

EXPERIENCED & PERCEIVED BARRIERS & FACILITATORS TO PARTNER THERAPY FOR CHLAMYDIA

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Introduction

Chlamydia trachomatis is the most frequently diagnosed sexually transmitted bacterial infection in women and men worldwide^{1,2}

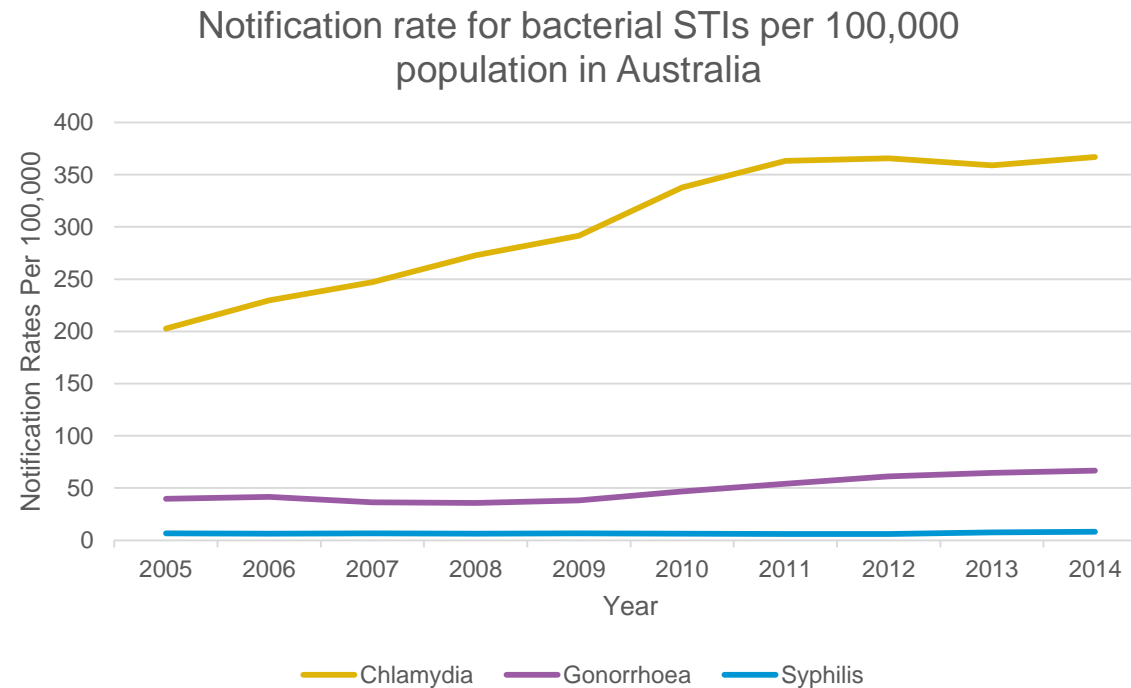
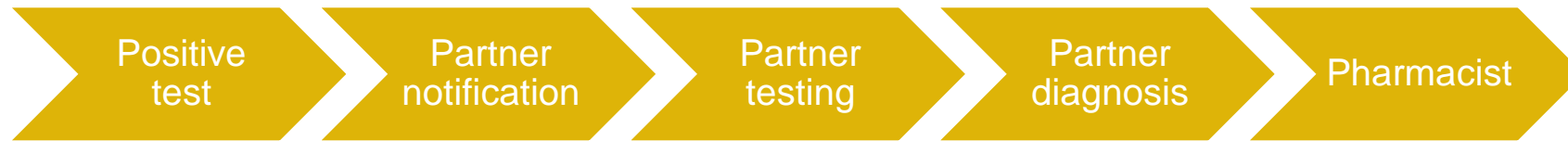


Figure : Notification rate for bacterial sexually transmitted infection per 100,000 population in Australia³

Current partner management



Barriers^{4,5}

- ☹️ Difficulty attending healthcare facility
- ☹️ Fear of positive test
- ☹️ Lack of time to get tested
- ☹️ Inconvenience of testing

Expedited partner therapy (EPT)

