloves are removed.

As hepatitis B can live in water, fresh water should be used to clean the wounds of each injured person.

In an emergency (eg on the field prior to medical attention) a towel can be used to cover the wound until the player is moved to a location where gloves are available.

Further information about first aid and training courses can be obtained from Sports Medicine Australia (see Chapter 8 for contact information).

Dressing rooms

Dressing rooms should be clean and tidy, with particular attention paid to hand-basins, toilets, showers, spas and saunas. Adequate soap, paper towels, brooms, rubbish bins and where possible units for disposal of needles and syringes and disinfectants should be available at all times.

All equipment and surfaces which have blood on them should be treated as potentially infectious. Household bleach (1part bleach, containing 5.25% sodium hypochlorite - to 9 parts water) can be used to wash down contaminated areas.

Playing areas

Playing surfaces on which blood has been spilt should be washed until all visible blood has gone, then disinfected with bleach and water for at least 30 seconds. The area can then be wiped dry with a disposable cloth or allowed to dry in the air.

Sand pits can be a source of infection and need to be well maintained and kept clean. Prior to use they should be checked for foreign objects, such as glass or used syringes, which may be fully or partially covered by sand. Good drainage is essential and the sand should be raked often. When not in use, keep sand pits securely covered. Sand that has become contaminated with human or animal faeces, blood, urine or other body fluids should be removed. Use a shovel and dispose of the sand in a plastic bag.

Clothing

There should be sufficient uniforms for all players (including any on interchange benches). In contact sports, complying with a blood rule might require a team to have extra clothing available, such as spare football jumpers. Even if there's no blood on clothing, other infections can be spread by sharing clothing. For example, tinea can be spread by wearing another person's unwashed socks.

All clothing, towels, sheets, face washers etc which have been contaminated with blood should be soaked in bleach (use one part of household bleach to nine parts water) for 30 minutes before rinsing off bleach. For coloured items which will not tolerate bleach, soak in disinfectant for 30 minutes and then wash at a high temperature on a long cycle.

It's not always possible to wash bloodied clothes, towels etc. straight away, particularly if you're at a game. To manage this, some sporting clubs have a special bag in which all bloodied clothes can be placed so they can be safely transported to a laundry.

Syringe Disposal Bins

If your club facilities do not already provide a safe means for the disposal of syringes, you should consider doing so. Whether we like it or not, people use drugs. Unfortunately, public buildings, particularly toilets, are often the site of discarded needles and syringes. Many councils have a strategy in place for the installation of syringe disposal bins in their municipality. Contact your local council's public health department or needle and syringe program for further information.

Reduce the Risk of Injury

Because blood-borne viruses can only be transmitted from one person to another on the field if the skin is broken, efforts to keep down the level of injury also play a role in preventing their transmission. Reducing injury within your club has the other obvious advantages, both for the individual and the team, of reducing insurance claims, retaining good players on your side and keeping people physically healthy.

Some factors which have been associated with sports injuries include poor coach and sports trainer education, poor ground conditions, poor sporting equipment and lack of safety equipment.

The following actions are recommended for sporting organisations to reduce the risk of injury:

- promote participation in training and safety programs;
- encourage fair play. If things get out of control, play can become reckless and dangerous;
- goal posts, boundary fences, television cameras or other potential obstacles to players should be covered with soft material; and
- use line markers rather than ropes to indicate the boundaries of playing areas.

Individuals can reduce their own risk of injury very easily by:

- wearing appropriate protective gear, including mouth guards; and
- drinking adequate water. Dehydration can have a significant detrimental effect on your concentration level, making you more clumsy and less able to accurately judge distances.

Encourage Behaviour which Reduces Risk of Infection

Get Immunised for Hepatitis A & B

It is recommended that all participants (players and game officials) in contact sports who play under adult rules be vaccinated against hepatitis A & B. However, as this provides no protection against other blood-borne viruses such as HIV and hepatitis C, vaccination against hepatitis A & B is not an excuse for relaxing hygiene standards.

