

SCREENING FOR CHLAMYDIA AND GONORRHEA CLINICAL SUMMARY OF U.S. PREVENTIVE SERVICES TASK FORCE RECOMMENDATION

Population	Sexually active females aged ≤24 y and older women at increased risk for infection	Sexually active females aged ≤24 y and older women at increased risk for infection	Men
Recommendation	Screen for chlamydia.	Screen for gonorrhea.	No recommendation.
	Grade: B	Grade: B	Grade: I statement

Risk Assessment	Age is a risk factor for chlamydial and gonococcal infections, with the highest infection rates occurring in women aged 20 to 24 y. Other risk factors include new or multiple sex partners, a sex partner with concurrent partners, or a sex partner with a sexually transmitted infection (STI); inconsistent condom use among persons who are not in mutually monogamous relationships; previous or concurrent STI; and exchanging sex for money or drugs.			
Screening Tests	Chlamydial and gonococcal infections are diagnosed by using nucleic acid amplification tests, which are approved by the U.S. Food and Drug Administration for use on urogenital sites, including male and female urine; clinician-collected endocervical, vaginal, and male urethral specimens; and self-collected vaginal specimens in clinical settings.			
Treatment and Interventions	Chlamydial and gonococcal infections respond to treatment with antibiotics. Posttest counseling is also an integral part of management of patients with a newly diagnosed STI. Counseling should address safe sex practices that can reduce disease transmission or reinfection.			
Balance of Benefits and Harms	Screening for chlamydia has a moderate net benefit in females aged ≤24 y and older women at increased risk for infection.	Screening for gonorrhea has a moderate net benefit in females aged ≤24 y and older women at increased risk for infection.	The current evidence is insufficient to assess the balance of benefits and harms of screening for chlamydia and gonorrhea in men.	
Other Relevant USPSTF Recommendations	The USPSTF has recommendations on screening for other STIs, including hepatitis B, genital herpes, HIV, and syphilis, and behavioral counseling for all sexually active adolescents and for adults who are at increased risk for STIs. These recommendations are available on the USPSTF Web site (www.uspreventiveservicestaskforce.org).			

For a summary of the evidence systematically reviewed in making this recommendation, the full recommendation statement, and supporting documents, please go to http://www.uspreventiveservicestaskforce.org/.