

Chlamydia screening to focus on reducing harm from untreated infections

Following an evidence review and a public consultation, England's NCSP is changing to put a greater emphasis on reducing the harm of untreated infections on young women's reproductive health. The programme will aim to provide treatment more rapidly and expand testing in community settings for sexually active women aged under 25 years.

Until now, the focus has been on increasing chlamydia diagnoses, through asymptomatic screening in young men and women. The changed approach is designed to achieve better long-term health outcomes

The programme will also place more emphasis on reducing reinfections, which are known to increase likelihood of serious consequences, through better notification of sexual partners and retesting following treatment.

Previously, the NCSP's strategy was to proactively offer all sexually active young adults aged under 25 years chlamydia testing as a routine part of every primary care and sexual health consultation, with the aim of controlling chlamydia in the population through early detection and treatment of asymptomatic infection.

Going forward, chlamydia screening in community settings, such as GP practices and community pharmacies, will only be proactively offered to young women and aim to speed up diagnosis and treatment.

Young men will still be offered a chlamydia test if they have symptoms, if their partner has chlamydia or as part of care offered by specialist sexual health services. Young men can still request a test at a sexual health service.

In 2019, less than 10% of all chlamydia testing in 15 to 24 year olds involved young men outside of sexual health services.

Gay, bisexual and other men who have sex with men, transgender women and non-binary people (assigned male at birth) can continue to access testing as appropriate through specialist sexual health services.

The change comes after a comprehensive review of the programme by an international group of experts in sexually transmitted infection (STI) control, who found that focusing on harm reduction will lead to better health outcomes.

Kate Folkard, Deputy Director for the National Infection Service at Public Health England (PHE) said:

The expert review group has highlighted the need for the National Chlamydia Screening Programme to focus its efforts on reducing harm by improving asymptomatic screening of young women as they are most at risk from ill health and further complications due to untreated chlamydia, particularly to their reproductive health.

The new strategy will maximise the programme's health benefits, helping reduce complications such as ectopic pregnancy, pelvic inflammatory disease and infertility.

Specialist sexual health services will remain unchanged. Everyone can still get tested if needed and if you have had sex without a condom with new or casual partners you should have an STI check up annually. Many clinics offer STI tests via their website, which are sent in the post to be taken at home.

Dr John McSorley, President of the British Association of Sexual Health and HIV (BASHH) said:

BASHH welcomes the National Chlamydia Screening Programme Expert Review recommendation that future strategy focusses on harm reduction to maximise health outcomes. We recognise the importance of evaluation of all activity and the need to react and respond to that expert analysis of the best available evidence.

It is important to acknowledge that this change in emphasis is designed to increase the amount of testing in the population of young women most at risk of harm from chlamydia infection. We welcome that commitment.

We recognise too, that this change sits amid an overall commitment to support all young people, and the range of primary and specialist sexual health services that exist. Immediately prior to the coronavirus (COVID-19) pandemic, England experienced some of the highest rates of sexually transmitted infections on record, thus it is vital that the sexual health of all of our population continues to be invested in.