Use Protective Gear

Wearing appropriate protective gear such as helmets, padding and full-length clothing reduces skin exposure to scratching, splitting and grazing in addition to preventing the specific injuries the gear is designed for. Safety equipment should fit well or it may be less effective than it should be.

Practise Safe Sex

Because people may have sexual encounters with others they meet through sporting organisations, clubs may wish to:

- make condoms available (freely or for sale) in discrete venues such as toilets;
- encourage those who are sexually active to engage in safe sex practices; and
- promote the idea that it's okay for individuals not to have sex if they don't want to, and that this doesn't imply any lack of 'team loyalty'.

Bacterial Infections

Meningococcal Disease

Meningococcal disease is a rare but very serious illness caused by a number of different groups of meningococcus bacteria causing meningitis (inflammation of the membranes covering the brain and spinal cord) or septicaemia (blood poisoning). The infection is difficult to spread but may be passed on from person to person by sharing saliva, for example by mouth kissing or sharing drink bottles. Children aged under five and young people aged 15 to 24 years are most at risk. A person with meningococcal disease will become very ill and will probably feel sicker than they have ever felt before. The signs and symptoms of meningitis include: fever, vomiting, neck stiffness, headache, joint pains, dislike of bright lights. In septicaemia, a rash of red-purple pinprick spots or larger bruises anywhere on the body will be present. Young children may not complain of symptoms, so fever, pallor (pale skin), vomiting lethargy and rash are important signs. The infection can develop very quickly, and can be fatal in about 10% of cases, however if it is diagnosed early enough and the right antibiotics given quickly, most people make a complete recovery.

Chlamydia, Pelvic Inflammatory Disease (PID) and Non-specific urethritis (NSU)

Chlamydia infection is a common sexually transmissible infection caused by the bacterium Chlamydia trachomatis. If chlamydia infects the cervix in women it can cause pelvic inflammatory disease (PID), which untreated, may lead to infertility or permanent pelvic pain. The infection often produces no symptoms at first. For women, symptoms may include an unusual vaginal discharge or a burning sensation during urination. If left untreated, PID may develop, causing symptoms such as lower abdominal pain and tenderness, deep pain during sexual intercourse, heavy and painful period, and fever. In men, chlamydia usually affects the urethra and is called non-specific urethritis (NSU). The infection may have no symptoms or may cause a white or clear discharge from the penis and stinging during urination. In both men and women, chlamydia infection may also occur in the throat or anus, where it usually causes no symptoms. Chlamydia infection can be treated with antibiotics but can easily be prevented by using condoms during sex.

Gonorrhoea

Gonorrhoea is also a common sexually transmissible infection. The bacterium, Neisseria gonorrhoea, commonly infects the genital areas, but may also infect the anus or throat. In men, the symptoms of gonorrhoea are usually a pus-like, white or yellow discharge from the penis and a burning sensation when urinating. Sometimes there is no discharge, and in a small percentage of men, there are no symptoms at all. In women, the infection may lack specific symptoms, although sometimes there may be an unusual discharge from the vagina or pain when urinating and bleeding associated with viginal intercourse. If left untreated it can lead to infertility in both women and men. Gonorrhoea infection can be treated with antibiotics.

Scrumpox

Scrumpox is a broad term referring to a range of contagious skin infections which can be transmitted through skin-to-skin contact sports such as rugby, wrestling, boxing and judo. These include impetigo, a bacterial infection, and herpes which is described below. Symptoms may include blisters, weeping or crusty sores on the skin. These can be very contagious and you should not participate in contact sport until they have cleared up. Medical attention should be sought so a correct diagnosis can be made prior to treatment.

Viral Infections

Influenza

Influenza, or 'the flu', is more than a bad cold. It is caused by a highly contagious virus which is spread by coughs and sneezes, and can easily 'wipe out' whole teams of players at a time. There are three types of flu virus - A, B and C. Influenza A is more likely to be responsible for epidemics (infection in large numbers of people in a population). The flu typically involves high fever, chills and sweating, muscle and joint pain, weakness, headache and dry cough, and can last a week to 10 days. Some people are 'at risk' of complications from the flu. Immunisation for influenza is available and needs to be renewed every year.

