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# Medication Management for Sexual Health and Wellness

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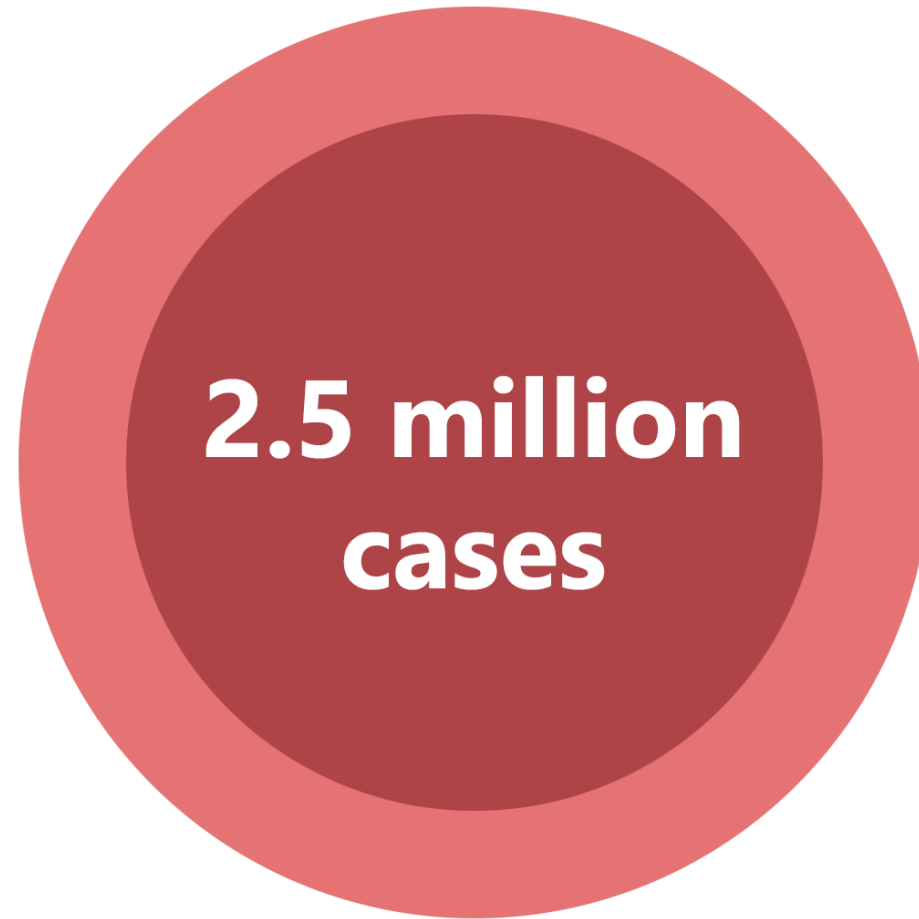
# Objectives

- Review sexually transmitted infections
- Review testing for common sexually transmitted infections
- Review treatment for common sexually transmitted infections
- Planning for follow-up visits when indicated
- Review partner prescribing guidelines
- Considerations of onsite dispensing

