



Rates on the rise

ACCEPt Project Officers work hard to help clinics find ways of increasing their chlamydia testing rates – and it seems to be working.

Although there's a way to go before we reach our target of having all ACCEPt

intervention clinics testing a majority of patients aged 16–29 years, preliminary data indicate that testing rates are on the rise. Chlamydia testing has increased in some intervention clinics by as much as 200%, and testing rates are over 30% in our highest performing clinics.

This is fantastic progress, and shows that testing rates can improve greatly when GPs and practice nurses put their mind to it.

These numbers don't tell the whole story, though. Young men are still frequently missed, and while some clinics are star performers in chlamydia testing, others perhaps need a little more support to get testing rates up – which is where ACCEPt comes in. Project Officers are on hand to work with all clinics to make testing routine.

Associate Professor Jane Hocking

Principal Investigator, ACCEPt

Untreated chlamydia – 1 in 10 women develop PID

The consequences of untreated chlamydia infection can be both costly and distressing. Once the infection passes the cervix, it can wreak havoc in the upper genital tract, causing pelvic inflammatory disease (PID) and chronic pelvic pain. In turn, scarring of the fallopian tubes can result in ectopic pregnancy and tubal factor infertility.

But just how common are these health consequences for young women with undiagnosed chlamydia? According to results from the Prevention of Pelvic Infection (POPI) trial, published in the *British Medical Journal* in 2010, an estimated 1 in 10 young women will develop clinical PID within a year if chlamydia is left untreated. Other studies have shown that the more times a young woman is infected, the greater her risk of developing PID – women testing positive for chlamydia twice are four times as likely to develop PID than those testing positive only once.

When it comes to infertility, women with untreated chlamydia have a 2–8% risk of infertility.

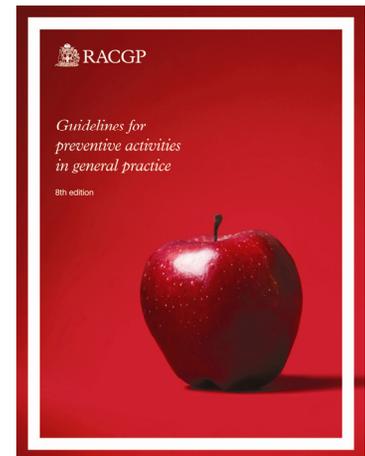
Test for chlamydia up to 29: 'Red Book'

ACCEPt has always taken the view that both men and women up to the age of 29 years should be tested for chlamydia on an annual basis. This approach is now reflected in RACGP's updated 'Red Book' guidelines. The 8th edition of the RACGP's *Guidelines for preventive activities in general practice* – the authority on preventive healthcare in general practice – has increased the upper age limit for chlamydia testing.

The new guidelines recommend annual testing for chlamydia infection in all sexually active people aged 15–29 years – up from 25 years in previous editions. This is in recognition of an increase in chlamydia prevalence and risk of complications.

Annual testing in this age group, for *both* sexes, is recommended.

A copy of the 'Red Book' can be downloaded from the RACGP website, at <http://www.racgp.org.au/your-practice/guidelines/redbook/>



Looking for Points?

Intervention:

40 Category 1 RACGP points
10 ACCRM points

Also accredited for Women's Health points

See page i of your ACCEPt education pack for details
(Requirements must be completed by 30 June 2013)

Control:

Use your ACCEPt education pack for Self Recorded Activity points

What role can practice nurses play in chlamydia testing?

Only GPs and practice nurses with Pap provider accreditation are authorised to request a chlamydia test from pathology. However, there are many ways in which all practice nurses can contribute to making chlamydia testing routine in their clinic. Here are some ways that practice nurses can become involved:

- **Talk to patients:** Practice nurses can discuss chlamydia testing with patients in the target age group (16–29 years) and provide them with information about chlamydia.
- **Initiate testing in consultation with the GP:** Practice nurses can take the lead in chlamydia testing by initiating tests for eligible patients.
- **Refer patients to the GP for testing:** Alerting the GP that a patient is eligible for a chlamydia test can serve as a useful reminder to the GP.
- **Recalls and reminders:** Practice nurses can help to set up recall and reminder systems in their clinic and obtain verbal permission from patients to add them to the recall service. Patients should be recalled annually for a chlamydia test, or after 3 months if they test positive and are treated. Practice nurses can also ensure that recalls will be effective by keeping patient contact details and preferred method of contact up to date.
- **Partner notification:** Discussing partner notification with patients who test positive can help to reassure patients and ensure that their partners are tested and treated.
- **Manage chlamydia resources:** Practice nurses can champion chlamydia testing in their practice by making sure that there are posters and educational leaflets in the waiting room, as well as urine jars and resources for GPs and nurses to give to patients in the consulting rooms.
- **Help young patients become independent:** Patients from the age of 15 years are eligible for their own Medicare card. Practice nurses can provide application forms and assist young people with filling out the application. Forms are available at www.medicareaustralia.gov.au. Additional resources are available at <http://www.caah.chw.edu.au/resources/#medicare>
- **Don't forget the boys:** Young men are often overlooked when it comes to chlamydia testing, even though prevalence is just as high in men (5.2%) as women. Practice nurses can help to ensure that both men and women are tested, which helps to stop the infection from spreading.



This project has been commissioned and is funded by the Australian Government Department of Health and Ageing.