Genital Warts (HPV)

Genital and anal warts are caused by the human papilloma virus (HPV) and can be transmitted through sexual contact of any kind not just penetrative sex. Warts may or may not be visible, and there is no blood test or swab test for HPV infection, so many people have the virus unknowingly. This is why HPV spreads easily among sexually active people. Usually women learn they are infected only when they have a routine pap smear and there are changes detected in the cells of the cervix. If left untreated, these changes can lead to cervical cancer. Men may only learn they have HPV infection if their partner is diagnosed in this way. While there is no cure for HPV infection, there are a variety of treatments to remove the visible warts.

Gentital Herpes (HSV-1 and HSV-2)

Genital herpes is a common condition that is easily spread through sexual contact. It is caused by infection with one of two kinds of the herpes simplex virus, types 1 and 2 (HSV-1 and HSV-2). These viruses also cause cold sores on the mouth. Infection comes via direct contact with blisters or ulcers, not necessarily during penetrative sex, so HSV can be spread by any kind of sex or, in some circumstances non-sexual touching of affected areas. Very rarely, herpes can be spread to the eyes or to cuts or abrasions in the skin. There is no cure for HSV infection, however in recent years an anti-viral drug has become available to relieve the symptoms.

Fungal Infections

Tinea

Tinea is a fungal infection of the skin which, like all fungi, thrives in warm, moist conditions. 'Athletes Foot' and 'Jock Itch' refer to fungal infections on the feet and groin areas respectively. Fungal infections are spread through skin-to-skin contact, or indirectly through towels, clothes or even floors. The fungi firstly eat dead skin cells and then, when these are gone, live skin cells. The infection causes itching and stinging, a red scaly rash, and cracking, splitting and peeling of the skin. The best way to prevent getting tinea is to always use your own towel and dry your skin thoroughly after showering, particularly between the toes and skinfolds, wear cotton underwear and socks if possible, and wearing thongs in communal locker rooms and showers. Anti-fungal treatments are available from chemists and should go hand in hand with personal hygiene measures.

Thrush

Thrush is a fungal infection in women which affects the vulva and/or vagina. It can be spread through sexual contact as well as through the means described for tinea, above. Prevention and treatment is similar to that for tinea.

Parasitic Infections

Pubic Lice

Also known as 'crabs', lice are small, flat, light brown insects that cling to, and lay their eggs (called nits) on, pubic hair. Lice suck blood for nourishment which can cause small red areas or sores, and itching. Lice can be passed on through close skin-to-skin contact including sexual activity, and via shared bedding, towels or clothes. Lice may or may not be visible, but people with lice complain of itching. Scratching may cause open sores that can become infected. People with pubic lice may be at risk of other sexually transmitted infections and should consider seeing their doctor or sexual health specialist. Treatment involves the use of special lotions and shampoos which are available from a chemist without a prescription, and washing all contaminated clothing etc in hot water.

Scabies

The scabies mite is a tiny spider-like creature which makes a shallow burrow in the skin to lay its eggs. Scabies can be passed on during sex and through non-sexual contact in family groups or institutions. New mites hatch from the eggs and can be spread to other parts of the body by scratching. Red, itching bumps or blisters on the skin are an allergic reaction to the mite. Infestations usually occur around the genital or waist area on the body, and on the wrists, hands and in between fingers. Scabies can be spread and is treated in much the same way as pubic lice.

WHERE TO GO FOR FURTHER INFORMATION

If you have been involved in an incident (through sporting or other contact) where you are concerned that you may have become infected with a blood-borne virus or any other serious infection, it is important to seek medical advice, from your own doctor, or local community health service.