# Sexually Transmitted Infections

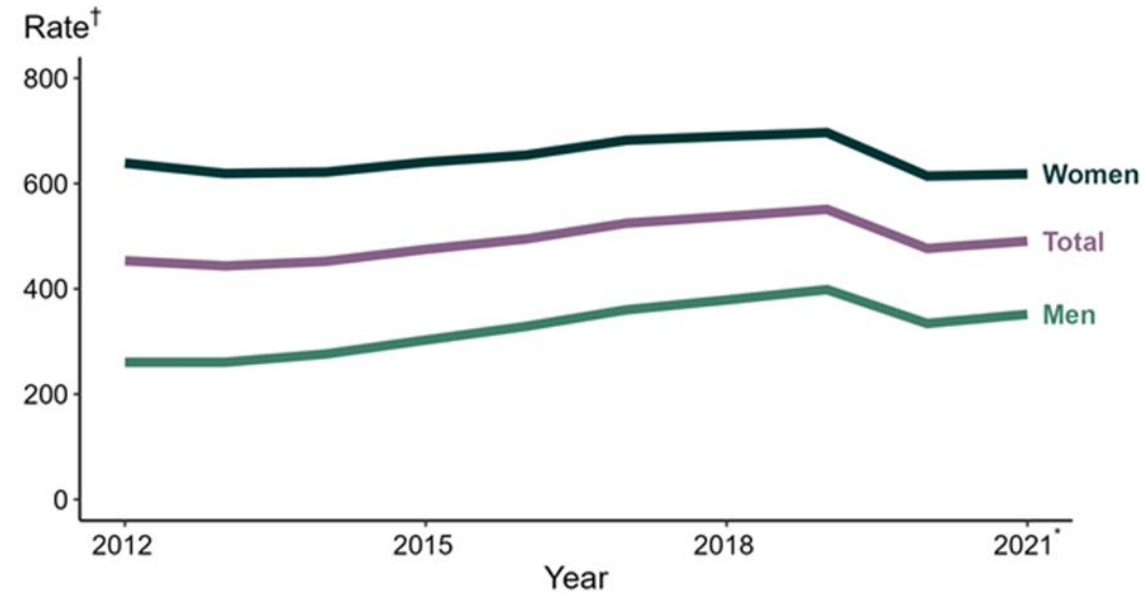
# Sexually Transmitted Infections

- Chlamydia
- Gonorrhea
- Hepatitis
- Herpes
- HIV
- *Mycoplasma genitalium*
- Syphilis
- Trichomoniasis
- Other ulcerative diseases



# Sexually Transmitted Infections

## Chlamydia — Rates of Reported Cases by Sex, United States, 2012–2021\*



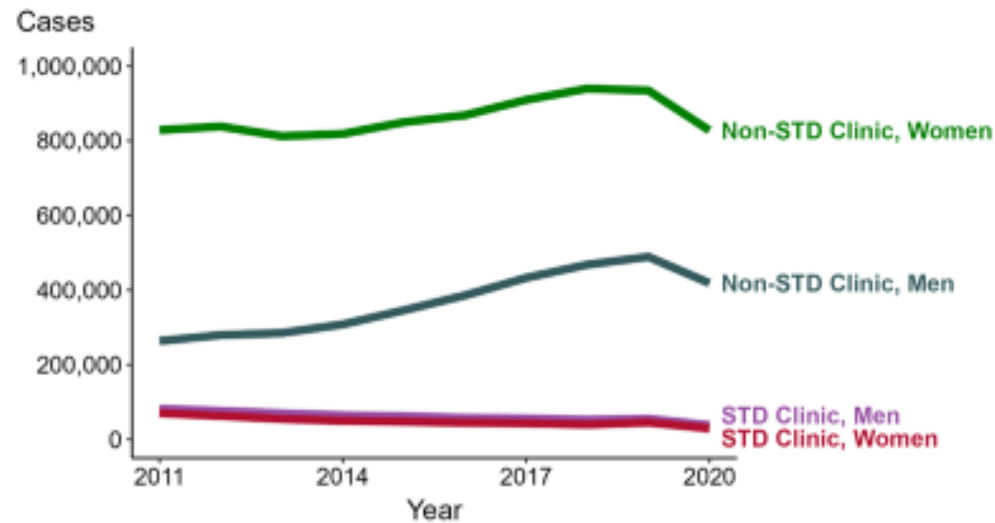
\* Reported 2021 data are preliminary as of July 7, 2022