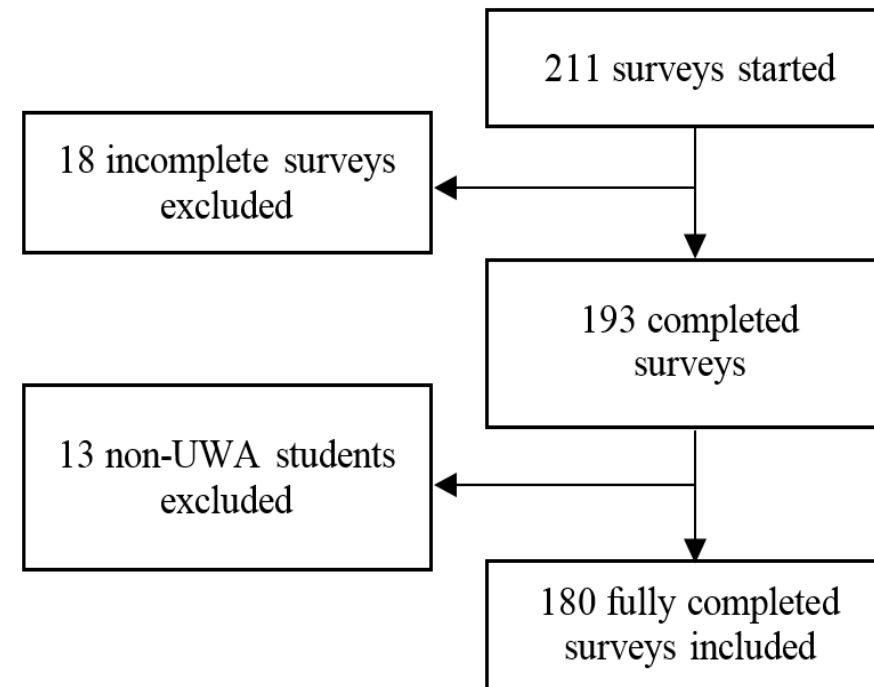


To determine barriers and facilitators to
current partner management and EPT for
chlamydia
from the perspectives of previous patients and
hypothetical partners

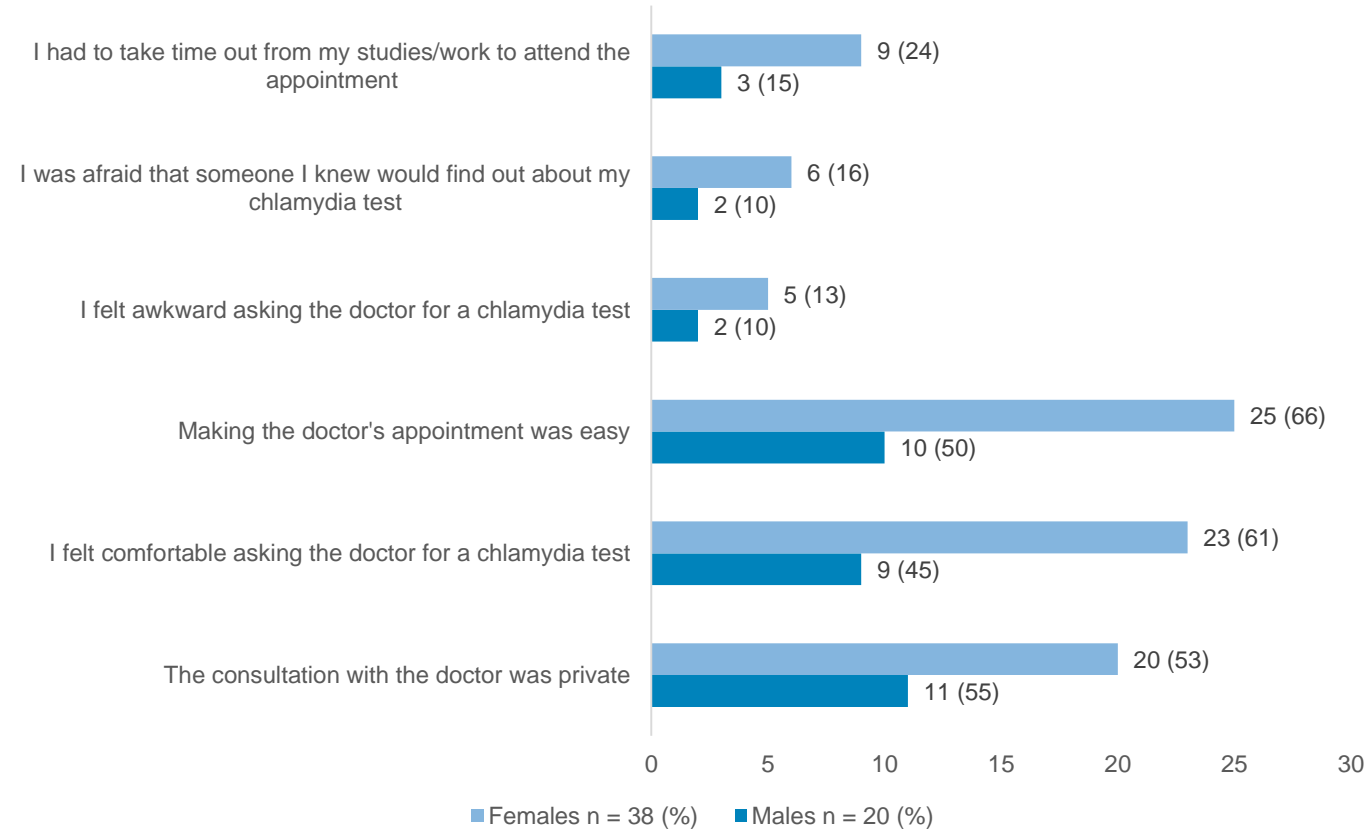
- Survey developed, piloted and refined
 - Open and closed questions
 - Three sections
 - Completion time 2-3 minutes
- Live on Qualtrics for 17 days
- Open to all University of Western Australia students

