

Chlamydia infection in Travellers

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There is no conflict of interest.



STI and Travellers

- *Is travel a significant risk factor for sexually transmitted infections?*



Method

- A retrospective study of routinely collected data
- Inclusion criteria
 - heterosexual men and women
 - aged 30 years or under
 - attended Melbourne Sexual Health Centre (MSHC) from January 2007 to February 2017
 - Travellers: born outside Australia and present in Australia < 2 years
 - Residents: born in Australia or overseas born and living in Australia >5 years
- Excludes MSM, sex workers and transgender

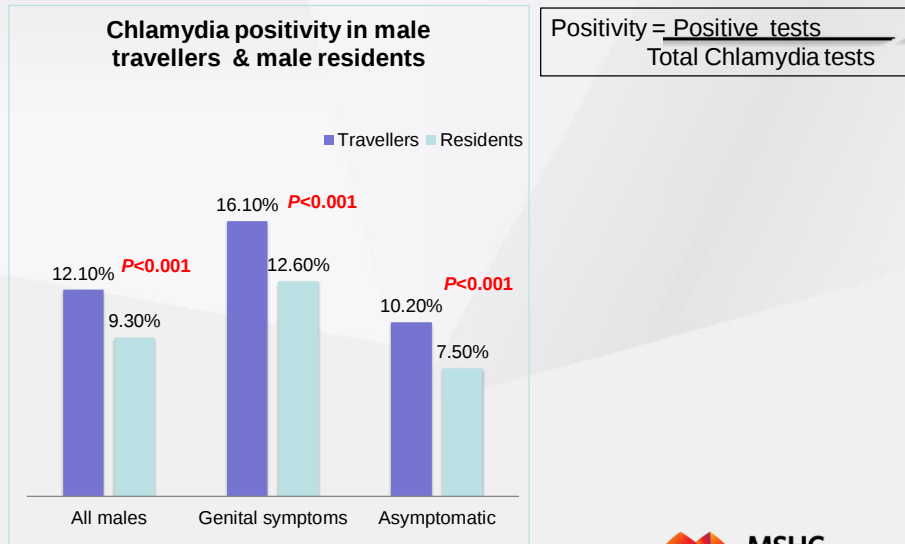


Results

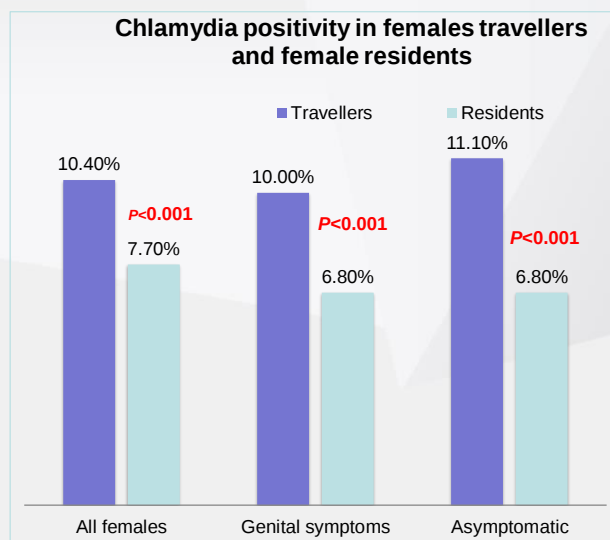
	Male	Female	Total
Travellers	14,172	17,970	32,142
Residents	12,567	11,131	23,698



Chlamydia positivity in males



Chlamydia positivity in females



Chlamydia positivity in travellers by country of birth

Country	Chlamydia positivity (%)	95% CI (%)	Country	Chlamydia positivity (%)
European Union			Australia	8.5% (95%CI: 8.2-8.9%)
United Kingdom	12.3%	11.7-13.1%		
Ireland	10.8%	9.7-12.1%		
France	11.7%	10.1-13.5%		
Sweden	12.8%	10.8-15.1%		
Germany	11.3%	9.4-13.6%		
Asia-Pacific				
China	11.7%	10.1-13.6%		
New Zealand	12.4%	10.8-14.1%		
Malaysia*	10.0%	7.5-13.3%		
North America				
Canada*	10.2 %	8.6-12.1%		
United States*	7.9%	6.5-9.5%		

* 95% CI overlaps with Australian resident's chlamydia positivity



Risk factors for chlamydia infection

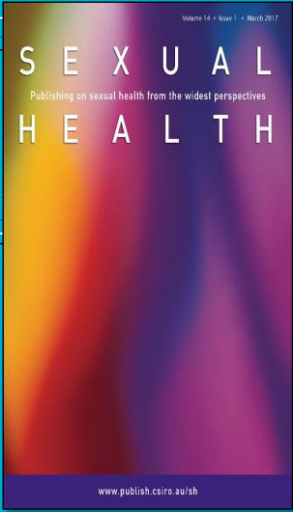
	Male (N=26,739)	Female (N=29,101)
	AOR (95%CI)	AOR (95%CI)
Chlamydia contact		
Yes	9.5(8.4-10.8, p<0.001)	7.1 (6.2-8.1, p<0.001)
Age		
≤ 20	1.3 (1.1-1.5, p=0.008)	2.0 (1.7-2.3, p<0.001)
21-25	1.4 (1.3-1.6, p<0.001)	1.5 (1.3-1.6, p<0.001)
Number of partners in last 12 months		
≥4	1.6 (1.4-1.8, p<0.001)	1.4 (1.3-1.5, p<0.001)
Condom use in last 12 months		
Inconsistent	2.7 (2.2-3.2, p<0.001)	2.0 (1.7-2.4, p<0.001)
Genital symptoms		
Yes	2.8 (2.6-3.1, p<0.001)	1.2 (1.0-1.3, p=0.004)
Travellers		
Yes	1.4 (1.2-1.5, p<0.001)	1.4 (1.3-1.5, p<0.001)



Summary

- Being a traveller is an independent risk factor for chlamydia infection in young heterosexuals.
- Travellers should be included as a priority population in service delivery and planning of sexual health clinics.
- Important to have ongoing provision of sexual health services for travellers to prevent onward transmission of STI in local and traveller populations.





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