† Per 100,000



# Sexually Transmitted Infections

## Chlamydia — Reported Cases by Reporting Source and Sex, United States, 2011–2020

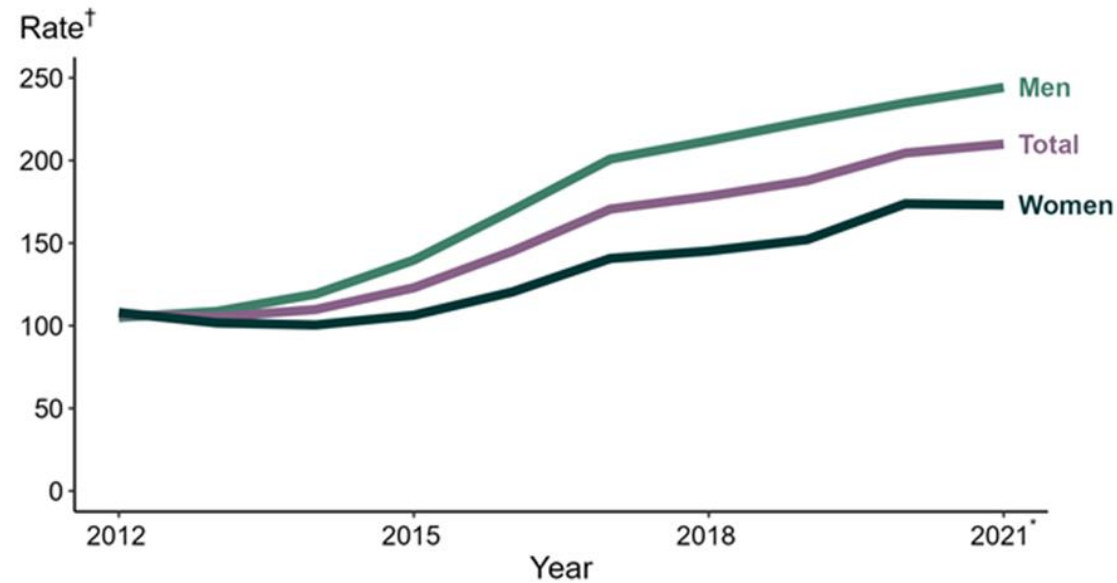


**NOTE:** During 2011 to 2020, the proportion of all cases with unknown reporting source was 14.3%, from a low of 11.6% in 2012 to a high of 16.7% in 2020.



# Sexually Transmitted Infections

## Gonorrhea — Rates of Reported Cases by Sex, United States, 2012–2021\*



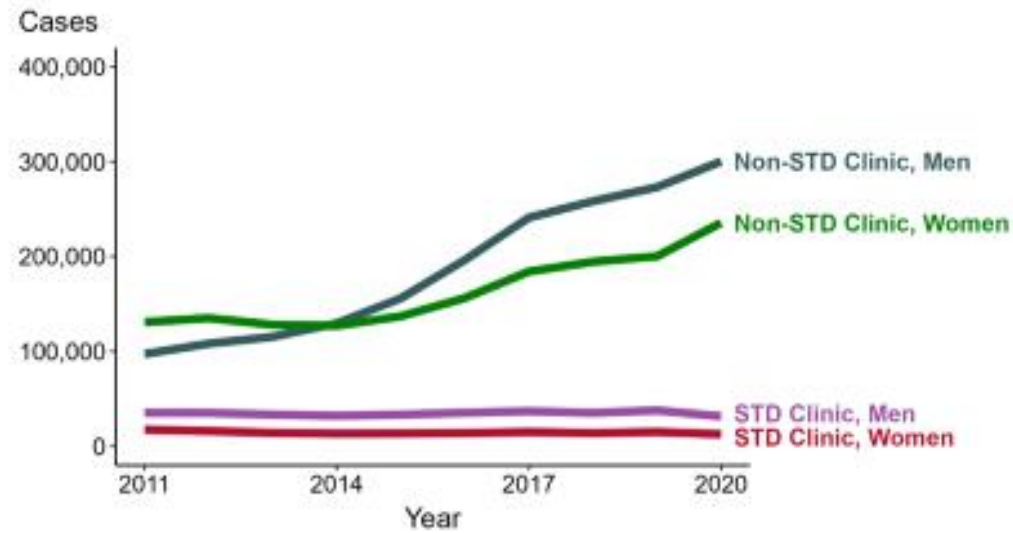
\* Reported 2021 data are preliminary as of July 7, 2022

