

## It's Easy to Get Screened

Depending on the clinic's policy, your healthcare provider (HCP) might screen all female patients ages 15-24 for CT and NG, regardless of sexual history, unless you decline.

Screening for CT and NG is simple, and treatment is easy with antibiotics. Your HCP may ask for a urine or self-collected vaginal sample or collect a sample during your Pap test.

## Questions About Costs

In many cases, STI screening is covered by the Affordable Care Act.<sup>14</sup> This may mean:



- ▶ No co-pay
- ▶ No deductible
- ▶ No out-of-pocket costs

Talk to your HCP or consult your healthcare plan to verify coverage.<sup>†</sup>



## The Results: What Happens Next?

- ⊕ **If you test positive**, you are not alone. Your HCP will write a prescription; remember to re-test in 3 months.<sup>110</sup>
- ⊖ **If you test negative**, that's good news! Don't forget to schedule your annual exam.

## Protect Yourself. Protect Your Partner.

A positive test does not necessarily mean one of you is having sex with other people since infections can go undetected for years.

To prevent re-infection stop having sex until you and your partner(s) have completed treatment.<sup>1</sup>

### Get Screened. Get Treated.

Protect your reproductive health.  
Start a conversation with your HCP today.

<sup>†</sup> Coverage may not be available to all women.

**References:** **1.** CDC. <https://www.cdc.gov/std/chlamydia/stdfact-chlamydia.htm>. Updated October 4, 2017. Accessed August 22, 2018. **2.** Cates JR, et al. Our Voices, Our Lives, Our Futures: Youth and Sexually Transmitted Infections. University of North Carolina at Chapel Hill; 2004. **3.** CDC. [https://npiin.cdc.gov/stdawareness/GYT\\_TalkingTips.aspx](https://npiin.cdc.gov/stdawareness/GYT_TalkingTips.aspx). Accessed August 22, 2018. **4.** CDC. <https://www.cdc.gov/std/stats/sti-estimates-fact-sheet-feb-2013.pdf>. Published February 2013. Accessed August 22, 2018. **5.** CDC. <https://www.cdc.gov/std/stats16/adolescents.htm>. Last Reviewed September 26, 2017. Accessed August 22, 2018. **6.** CDC. <https://www.cdc.gov/std/stats16/tables/21.htm>. Updated August 21, 2017. Accessed August 22, 2018. **7.** Farley TA, et al. Asymptomatic sexually transmitted diseases: the case for screening. *Prev Med.* 2003;36(4):502-509. doi:10.1016/S0091-7435(02)00058-0. **8.** ASHA. <http://www.ashasexualhealth.org/stdsstis/chlamydia/>. Accessed August 22, 2018. **9.** CDC. [https://www.cdc.gov/std/products/infographics/images/Youth-STI-Infographic\\_620.jpg](https://www.cdc.gov/std/products/infographics/images/Youth-STI-Infographic_620.jpg). Published April 2013. Accessed August 22, 2018. **10.** CDC. <https://www.cdc.gov/std/tg2015/screening-recommendations.htm>. Updated August 22, 2016. Accessed August 22, 2018. **11.** ACOG. <https://www.acog.org/Patients/FAQs/Chlamydia-Gonorrhea-and-Syphilis>. Published December 2016. Accessed August 22, 2018. **12.** AAP Releases Policy Statement on Screening for Nonviral Sexually Transmitted Infections in Adolescents and Young Adults. 2015; 91(9):652-654. **13.** USPSTF. <https://www.uspreventiveservicestaskforce.org/Page/Document/RecommendationStatementFinal/chlamydia-and-gonorrhea-screening>. Accessed August 22, 2018. **14.** CDC. <https://www.cdc.gov/nchhstp/preventionthroughhealthcare/preventiveservices/std.htm>. Updated May 2, 2018. Accessed August 22, 2018.

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### Chlamydia and Gonorrhea: Common and Curable

Two of the most common sexually transmitted infections (STIs), chlamydia (CT) and gonorrhea (NG), are bacterial infections that spread through unprotected vaginal, anal or oral sex.<sup>1</sup>

# 1 in 2 sexually active people will get an STI by age 25.<sup>\*2,3</sup>

In fact, it's estimated that **3.6 million** new CT and NG cases will occur annually in the United States.<sup>4</sup> Sexually active young adults aged 15-24 are at **higher risk** of acquiring STDs.

**63%** of new chlamydia cases are in patients aged 15-24.<sup>5</sup>

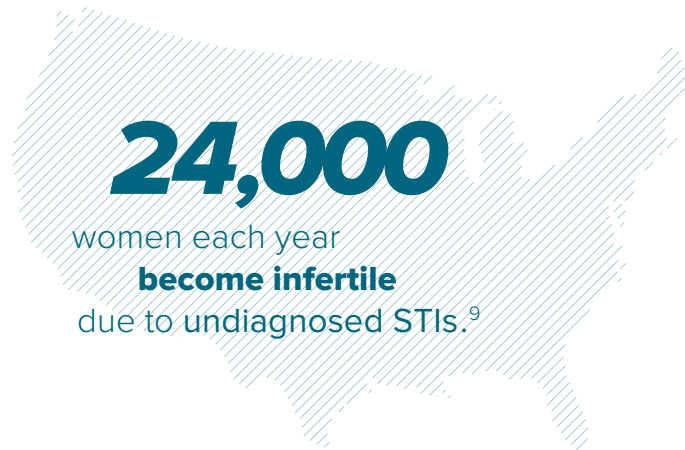
**47%** of new gonorrhea cases are in patients aged 15-24.<sup>6</sup>

### Untreated Infections Lead to Serious Health Problems

More than 75% of CT and 68% of NG infections show **no symptoms** among females.<sup>1,7</sup>

Most infected people do not have symptoms. If symptoms are present they may include: vaginal discharge, pain during sex, pain or burning during urination.<sup>8</sup> It's easy to screen for and treat CT and NG; however, an untreated infection can cause health consequences including:<sup>1</sup>

- ✓ Pelvic inflammatory disease (PID)
- ✓ Infertility
- ✓ Increase risk of getting or giving HIV
- ✓ Ectopic pregnancy (*dangerous pregnancy occurring outside the womb*)



## Should I be screened?

Screenings are medical tests that check for diseases before symptoms occur. By screening for CT and NG, doctors can detect the infections early, making treatment easier and lessening the likelihood of complications.

National health organizations have implemented screening guidelines to address increased rates of CT and NG infections:

### CDC

#### Centers for Disease Control and Prevention<sup>10</sup>

- ▶ Sexually active women under age 25.
- ▶ Women age 25 and older at increased risk.<sup>a</sup>
- ▶ Those who tested positive should be retested at 3 months.

### ACOG

#### American College of Obstetrics and Gynecology<sup>11</sup>

- ▶ Sexually active women age 25 and under.
- ▶ Women over 25 at increased risk.<sup>b</sup>

### AAP

#### American Academy of Pediatrics<sup>12</sup>

- ▶ Sexually active adolescents and young adult women under age 25 should be tested at least annually, even if no symptoms are present or barrier contraception is reported.

### USPSTF

#### U.S. Preventive Services Task Force<sup>13</sup>

- ▶ Sexually active women under age 25.
- ▶ Older women at increased risk for infection.

a. Persons at increased risk include women who have new or multiple partners, have a history of STIs, 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 STIs, a history of repeated episodes of STIs or attendance at clinics for STDs.

Please refer to each health organization's guidelines for complete recommendations.

\* Calculations and data estimates based on cited references.