

THE IMPACT OF COVID-19 PUBLIC HEALTH MEASURES ON STIS IN AUSTRALIA: A NATIONAL STUDY OF 22 SEXUAL HEALTH CLINICS

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Background:

In March 2020, Australia introduced strict measures in response to the COVID-19 pandemic, limiting close contact. This study examines the impact of these measures on HIV and STI positivity among sexual health clinics (SHCs) attendees in Australia.

Methods:

Data from 22 SHCs were extracted from January 2019 to June 2020 using a sentinel surveillance system (ACCESS). Clinic attendances, HIV/STI testing and diagnoses, during the COVID-19 period (2020 Q2) with the five quarters before COVID-19 (2019 Q1 to 2020 Q1) were compared. Reason for visit (symptoms and STI-contact) where available were analyzed in a subset of data. Poisson regression was used to assess the additional change (rate ratio [RR] and 95% Confidence Intervals) associated with COVID-19 adjusting for prior trend.

Results:

Comparing 2020 Q2 with the 5-quarter-average before COVID-19, clinic attendances dropped (37489 vs 21569; RR 0.59(0.58-0.60)). This represented a 69.0% decrease in female sex workers, 49.8% in heterosexuals and 35.0% in men who have sex with men. Significant reductions in testing were observed for HIV (20322 vs 10570; RR 0.52(0.51-0.54)), chlamydia and gonorrhoea (27109 vs 13605; RR 0.53(0.52-0.54)), and syphilis (19306 vs 10233; RR 0.55(0.54-0.56)).

Chlamydia and HIV cases decreased (2719 vs 1470 and 74 vs 51 respectively) however changes in positivity were not observed. Gonorrhoea and syphilis cases decreased (1598 vs 1009 and 886 vs 676 respectively), however, positivity increased (6.68% vs 8.17%; RR 1.22(1.13-1.32) and (4.59% vs 6.61%; RR

1.35(1.22-1.49) respectively). The proportion of symptomatic visits and STI-contacts increased (19.99% vs 22.18%; RR 1.05(1.01-1.10) and 6.34% vs 8.43%, 1.16(1.08-1.24) respectively).

Conclusion:

Attendance and STI/HIV testing at SHCs decreased in Q2 2020. Positivity for Chlamydia and HIV did not differ significantly, because these are usually asymptomatic. Increases in positivity were observed for Syphilis and Gonorrhoea. Post-lockdown trends in testing re-uptake and positivity will be critical to monitor.

Disclosure of Interest Statement:

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