Results

- 180 participants
- Median age 22 years
- 59% (n=107) female
- 32% (n=57) prior experience with chlamydia testing and/or treatment
 - 17% (n=10) had positive test

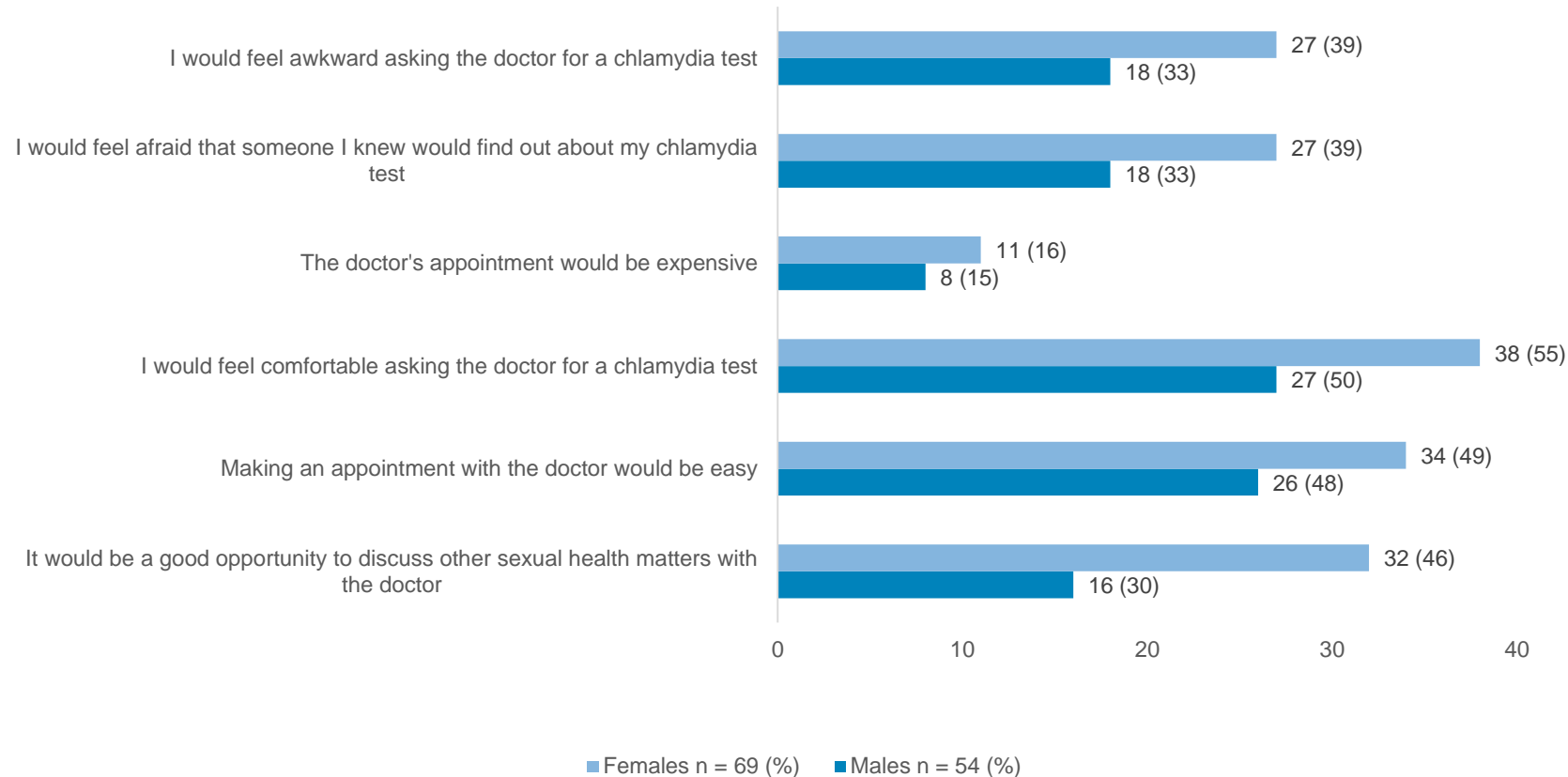