Below is a list of other organisations and sources of further information to contact if you want to know more about issues raised in this booklet or the video *Blood Rules, OK.*

GENERAL

Lifeline (for anyone about any issue)	13 1114	
Sports Medicine Australia	02 6251 6944	www.ausport.gov.au
Australian National Council on AIDS, Hepatitis C and Related Diseases	1800 022 863	www.ancahrd.org

HIV/AIDS

Australian Federation of AIDS Organisations	02 9281 1999	www.afao.org.au
Australian Society for HIV Medicine	02 9368 2700	
National AIDS/HIV Counsellors Association	03 9899 1728	
National Association of People Living with HIV/AIDS	02 9281 0555	www.napwa.org.au
Multicultural HIV/AIDS Education and Support Service	02 9515 3098	

HEPC

Australian Hepatitis Council	02 6232 4257	www.hepatitisaustralia.com
AIDS Hepatitis and Sexual Health Line Inc.	03 9347 6133	www.aidshep.org.au

ANTI-DISCRIMINATION & HUMAN RIGHTS

	Human Rights and Equal Opportunity Commission	02 9284 9600	www.hreoc.gov.au
NSW	NSW Anti-Discrimination Board	02 9268 5555	www.lawlink.nsw.gov.au/adb
QLD	Anti-Discrimination Commission of Queensland	1300 130 670	www.adcq.qld.gov.au
VIC	Equal Opportunity Commission of Victoria	03 9281 7111	www.eoc.vic.gov.au
NT	Northern Territory Anti-Discrimination Commission	1800 813 846	www.nt.gov.au/adc/index800.html
SA	South Australia Equal Opportunity Commission	1800 188 163	www.eoc.sa.gov.au/public
WA	Western Australia Equal Opportunity Commission	1800 198 149	www.equalopportunity.wa.gov.au

SEXUAL HEALTH CLINICS

ACT	Canberra Sexual Health Centre	02 6244 2184	SA	Clinic 275	08 8226 6025
NSW	Sydney Sexual Health Centre	02 9382 7440	TAS	Sexual Health Branch	03 6233 3557
NT	Clinic 34	08 8922 8007	VIC	Melbourne Sexual Health Centre	03 9347 0244
QLD	Sexual Health Clinic	07 3227 7091	WA	Royal Perth Communicable Diseases	08 9244 2178

INTRAVENOUS DRUG USE (Peer based drug user organisations)

	Australian IV League	02 6281 7853	www.aivl.org.au
ACT	Capital Injectors Network	02 6281 7851/2	
NSW	NSW Users and AIDS Association	02 9369 3455	
NT	Northern Territory AIDS Council or	08 8941 1711	
	AIDS Council of Central Australia	08 8953 1118	
QLD	QLD Intravenous AIDS Association	07 3252 5390	
SA	SAVIVE	08 8362 9299	
TAS	Tasmanian Users Health & Support League	03 6224 0416	
VIC	VIVAIDS	03 9381 2211	
WA	WA Substance Users Association	08 9227 7866	

Copies of the education kit can be obtained by contacting:
Sports Medicine Australia .....02 6251 6944 Sport Education.....02 6214 1550
Australian Sports Trainers Association .....03 9727 1048 Australian Society of Sports Administrators ..03 9593 2811

National and State Sporting Organisations.
Please refer to the relevant organisation for your sport. See the Australian Sports Directory: http://www.ausport.gov.au

Australian Institute for Primary Care, Mr Russell Renhard
Level 5 Health Sciences Building 2, La Trobe University, Bundoora, Victoria, 3083
Telephone: (03) 9479 3700 Email: aipc@latrobe.edu.au

The Australian Institute for Primary Care manages and delivers innovative health promotion projects, consultancy, training and facilitation services for organisations and people working in socially sensitive and difficult human service areas.

Other resources which form part of the educational kit are:
- *Blood Rules, OK.* a 25-minute video produced by the ABC. The video is designed to show to groups of sports participants.
- *Blood Rules, OK. Protect yourself in sport and play…. be Blood Aware!* Poster for display in club rooms.
- *Blood Rules, OK. Protect yourself in sport and play…. be Blood Aware!* Pamphlet for distribution to individuals which contains key messages from the video and this booklet and *Where to go for Further Information*.