## ROUTINE TREATMENT OF CHLAMYDIA AND GONORRHOEA SEXUAL CONTACTS ATTENDING SEXUAL HEALTH SERVICES: IS IMMEDIATE TREATMENT NECESSARY?

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**Background:** Rates of chlamydia (CT) and gonorrhoea (NG) are increasing in Australia. Globally, there are major concerns about overuse of antimicrobials in an era of increasing antimicrobial resistance. We aimed to assess positivity among STI contacts to establish if guidelines recommending immediate treatment of contacts is still warranted.

**Methods:** Data from 1 January 2013 to 31 December 2017 were extracted from 12 publicly-funded sexual health services through ACCESS (Australian Collaboration for Coordinated Enhanced Sentinel Surveillance). Generalising estimating equations were used to estimate CT and NG positivity among STI contacts.

**Results:** Of the 74,385 treatment episodes during the study period, 15,639 (21.0%) were recorded as an STI contact. Overall, CT and NG positivity for contacts was 40% (95%CI: 39.2-41.3) and 38% (95%CI: 36.8-40.0), respectively. For CT contacts, females were more likely to be positive than males (48.4% vs. 37.5%, respectively, p<0.001) and heterosexual males were more likely to be CT positive compared with gay/bisexual males (GBM) (46.0% vs. 29.5%, respectively, p<0.001). For NG contacts, GBM were more likely to be positive compared with heterosexual males (38.1% vs. 26.3% respectively, p<0.001), and female NG contacts were more likely to be positive than males (50.7% vs. 37.1%, p<0.001). CT and NG contacts living in rural/remote regions (vs urban) were more likely to test positive for both CT and NG (94.3% vs 34.3%, p<0.001 and 58.7% vs 37.5%, p<0.001, respectively).

**Conclusion:** Overall, 60% of patients presenting to sexual health services as CT or NG contacts were not infected, suggesting that immediate treatment of contacts may no longer be an acceptable approach. Consideration of changing to a test-and-wait method would be dependent on rapid results availability and likelihood of patients returning for prompt treatment. Given the higher proportion of STI contacts testing positive in rural/remote regions, routine treatment of contacts is justified in this setting.

## **Disclosure of Interest Statement**

Nothing to declare