Results - experience with current management



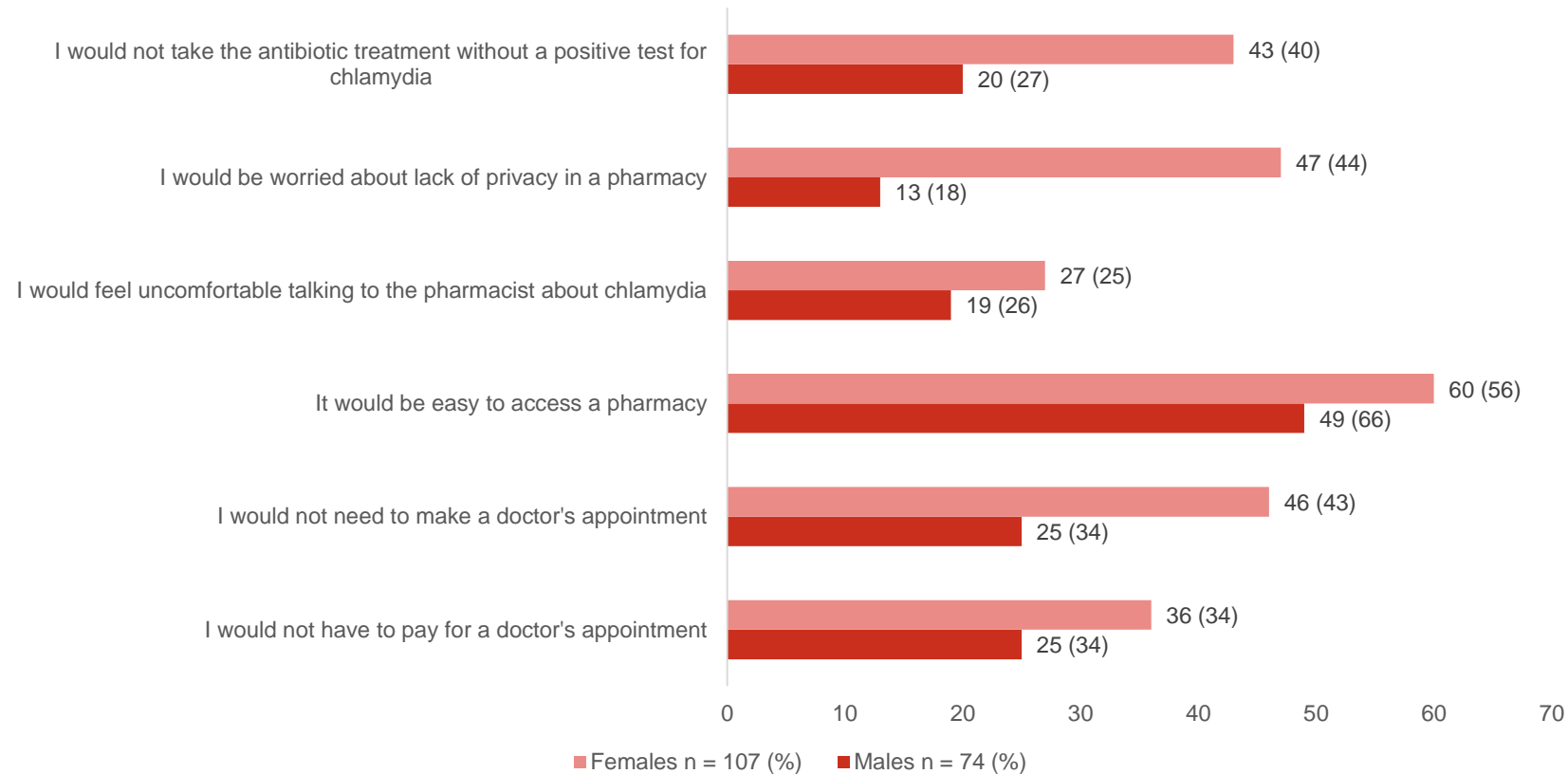
Top three barriers and facilitators to the question prompt: “When you were tested or treated for chlamydia...”

