

# FIRST, DO NO HARM: THE SHIFT TO NON-EMPIRIC TREATMENT OF SEXUAL CONTACTS OF CHLAMYDIA AND GONORRHOEA

## Authors:

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## Background:

In 2018, informed by increasing concerns about antimicrobial resistance, favourable patient and provider acceptability surveys and faster laboratory reporting times, Sydney Sexual Health Center (SSHC) stopped routinely offering empiric treatment to sexual contacts of chlamydia and gonorrhoea. The aim of this study was to determine if this change negatively impacted patient outcomes.

## Methods:

A before and after retrospective file review of people who presented as asymptomatic contacts was conducted. Test results and treatment information was recorded. For those who did not receive empiric treatment, the time from testing to notification to treatment, reported sex and/or the development of symptoms in the time between testing and treatment, and loss to follow up were recorded.

## Results:

Post 2018, 11 (17%) of gonorrhoea and 20 (19%) of chlamydia contacts received empiric treatment compared to 54 (89%) of gonorrhoea and 115 (92%) of chlamydia contacts prior to 2018. The average time from testing to treatment was 5.9 days for gonorrhoea contacts and 4.9 days for chlamydia contacts. Post 2018, 279/651 (43%) of contacts were diagnosed with chlamydia and/or gonorrhoea. Of these, 7 (1.1%) reported condomless sex and 17 (6.0%) reported new symptoms between their testing and treatment visit. Almost all contacts (157, 98.7%) post 2018 who did not receive empiric treatment and tested positive received treatment, either at SSHC (132, 93.0%) or at another clinic (10, 7.0%). Two contacts who did not receive empiric treatment and tested positive for chlamydia were lost to follow up.

## Conclusion:

Almost all contacts who were not treated empirically and tested positive returned for treatment. Non-empiric treatment did not result in missed treatment opportunities for gonorrhoea contacts and the majority did not develop symptoms between testing and treatment. There was a small risk of onward transmission in patients who tested positive and reported condomless sex before treatment.

## Disclosure of Interest Statement:

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