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Chlamydia testing may need to be more intensive

In a Radio Australia podcast, Prof Jane Hocking reported her clinical trial of intensive chlamydia screening of 16 to 29-year-olds in primary care.¹

Both arms showed a reduction in chlamydia prevalence but the intervention group also showed a significant reduction in hospital admissions for PID (numbers needed to screen to prevent one admission 740 over 3 years).² The control group may have been contaminated by awareness of intervention group activities.

The intensive practices had incentive payments for GPs/nurses to screen with 3-monthly feedback and an education package for GPs and nurses including strategies for discussing and offering chlamydia testing, for managing infection, clinical criteria for PID and epididymitis, a computer alert, developing reminder systems to test negative patients at 12 months or test positive patients at 3 months.


References:

1. Questions raised over chlamydia testing policy. ABC RN Health Report (2018) [Click here](#)
2. Population effectiveness of opportunistic chlamydia testing in primary care in Australia: a cluster-randomised controlled trial. Lancet (2018) [Click here](#)

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