

# More STD screening on horizon for women?

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Influential U.S. panel has also drafted guidelines on counseling to prevent chlamydia, gonorrhea.

(HealthDay)—A federal task force is poised to advise doctors to regularly screen all sexually active American women and girls up to age 24 for the sexually transmitted diseases chlamydia and gonorrhea, which often don't have outward symptoms.

The influential group of experts also appears ready to recommend screening for older women at risk of the diseases and provide intensive counseling to people of all ages at extra risk of STDs.

The U.S. Preventive Services Task Force hasn't made final decisions about the recommendations it will put forward to the nation's physicians. But the draft guidelines released Monday represent a significant expansion of [routine screening](#) for STDs.

"Many women with chlamydia and gonorrhea infections do not

experience any initial symptoms. They are at risk for long-term complications including [pelvic inflammatory disease](#), infertility and chronic pelvic pain," said Dr. Michael LeFevre, chair of the task force. "For these women, screening for these infections and treating them can make a difference."

The task force uses research to develop recommendations for physicians about the best strategies to care for patients. The new draft guidelines update and simplify previous recommendations that the task force issued in 2005, 2007 and 2008, said LeFevre, who is also vice chair of family and community medicine at the University of Missouri School of Medicine.

According to LeFevre, statistics show that more than 1.4 million cases of chlamydia were reported in the United States in 2011, and about 800,000 people are infected with gonorrhea each year.

Women can now be screened for the diseases through simple urine tests, LeFevre said, and research shows that treating chlamydia and gonorrhea early can make a big difference in preventing medical problems later on.

"This recommendation applies to all sexually active adolescents and adults, including pregnant women, up to age 24," he said. "The task force typically defines adolescence as ages 12 to 18 years."

Parents don't need to be involved in screening for STDs in children, he said, since all 50 states and the District of Columbia allow minors to get treated for STDs without parent permission.

"Age is a strong risk factor for both chlamydia and gonorrhea. Sexually active women age 20 to 24 years have the highest [infection rates](#), followed by women age 15 to 19 years," LeFevre said. "Infection rates among men are highest between the ages of 20 and 24 years."

The new draft recommendations also suggest that [women](#) older than 24 get screened for the diseases if they're at special risk. "Risk factors include having a new sex partner, having more than one sex partner, having a sexual partner infected with a STD, inconsistent condom use, a history of previous or co-existing STDs and exchanging sex for money or drugs," LeFevre said.

The task force doesn't think there's enough evidence to support routine screening for boys and men, he said. "Men often have symptoms when they are infected with chlamydia and gonorrhea, and they will go to the doctor for timely treatment of the infection, preventing any serious complications."

Dr. Gale Burstein, a commissioner with the Erie County Department of Health and an adolescent medicine physician with the Women and Children's Hospital of Buffalo, in New York, praised the draft recommendations but noted that they don't include guidelines for the screening of gay and bisexual men, who are at higher risk of infection with the STDs.

In those men, both chlamydia and [gonorrhea](#) are linked to higher rates of infection with HIV, the virus that causes AIDS, she said.

In another draft recommendation, the [task force](#) says doctors should provide "intensive" counseling to patients at high risk for the STDs. "High-intensity counseling services often involved more than two hours of total contact time, usually in a group," LeFevre said. "But some less intensive approaches were also found to have impact."

For her part, Burstein said, "it's a bit confusing" how doctors are supposed to find the time—and get reimbursed by insurance companies—to provide this kind of counseling. "We need more information about the logistics on how to carry this out," she said.

The new draft guidelines are now up for public review.

**More information:** For more about sexually transmitted diseases, try the [U.S. Centers for Disease Control and Prevention](#).

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