

Antibiotic Commonsense

"An investment in knowledge always pays the best interest." Benjamin Franklin

Treating Patients and their Sexual Partners for Gonorrhea and Chlamydia—An Update*

Incidence

Providers in Washington State reported over 21,000 cases of Chlamydia (CT) and 2,865 cases of Gonorrhea (GC) in 2010. In Pierce County, 3,815 cases of CT (468.3 per 100,000) and 414 cases of GC (50.8 per 100,000) were reported in 2010.

At-Risk Adolescents

Reported rates of GC and CT are highest among females aged 15–19 years old.

Adolescents are at higher risk for sexually transmitted diseases (STDs) because they often have unprotected sex, are biologically more susceptible to infection, frequently engage in short duration partnerships, and may not have easy access to healthcare.

In Washington State, adolescents as young as 14 years of age may legally consent to diagnosis and treatment of STDs (without parental permission).

Counseling of adolescents should be appropriate for their developmental level and help identify risky behaviors. Thoughtful, non-judgmental counseling is very important for those adolescents who do not admit to themselves that they are engaging in risky behaviors.

Screening for STIs in Sexually Active MSM (men who have sex with men)

Routine laboratory screening for common STDs (CT, GC, syphilis, HIV) should be performed *annually* for all sexually active MSM. More frequent STD screening (i.e., 3–6 month intervals) should be carried out for MSM who have multiple or anonymous partners, have sex in conjunction with illicit drug use, use methamphetamine, and/or have sex partners who participate in these activities. When testing MSM, remember to test ALL sites of reported sexual activity (i.e., *mouth, anus, penis*).

Which one of these teens
has Chlamydia?



Can't tell? That's because most people with Chlamydia don't show symptoms.
Get Smart. Get Tested.



Download STD posters for your
clinic at www.tpchd.org/STD

Treatment of Uncomplicated Gonococcal Infections of the Cervix, Urethra and Rectum* *Recommended Regimen*

Ceftriaxone 250 mg in a single IM dose

PLUS

Azithromycin 1 g orally in a single dose

OR

Doxycycline 100 mg orally twice a day for 7 days

Alternative Regimen

Cefixime 400 mg in a single oral dose

PLUS

Azithromycin 1 g orally in a single dose

OR

Doxycycline 100 mg orally twice a day for 7 days

Annual Screening for Chlamydia

Annual CT testing of all sexually active young women ≤ 25 years of age is recommended by Centers for Disease Control and Prevention (CDC) because the majority of these infections are among 15–24 year olds. Women older than 25 years should be tested if they have multiple sex partners and/or a new sex partner. All pregnant women should be tested.

Treatment of Chlamydia *Recommended Regimens*

Azithromycin 1 g orally in a single dose

OR

Doxycycline 100 mg orally twice a day for 7 days

Alternative Regimens

Erythromycin base 500 mg po 4 times/day for 7 days

OR

Erythromycin ethylsuccinate 800 mg po 4 times/day for 7 days

OR

Levofloxacin 500 mg orally once daily for 7 days

OR

Ofloxacin 300 mg orally twice a day for 7 days

*To treat pharyngeal GC: Ceftriaxone 250 mg in a single IM dose **PLUS** Azithromycin 1 g orally in a single dose **OR** Doxycycline 100 mg orally twice a day for 7 days.

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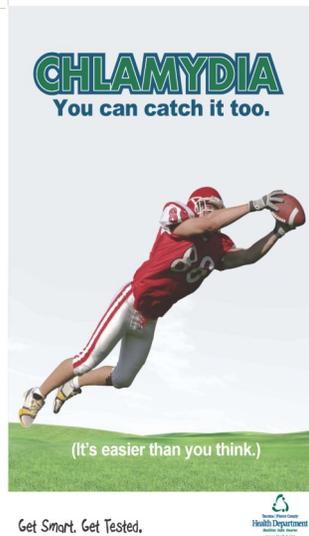
Treating Patients and their Sexual Partners for Chlamydia and Gonorrhea (cont.)

Expedited Partner Therapy (EPT)

EPT has been developed to treat the sexual contacts of persons who have tested positive for GC and/or CT because many sexual contacts may not seek evaluation/treatment.

With EPT, treatment for sexual partners may be obtained in two ways:

- (1) Treatment is dispensed through select local pharmacies at *no cost* to the sexual contact once provider calls the prescription in; and
- (2) The original patient is given medication or a prescription to give to his or her sexual partner along with written information on the medication that includes screening for allergies and directions for use and when to seek medical care.



Download STD posters for your clinic at www.tpchd.org/STD

Azithromycin is being used to treat CT and cefixime is being used for GC. Both medications are prescribed as single doses to promote better compliance.

EPT is endorsed by the CDC and the Washington Medical Quality Assurance Commission (WMQAC).

When EPT is not recommended

- For sexually transmitted infections other than GC or CT.
- For MSM because they often have undiagnosed co-infections, including undiagnosed HIV—refer to Tacoma-Pierce County Health Department.
- For women exposed to GC who have a history of providing oral sex.

Screening for Infection after Treatment

Gonococcal infection: Repeat testing in 3–4 weeks is not routinely recommended for patients with uncomplicated gonorrhea who have been treated with recommended or alternative regimens. See CDC guidelines for persons with persistent symptoms or whose symptoms reoccur shortly after treatment with recommended or alternative treatment.

Chlamydia infection: Except in pregnant women, repeat testing in 3-4 weeks is not recommended for persons treated with recommended or alternative regimens unless therapeutic compliance is in question, symptoms persist, or re-infection is suspected.

Start Using EPT in Your Practice

1. **Obtain EPT prescription forms.** They are available at Tacoma-Pierce County Health Department. Call (253) 798-2939 and ask for Rx forms or obtain online: www.tpchd.org/CD resources (follow to #5 STDs)
2. **Obtain a list of pharmacies providing free medications for the treatment of GC and CT** in sexual partners—available at: www.doh.wa.gov/cfh/STD/EPT
3. **Call or fax the prescription to the pharmacy.** Please let the pharmacy know that you want to prescribe the *free public health partner management medications*.

Remember

- Fluoroquinolones (like cipro) are no longer recommended for treatment of gonococcal infections.
- Doxycycline is contraindicated in pregnant women.

Resources

1. Washington State Department of Health STD Program, *2010 STD Treatment Guidelines*, available at: www.doh.wa.gov/cfh/std/docs/2010tx-guide.pdf
2. Centers for Disease Control and Prevention, *2010 STD Treatment Guidelines*, available at: www.cdc.gov/std/treatment/
3. Tacoma-Pierce County Health Department, *STD Treatment Guidelines*, available at: www.tpchd.org/STD