

## U.S. Preventive Services Task Force Seeks Comment on Draft Recommendation Statements for the Prevention of Sexually Transmitted Diseases

Task Force Finds Benefit in Intensive Behavioral Counseling for Teens and Adults at Increased Risk for STIs and Benefit in Screening Some Sexually Active Women for Chlamydia and Gonorrhea

WASHINGTON, D.C. – April 29, 2014 – The U.S. Preventive Services Task Force (Task Force) today posted two draft recommendations on the prevention of sexually transmitted infections (STIs). The Task Force is providing an opportunity for public comment on these draft recommendation statements and draft evidence reviews until May 26. All public comments will be considered as the Task Force develops its final recommendations and final evidence summaries.

STIs are a serious health concern for Americans. According to CDC 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.

In a draft recommendation on behavioral counseling interventions to prevent STIs, the Task Force recommends intensive behavioral counseling for all sexually active adolescents and adults at increased risk for STIs. This is a B grade recommendation.

In a separate but related recommendation 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. This is a B grade recommendation.

“We can do a lot to prevent STIs and their serious complications through our knowledge of 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 adults at increased risk for STIs can help to prevent STIs, reduce high-risk behaviors, and increase protective behaviors.”

Successful counseling approaches to prevent STIs include providing basic information about the infections and their transmission, assessing individual risk, providing training in condom use, communicating with partners about safe sex, problem solving, and goal setting.

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.

“Women with gonorrhea or chlamydia infections often do not experience any initial symptoms and may not know to talk to their doctor about testing and treatment,” says Task Force member Mark Ebell M.D., M.S. “If untreated, these STIs in women can lead to serious complications. Fortunately, for women under age 24 and those at increased risk, evidence shows that screening for chlamydia and gonorrhea infections can make a difference.”

For men, the Task Force concluded that there is not enough evidence to determine the effectiveness of

screening to prevent 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. Due to 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 improved health outcomes for women.

Both of these draft recommendations apply to all sexually active adolescents and adults. The draft recommendation on screening for chlamydia and gonorrhea infections also applies to pregnant women. The Task Force's draft recommendation statements and draft evidence reviews have been posted for public comment on the Task Force Web site at [www.uspreventiveservicestaskforce.org](http://www.uspreventiveservicestaskforce.org). Comments can be submitted from April 29 to May 26, 2014. A fact sheet that explains the recommendation statement in plain language is also available.

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.

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