† Per 100,000



# Sexually Transmitted Infections

## Gonorrhea — Reported Cases by Reporting Source and Sex, United States, 2011–2020

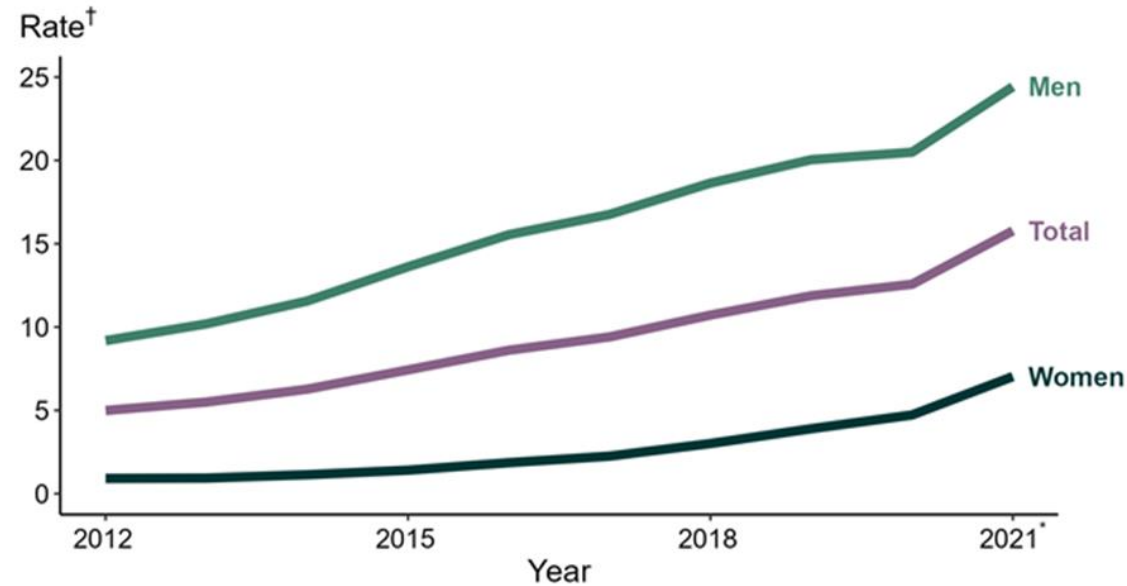


**NOTE:** During 2011 to 2020, the proportion of all cases with unknown reporting source was 13.7%, from a low of 11.9% in 2012 to a high of 14.4% in 2019.



