

Examining sexual health equity in emergency care

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Credit: Jacob Dwyer, Justine Ross / Michigan Medicine

Research from experts at Michigan Medicine is highlighting the potential for additional at-home assistance for partners of those who are treated in the emergency department for a sexually transmitted infection.

The findings are [published](#) in the *Western Journal of Emergency Medicine*.

Expedited partner therapy is one method of reducing STI re-infection. It's a safe, effective, harm-reduction-focused practice of treating [sex partner](#)(s) of patients with STIs without a clinical exam of the partner(s).

This therapy can involve getting STI treatment prescriptions or medications (i.e., "take-home" expedited partner therapy) for the patient's partner.

The take-home kits are the Center for Disease Control and Prevention's preferred method so that the patient can deliver it directly to their partner, reducing steps in the partner's treatment and thus stopping the spread of the infection.

Kits typically include patient information on STIs, STI treatment medications and instructions, and a list of low-no-cost local STI clinics for follow-up care.

However, despite this partner therapy's ability to eliminate barriers to care, this method has not been extensively studied by emergency departments until now.

A novel idea

A [pilot program](#) that partnered with the Michigan Department of Health for expedited partner therapy take-home kits found that emergency department distribution of the kits was feasible and acceptable. In interviews with emergency room clinicians regarding the project, many favorably noted the public health benefit of it and the unique role the emergency department has in caring for underserved patients.

Whereas no partner therapy was used before the pilot, after the pilot implementation, 25% of [emergency department](#) patients that were potentially eligible were provided EPT.

"EPT is commonly used in other clinical settings but has been slow to be adopted by ED clinicians, despite rising ED visits for STIs. Our hope is that by illuminating the barriers to EPT from the ED, we can help EDs across the country implement effective EPT programs to ultimately improve their community's health," said Emily Ager, M.D., M.P.H., emergency medicine resident at Michigan Medicine and an author of the research.

The pilot program found that emergency room physicians support expedited partner therapy, but many were unfamiliar with the prescribing process. However, the pilot project has offered some solutions.

The research team developed an electronic health record order set and pop-up reminder that was significantly effective at increasing prescribing rates when the reminder was displayed. The partner therapy was ordered 42% of the time when there was a reminder and only 8% when there was no reminder.

Importantly, this reminder was welcomed by many of the interviewed clinicians, who "appreciated it as a reminder."

One previous barrier to offering take-home kits has been providing the medication pills since these medications are not billable to the patient. Partnering with a local health department to provide the medicines for the patient's partner allows expansion of this vital treatment to higher-need populations.

"Prescription-based EPT is one step in the right direction of reducing access barriers but still runs into potential challenges of insurance and pharmacy-level awareness of EPT," said research author Rachel Solnick, M.D., MS.c., an assistant professor of emergency medicine at the Icahn School of Medicine at Mount Sinai in New York City.

"Offering ED patients take-home EPT kits to give directly to their [partner\(s\)](#) holds further promise to improving sexual health equity for the most marginalized patients by removing the obstacle of filling the prescriptions," Solnick continued.

Given the continued STI epidemic and associated health inequities, partnerships between emergency departments and local health departments provide essential innovations in health care delivery that could be a model for other hospitals nationwide.

Additional study authors include Andrew A. Gutting, William Sturdavant, Fahmida Ahmed, Melissa DeJonckheere, Keith E. Kocher.

More information: Emily E. Ager et al, Mixed-methods Evaluation of an Expedited Partner Therapy Take-home Medication Program: Pilot Emergency Department Intervention to Improve Sexual Health Equity, *Western Journal of Emergency Medicine* (2023). [DOI: 10.5811/WESTJEM.59506](#)

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