

## **USPSTF** Bulletin

## U.S. Preventive Services Task Force Issues Three Recommendations on Prevention and Detection of Sexually Transmitted Infections

Task Force Finds Benefit in Intensive Behavioral Counseling to Prevent Sexually Transmitted Infections and Screening Some Sexually Active Women for Chlamydia and Gonorrhea

WASHINGTON, D.C. – September 23, 2014 – The U.S. Preventive Services Task Force (Task Force) today published three final recommendations on the prevention and detection of sexually transmitted infections (STIs). In the recommendation on behavioral counseling interventions to prevent STIs, the Task Force recommends intensive behavioral counseling for all sexually active adolescents and for adults at increased risk for STIs. This is a B grade recommendation.

In separate but related recommendations on screening for chlamydia and gonorrhea (the most commonly reported STIs), the Task Force recommends screening sexually active women ages 24 years and younger and older women who are at increased risk for infection. Screening for chlamydia is a B grade recommendation. Screening for gonorrhea is also a B grade recommendation.

STIs are a serious health concern for Americans. According to Centers for Disease Control and Prevention estimates, approximately 20 million cases occur each year, with half of those cases in people ages 15 to 24 years. If untreated, STIs such as gonorrhea and chlamydia can lead to serious complications, including pelvic inflammatory disease, ectopic pregnancy, chronic pelvic pain, infertility, cancer, and death.

"We can do a lot to prevent STIs and their serious complications through effective prevention, screening, and treatment," says Task Force chair Michael LeFevre, M.D., M.S.P.H. "Evidence shows that intensive behavioral counseling for sexually active teens and for adults at increased risk can help to prevent STIs, reduce high-risk behaviors, and increase protective behaviors. Primary care providers can make a difference by offering or referring patients to intensive behavioral counseling."

Successful counseling approaches to prevent STIs include providing basic information about the infections and their transmission, assessing individual risk, providing condom use education, and providing strategies for communicating with partners about safe sex.

Additionally, the Task Force found evidence that screening women ages 24 years and younger (who have the highest rates of infection) and older women at increased risk for chlamydia and gonorrhea infections is effective at reducing long-term complications from these STIs.

"Often, women with gonorrhea or chlamydia infections do not experience any initial symptoms, which means that they may not consider talking to their doctor about testing and treatment," says Task Force co-vice chair Kirsten Bibbins-Domingo, Ph.D., M.D. "If a woman has an STI that is left untreated, she may be at higher risk for serious and long-term complications. The good news is that evidence shows that screening for chlamydia and gonorrhea infections can make a difference for all young, sexually active women and also older women at increased risk."

For men, the Task Force concluded that there is not enough evidence to determine the effectiveness of screening for chlamydia and gonorrhea. This is an I statement. Unlike women, men with chlamydia or

gonorrhea infections are more likely to experience symptoms for which they would seek medical attention. Because of earlier detection and treatment, men with these STIs are less likely than women to develop long-term complications. The Task Force found insufficient evidence that screening men would translate into better health outcomes for women.

The Task Force's final recommendation statements have been published online in *Annals of Internal Medicine*, as well as on the Task Force Web site at <a href="https://www.uspreventiveservicestaskforce.org">www.uspreventiveservicestaskforce.org</a>. Fact sheets that explain the recommendation statements in plain language are also available. Draft versions of both recommendations were available for public comment from April 29 to May 26, 2014.

The Task Force is an independent, volunteer panel of national experts in prevention and evidence-based medicine that works to improve the health of all Americans by making evidence-based recommendations about clinical preventive services such as screenings, counseling services, and preventive medications.

Contact: Ana Fullmer at Newsroom@USPSTF.net / (202) 350-6668