# Sexually Transmitted Infections

## Primary and Secondary Syphilis — Rates of Reported Cases by Sex, United States, 2012–2021\*

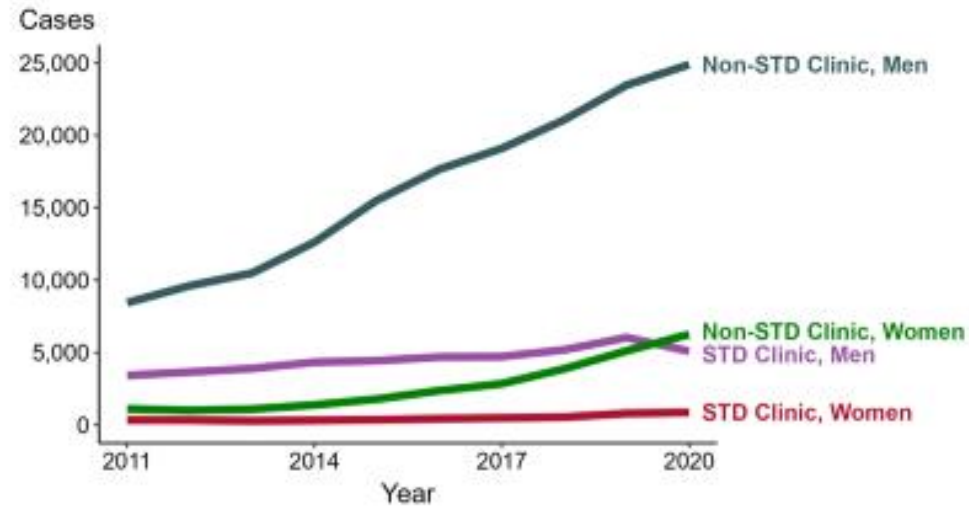


\* Reported 2021 data are preliminary as of July 7, 2022

† Per 100,000



## Primary and Secondary Syphilis — Reported Cases by Reporting Source and Sex, United States, 2011–2020

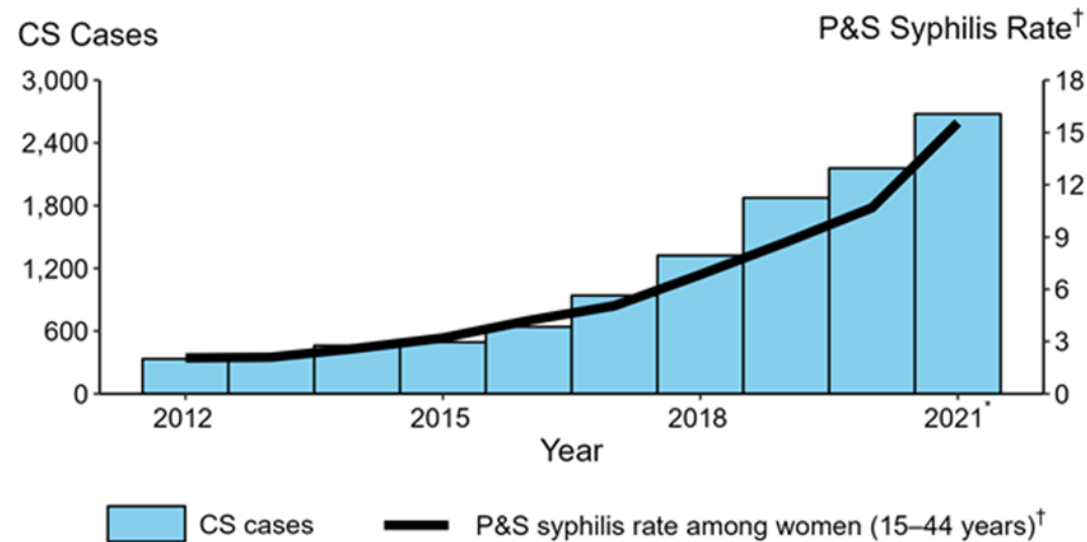


**NOTE:** During 2011 to 2020, the proportion of all cases with unknown reporting source was 9.4%, from a low of 4.8% in 2011 to a high of 12.4% in 2018.



# Sexually Transmitted Infections

## Congenital Syphilis — Reported Cases by Year of Birth and Rates of Reported Cases of Primary and Secondary Syphilis Among Women Aged 15–44 Years, United States, 2012–2021\*



\* Reported 2021 data are preliminary as of July 7, 2022

† Per 100,000

ACRONYMS: CS = Congenital syphilis; P&S = Primary and secondary syphilis



# Sexually Transmitted Infections

- Hepatitis
- Herpes
- HIV
- *Mycoplasma genitalium*
- Trichomoniasis



# Testing for Sexually Transmitted Infections

# Guidelines

- Ages 13-64 - HIV at least once
- Sexually active women under 25 - gonorrhea and chlamydia annually
  - Older than 25 if new or multiple sex partners
- Pregnant women need testing for syphilis, HIV, hepatitis B, hepatitis C and likely gonorrhea and chlamydia
- Gay, bisexual, or men who have sex with men
  - Annually (or more frequently) for HIV, gonorrhea, chlamydia and syphilis
  - If positive for HIV, annually for hepatitis C
- High risk behavior or IVDU – annual HIV
- Oral or anal sex – oral or rectal testing

# Testing Types

- Chlamydia

- Nucleic Acid Amplification Test (NAAT) – detects genetic material (urine/discharge)

- Gonorrhea

- Nucleic Acid Amplification Test (NAAT) – detects genetic material (urine/discharge)
- Bacterial culture or gram stain (discharge)

- Hepatitis

- Antigen and antibody tests (blood)

- Herpes

- PCR or culture from lesion (swab)
- Antibody test (blood)

# Testing Types

- HIV
  - Rapid antigen and antibody test (blood)
  - Antibody and PCR viral load (blood)
- *Mycoplasma genitalium*
  - Nucleic Acid Amplification Test (NAAT) – detects genetic material (urine/discharge)
- Syphilis
  - Rapid plasma reagin (RPR), Venereal Disease Research Laboratory (VDRL), fluorescent treponemal antibody absorption (FTA-ABS) test, agglutination assay (TP-PA), darkfield microscopy (blood)
- Trichomoniasis
  - Direct visualization (urine/discharge)
  - PCR (urine/discharge)

# Get Their Contact Information

# Treatment for Common Sexually Transmitted Infections

# Treatment for STIs

- Chlamydia

- Doxycycline 100mg PO BID x 7 days
- OR azithromycin 1gm PO once or levofloxacin 500mg daily PO x 7 days