Results – no experience with current management



Top three barriers and facilitators to the question prompt: “If your sexual partner told you they had chlamydia...”

Results – EPT



Top three barriers and facilitators to the question prompt: “If your sexual partner told you they had chlamydia...”

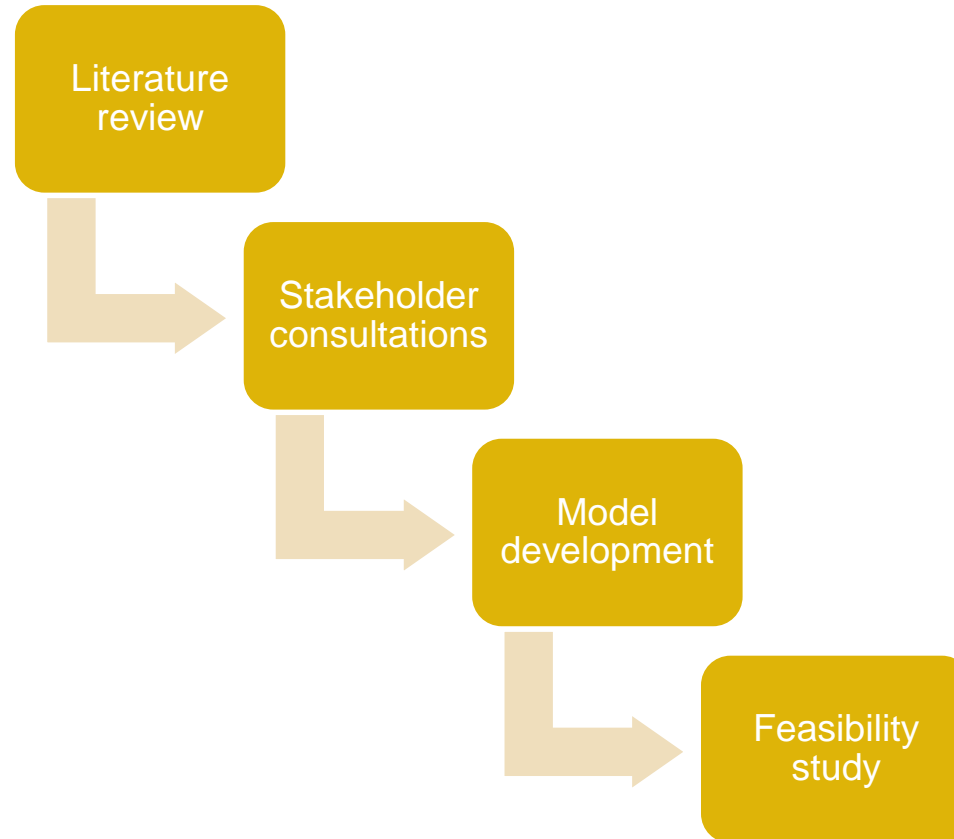
- ?? Weight of each barrier/facilitator
- Participants liked ease of treatment access and felt comfortable requesting a test
- Barriers include inconvenience, privacy concerns and awkwardness

- Convenient
- Fast-tracked

BUT!

- Privacy concerns need addressing

What's next?



- Barriers and facilitators exist for both methods
- Barriers for **current management** were facilitators for **EPT**
- Positive response to the idea of **EPT**

So what?

EPT could introduce treatment choice
for partners of chlamydia-positive patients
who face barriers to current methods.

References

1. Australian Bureau of Statistics. *Sexually transmissible infections*. 2012; Available from: <http://www.abs.gov.au/AUSSTATS/abs@.nsf/Lookup/4102.0Main+Features10Jun+2012>
2. Heijne, J.C., et al., *The role of reinfection and partner notification in the efficacy of Chlamydia screening programs*. *Journal of Infectious Diseases*, 2011. **203**(3): p. 372-377.
3. The Kirby Institute, *HIV, viral hepatitis and sexually transmissible infections in Australia Annual Surveillance Report 2015*.
4. Melvin, L., et al., *Preferred strategies of men and women for managing chlamydial infection*. *BJOG: An International Journal of Obstetrics & Gynaecology*, 2009. **116**(3): p. 357-365
5. Cameron, S., et al., *Expedited partner therapy for Chlamydia trachomatis at the community pharmacy*. *BJOG: An International Journal of Obstetrics & Gynaecology*, 2010. **117**(9): p. 1074-1079.

Questions?

