

***CUTANEOUS MANIFESTATIONS IN SEXUALLY TRANSMITTED INFECTIONS: INTERFACES WITH
ADVANCED NURSING PRACTICE***

**MANIFESTAÇÕES CUTÂNEAS NAS INFECÇÕES SEXUALMENTE TRANSMISSÍVEIS: INTERFACES
COM A PRÁTICA AVANÇADA DE ENFERMAGEM**

***MANIFESTACIONES CUTÁNEAS EN LAS INFECCIONES DE TRANSMISIÓN SEXUAL: INTERFACES CON
LA PRÁCTICA AVANZADA DE ENFERMERÍA***

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Cutaneous manifestations in Sexually Transmitted Infections (STIs) are frequent signs and symptoms, and even with scientific advances, they remain undervalued clinical markers in Nursing assessment and practice.¹ Despite their relevance to sexual and reproductive health, their diagnostic neglect contributes to diagnostic delays, perpetuates transmission chains, reduces quality of life, and increases the risk of other diseases, including infection with the Human Immunodeficiency Virus (HIV). In Brazil, this gap reflects weaknesses in professional training and practice, also limiting the implementation and effectiveness of public policies for prevention and control.²

It is essential to recognize that, under different conditions, skin and appendage involvement represents the main and sometimes only clinical evidence of STIs. In this sense, reducing their importance compromises health services' ability to provide rapid, effective, and appropriate responses to control these events. Ulcers, papules, exanthems, and verrucous lesions are common evidence in syphilis, herpes simplex, and Human Papillomavirus (HPV) infections, which produce multidimensional repercussions that affect social, cultural, and economic dimensions and require a complex and interdisciplinary semiology of evaluation.³

From this perspective, dermatological evaluation, especially in the context of STIs, should be reaffirmed as a central component of care, transcending anatomical and physiological description to underpin clinical reasoning, early intervention, and decision-making. A properly trained nurse can provide support for early identification of infections at stages in which the skin constitutes the

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only clinical manifestation, as well as infer stages of disease progression, contribute to clinical management, directing patients to timely treatment, and making appropriate referrals.⁴

The interface between cutaneous manifestations in STIs and advanced dermatological Nursing practices is based on the implementation of the Nursing Process (NP) and demonstrates the nurse's ability to act as a protagonist in the multidisciplinary team, basing observation on accurate clinical reasoning. Recognizing these changes as indicators of sexual health, although a great potential of dermatological Nursing, remains a limited field of action and integration of knowledge with other specialties. Developing clinical skills, specific knowledge, and abilities that allow for correlating lesion morphology with epidemiological risk factors constitutes a relevant strategy for health surveillance, as it contributes to reducing STI-related morbidity and mortality indicators, as well as formulating rapid, sensitive, and adapted responses to the epidemiological demands of the Brazilian population.⁵

Thus, it is important to strengthen advanced dermatological Nursing practices and invest in continuing education programs that consolidate the assessment of the skin and its appendages as fundamental components supporting diagnosis and timely treatment.⁴ Given the complexity of this scenario, this editorial proposes a reflection on the need to consider cutaneous alterations and dermatological Nursing assessment as strategic indicators for STI surveillance and the promotion of sexual health in Brazil.

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