Don't Let STIs go Undiagnosed

Chlamydia and Gonorrhea: Common and Curable

Sexually transmitted infections (STIs) are more common than you think and are often asymptomatic.^{1,2} More than 3 million new cases of chlamydia (CT) and gonorrhea (NG) occur in the United States annually.¹

According to Centers for Disease Control and Prevention (CDC), **only 38% of sexually active young women are screened annually for chlamydia**. Of those who tested positive for chlamydia, a majority of men (86%) and women (78%) were not retested within 30-180 days as recommended by CDC.³

Who Should Get Screened?

CDC recommends the following screening guidelines:

	Chlamydia	Gonorrhea
Sexually active women younger than age 25ª (annual screening)	\checkmark	\checkmark
Women age 25 and older at increased risk.ª	\checkmark	\checkmark
Pregnant women during their first trimester as well as women in their third trimester who are younger than 25, found to be infected in the first trimester or older women at increased risk. ^{b,c,d}	\checkmark	\checkmark
Women and men who tested positive should be retested at 3 months	\checkmark	\checkmark

a. Persons at increased risk include women who have new or multiple partners, have a history of STDs, exchange sex for payment and use injection drugs, those with a new sex partner, more than one sex partner, a sex partner with concurrent partners, or a sex partner who has a sexually transmitted infection. **b.** Patients are women with a history of multiple sexual partners or a sexual partner with multiple contacts, sexual contact with individuals with culture-proven STDs, a history of repeated episodes of STDs or attendance at clinics for STDs.

Screening is also **cost effective**.⁴ Every \$1 spent on chlamydia testing/treatment saves \$12 in complications if left untreated.⁵ Among these complications are **pelvic inflammatory disease (PID)**— chlamydia and gonorrhea are "universally accepted as etiologic agents of PID."⁶

Learn more about guidelines-based screening at **www.cdc.gov/std/prevention/screeningreccs.htm**

References: 1. Centers for Disease Control and Prevention. Incidence, Prevalence, and Cost of Sexually Transmitted Infections in the United States. http://www.cdc.gov/std/stats/statesfact-sheet-feb-2013.pdf. Published February 13, 2013. 2. Farley TA, et al. Asymptomatic sexually transmitted diseases: the case for screening, Preventive Medicine. 2003;std/stats/statesfact-sheet-feb-2013.pdf. Published February 13, 2013. 2. Farley TA, et al. Asymptomatic sexually transmitted diseases: the case for screening. Preventive Medicine. 2003;std/stats/stats-National Estimate Shows Not Enough Young Women Tested for Chlamydia. [press release]. https://www.cdc.gov/nchhstp/newsrom/2012/stdconference2012pressrelease.html Centers for Disease Control and Prevention; March 13, 2012. 4. Owusu-Edusei K, et al. Utilization and cost of diagnostics methods for sexually transmitted infection screening among insured American youth, 2008. Sex Transm Dis. 2013;40(3):197-201. doi:10.1097/OLQ.0b013e318285c58f. 5. Centers for Disease Control and Prevention. Chlamydia Screening and Treatment Programs for Young Women. http://www.cdc.gov/media/pressrel/chlamyl.htm. 6. Soper DE. Pelvic inflammatory disease. Obstet Gynecol. 2010;116(2):419-28. doi:10.1097/AOG.0b013e318285c54.