- Gonorrhea

- Ceftriaxone 500mg IM once
- OR gentamycin 240mg IM once + azithromycin 2gm PO once or cefixime 800mg PO once

- Hepatitis

- Variable and should be referred for additional testing to determine treatment

- Herpes

- New: Acyclovir 400mg PO TID x 7-10 days or famciclovir 250mg PO TID x 7-10 days or valacyclovir 1gm PO BID x 7-10 days
- Recurrent: Acyclovir 800mg PO BID x 5 days or famciclovir 125mg PO BID x 5 days or valacyclovir 1gm PO daily x 5 days

# Treatment for STIs

- HIV
  - Variable and should be referred for additional testing to determine treatment
- *Mycoplasma genitalium*
  - Doxycycline 100mg PO BID x 7 days then moxifloxacin 400mg PO daily x 7 days if resistance testing is unavailable
- Syphilis
  - Primary/Secondary/Early Latent: Benzathine Penicillin G 2.4 million units IM x 1
  - Late Latent/Tertiary: Benzathine Penicillin G 2.4 million units IM weekly x 3
- Trichomoniasis
  - Women: Metronidazole 500mg PO BID x 7 days
  - Men: Metronidazole 2gm PO once
  - OR Tinidazole 2gm PO once

# Planning for Follow-up Visits

# Planning for Follow-up Visits

- Obtain contact information
  - Ensure clarification on what can be left on voicemail
  - Reinforce the importance of answering the call
- Schedule follow-up or walk-in
- Provider visit or nurse/MA visit
- Billing and coding concerns

# Partner Prescribing Guidelines

# Partner Prescribing Guidelines

- Expedited partner therapy
  - The clinical practice of treating sex partners of patients diagnosed with chlamydia or gonorrhea by providing prescriptions or medications to the patient to take to his/her partner without the healthcare provider first examining the partner
  - Review logistics
  - May consider for trichomoniasis
- Chlamydia
  - Doxycycline 100mg PO BID x 7 days
- Gonorrhea
  - Get partner in for Ceftriaxone, if not possible, cefixime 800mg PO once

# Partner Prescribing Guidelines

## If you've been diagnosed with an STD, you may be able to get treatment for your partner, too.



If you've been diagnosed with chlamydia or gonorrhea, the first step is to **get treatment**.

But did you know that **you may be able to get treatment for your partner, too?**

Talk to your doctor. They may be able to give you medicine or a prescription for your partner – even without seeing them. This is called **expedited partner therapy (EPT)** or patient-delivered partner therapy (PDPT), and it's available in most states.

### With EPT:

#### PRESCRIPTION

- Your partner can get treated quickly – without having to go to the doctor first
- You'll be protected from your partner passing the infection back to you
- Neither of you will pass the infection on in the future



#### Why does my partner need treatment?

Without treatment, your partner could pass the STD back to you. Keep in mind that many people with chlamydia and gonorrhea have no signs or symptoms, so your partner may have the STD and not know it. Left untreated, chlamydia and gonorrhea can cause serious health problems.

If you've been diagnosed with chlamydia or gonorrhea, **talk to your doctor** to find out if EPT is an option for you and your partner.

To learn more about how you can prevent STDs, visit [cdc.gov/std/prevention](https://www.cdc.gov/std/prevention).



Centers for Disease Control and Prevention  
National Center for HIV/AIDS,  
Viral Hepatitis, STD, and  
TB Prevention

# Partner Prescribing Guidelines

Table 1.

The Expedited Partner Therapy Debate

Pros	Cons
Provides sexual partner treatment	Limited screening for STIs in sexual partners
Improved access to care and convenience for sexual partners	Limited provision of care for men in OB/GYN clinics
Decreased cost associated with recurrent and persistent STIs	Potential, albeit rare, severe, life-threatening allergic reactions
Decreased incidence of recurrent STIs	Pharmacists refusal to fill EPT prescription
Decreased STI-related morbidity*	Unclear payer <sup>†</sup> of partner therapy via EPT prescription
Targets male partners that are often asymptomatic and may not access care	Risk of intimate partner violence

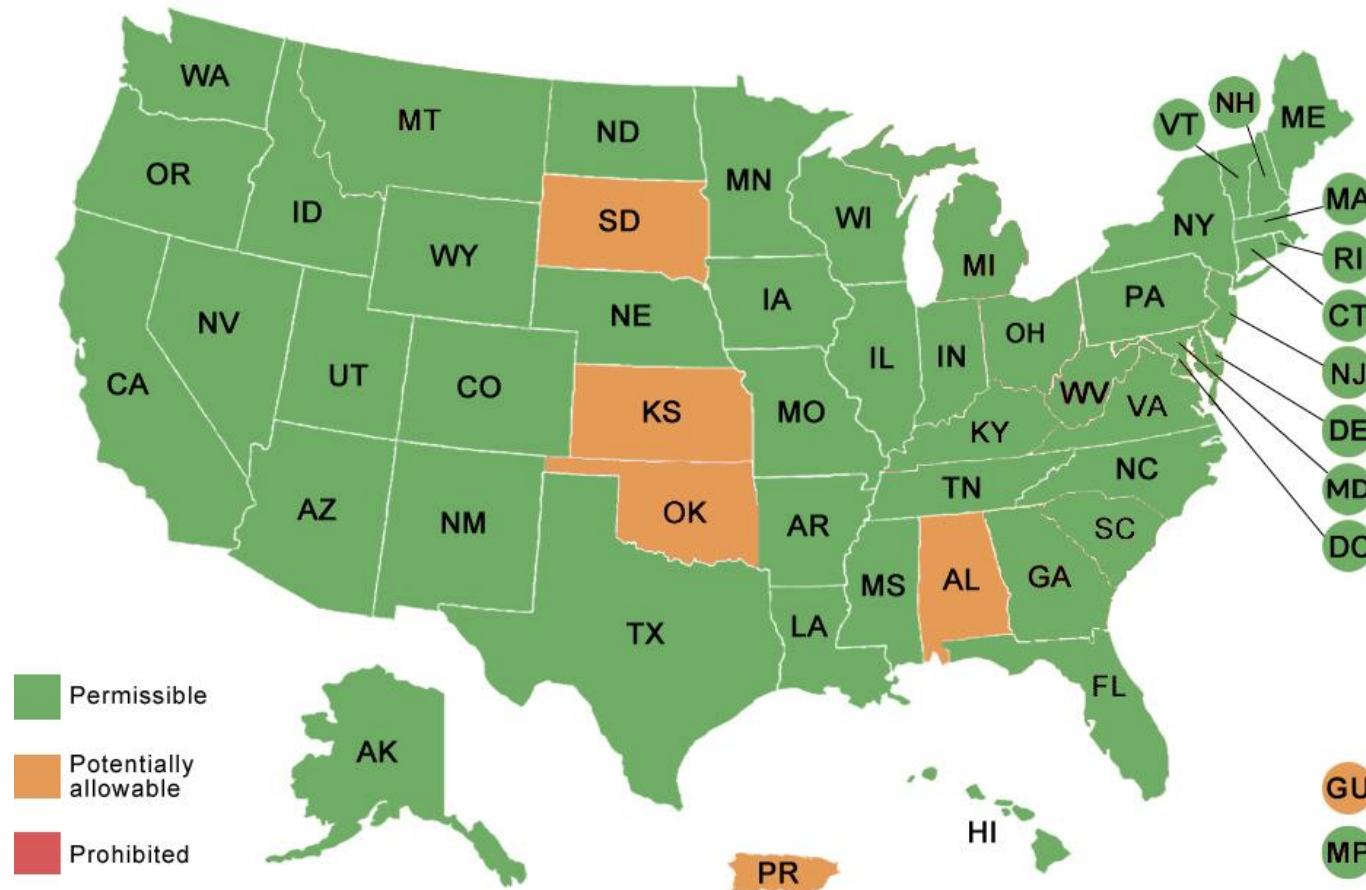
[Open in a separate window](#)

STI: sexually transmitted infection; EPT: expedited partner therapy

\*Pelvic inflammatory disease, infertility, chronic pelvic pain, ectopic pregnancy

<sup>†</sup>Insurance vs. out-of-pocket

# Partner Prescribing Guidelines



# Partner Prescribing Guidelines

**University of Michigan**  
Michigan Medicine Nutrition Services | Saline Health Center  
700 Woodland Dr E  
Saline MI 48176-1620

Phone: [REDACTED]  
Fax: [REDACTED]  
Date: Sep 20, 2018

**Name:** Expedited Partner Therapy

DOB: 01/01/2018

**Expedited Partner Therapy (EPT) azithromycin (ZITHROMAX) 500 mg tablet**

**Sig:** Take 2 tablets by mouth once in a single dose.

**Qty:** \*\*2 (Two) tablets\*\*

**Order ID:** [REDACTED]

**Refill:** \*\*0 (Zero)\*\*

**Start:** Sept 20, 2018

Signature: \_\_\_\_\_

Entered by: [REDACTED]  
Authorizing Provider: [REDACTED]  
Supervising Provider: [REDACTED]

NPI: [REDACTED]  
NPI: [REDACTED]  
NPI: [REDACTED]

Dear Pharmacists,

This is a prescription for Expedited Partner Therapy for Chlamydia.

Michigan Department of Health & Human Services (MDHHS) has authorized healthcare providers to provide antibiotics to treat chlamydia and gonorrhea in the sex partners of patients with chlamydia or gonorrhea without first examining or testing the partner. A prescription with "Expedited Partner Therapy" in place of a name and address and a birth date of January 1 of the current year may be filled based on these regulatory changes.

The individual receiving the prescription has been instructed to pick up this medication from your pharmacy using the terms "EPT" or "Expedited Partner Therapy" and the name of the prescribing clinician.

If you have questions, please do not hesitate to contact the prescribing provider's clinic at [REDACTED]. For more information on EPT, please see:

1) The MDHHS Guidance for Health Care Providers: Clinical Advisory: Utilizing Expedited Partner Therapy (EPT) for Chlamydia and Gonorrhea (July 2015), [https://www.michigan.gov/documents/mdch/EPT\\_for\\_Chlamydia\\_and\\_Gonorrhea\\_-\\_Guidance\\_for\\_Health\\_Care\\_Providers\\_494241\\_7.pdf](https://www.michigan.gov/documents/mdch/EPT_for_Chlamydia_and_Gonorrhea_-_Guidance_for_Health_Care_Providers_494241_7.pdf)

2) Public Act 525 of 2014 (MCL 333.5110) authorized the use of expedited partner therapy (EPT) for certain sexually transmitted diseases, designate by the state health department. In January 2015, the department designated the diseases chlamydia and gonorrhea for which the use of EPT is appropriate.

When this partner script is FAXED to a preferred pharmacy, the Order ID number may be used as a Unique Identifier to ensure the correct partner is dispensed the correct medication(s). The partner will be provided this number for medication pick-up.

# Considerations of Onsite Dispensing

# Considerations of Onsite Dispensing

- Benefits

- Patient convenience and access to prescriptions
- Improves the physician-patient experience
- Profitable

- Considerations

- Space for dispensary
- Patient flow
- Staff involvement
- Contracted service or clinic managed
- Legal/license requirements

# Session Evaluation

- Your feedback is valuable, take a moment to complete the survey for this session.
- To claim CME, you must complete a separate survey available after the convention.

\* How likely are you to recommend this **content** to a colleague?

Not likely at all                      Neutral                      Extremely likely

0   1   2   3   4   5   6   7   8   9   10

What did you find most valuable about this **content**?

What would have made this **content** better?



Thank you!

Questions?

[Lindsey.fish@dhha.org](mailto:Lindsey.fish@dhha.org)

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# References

- [STD Data and Statistics \(cdc.gov\)](https://www.cdc.gov/std)
- [Which STD Tests Should I Get? | Prevention | STDs | CDC](https://www.cdc.gov/std/prevention)
- [MedlinePlus: Medical Tests](https://pubmed.ncbi.nlm.nih.gov/)
- [Table of Contents - STI Treatment Guidelines \(cdc.gov\)](https://www.cdc.gov/std/treatment)
- [Expedited Partner Therapy \(cdc.gov\)](https://www.cdc.gov/std/epit)
- [Improving Women's Health and Combatting Sexually Transmitted Infections Through Expedited Partner Therapy - PMC \(nih.gov\)](https://www.nih.gov/health-topics/expedited-partner-therapy)
- [Things You Must Know When Setting up Physician Dispensing \(firstcoasthealthsolutions.com\)](https://www.firstcoasthealthsolutions.com/)