Making Progress

After a quiet festive season for ACCEPt, project officers are once again travelling far and wide.

It’s been less than a year since recruitment began, and ACCEPt has already recruited almost 60 clinics across Victoria, New South Wales and Queensland. This represents an enormous amount of support from the general practice community, for which we are immensely grateful.

With floods devastating large areas of Queensland and Victoria over recent months, ACCEPt project officers have been focusing their efforts on recruiting clinics in unaffected regions. Far from deterring us, however, the floods have prompted us to broaden our recruitment net. We are now targeting townships in South Australia, in addition to the areas we are already recruiting in the eastern states. Chantal Maloney, one of our Melbourne-based project officers is spearheading ACCEPt’s move into South Australia, with recruitment of towns along the Limestone Coast already underway.

The prevalence survey is also progressing well, thanks to a wonderful team of research assistants who have been hired to recruit young people in participating practices. With their work and the cooperation of clinic staff and GPs, the prevalence survey has already been successfully completed in 16 clinics.

Associate Professor Jane Hocking
Principal Investigator, ACCEPt

ACCEPt GPs have their say

One of the key goals of ACCEPt is to assess the acceptability of an annual chlamydia testing program to GPs. This will help to inform the Australian Government Department of Health and Ageing – who commissioned and fund ACCEPt – about how to best implement a chlamydia testing strategy in the future.

GPs participating in ACCEPt have a unique opportunity to have their say in how chlamydia testing impacts on their work.

ACCEPt’s team of qualitative researchers, including Danielle Newton, Alaina Vaisey, Rebecca Lorch and Paula Nathan are attempting to capture GP views and opinions on chlamydia testing over the course of the study. Paula (pictured), who has recently joined the ACCEPt team, is conducting baseline interviews with a selection of GPs from across the towns that have been recruited so far.

Follow-up interviews at 18 and 36 months will also be conducted to assess the impact and acceptability of increased chlamydia testing in general practice. In addition to interviewing GPs participating in ACCEPt, qualitative interviews are being conducted with practice nurses and practice managers.

Chlamydia testing in men – what’s good for the goose...

It is well know that chlamydia can cause serious health consequences for young people. Pelvic inflammatory disease (PID) and infertility in women are the most significant adverse consequences of chlamydia infection; however, men can also suffer from the effects of untreated chlamydial infection. Although 80% of infections are asymptomatic, some cases cause discomfort due to urethral inflammation (urethritis) or inflammation of the epididymis and testes (epididymo-orchitis).

This is just one of the reasons why men should not be overlooked when it comes to testing for chlamydia in asymptomatic individuals. In Australia, a recent study has shown that GPs are less likely to test men for chlamydia than women, with the rate of testing for men only a third that for women. In addition to preventing potential cases of epididymitis, testing and treating men for chlamydia ensures that they will not pass the infection on to their partners. It also enables them to take responsibility for their own health and the health of their partners.

With urine testing for chlamydia being both fast and accurate, it is not surprising that recent Australian research has shown that both men and women find chlamydia testing to be an acceptable part of their health care routine.
**Prevalence Survey RAs – on the front line**

The prevalence survey is one of the more intensive times for ACCEPt staff and clinics. To ensure that the prevalence survey runs as smoothly as possible, ACCEPt relies on a team of mostly local research assistants to recruit consecutive young people to get tested for chlamydia and complete a 10 minute questionnaire.

Research assistants (RAs) come from a variety of backgrounds, and include nurses, practice staff and medical students, to name a few. While some research assistants sign on for just one clinic, some research assistants have become prevalence survey stalwarts, hopping from clinic to clinic as the project progresses.

One such trooper is Barbara Griffiths. A Colac local of 32 years, Barb started working with ACCEPt in December to complete the prevalence survey at the Corangamite and Otway Medical Clinics in Colac. She is now working in Camperdown and will be moving on to clinics in Portland in April.

Barb is a nurse by training, having studied at the Alfred Hospital in Melbourne. Her passion for nursing led her to study midwifery, but with a growing family of four children and a very busy GP husband, Barb left nursing and found she was unable to return.

Working for ACCEPt has been a welcome opportunity for Barb. “I have had the time of my life being an RA,” says Barb. “I have thoroughly enjoyed it and I really enjoy talking to the young people.”

The aim of the prevalence survey is to measure the prevalence of chlamydia in the population prior to commencement of the randomised intervention and again at the end of the project. The baseline prevalence survey has been completed in 16 clinics so far, and with enthusiastic RAs like Barb in the field, participation rates are high – around 70% of young people approached agree to take part. The overall chlamydia prevalence has been measured at 4.0% so far, with rates slightly higher in males (4.5%) than females (3.7%). Prevalence has also been found to be higher in rural (6.9%) compared with metropolitan areas (2.2%).

ACCEPt project officers are always on the lookout for research staff to help out with the prevalence survey in new ACCEPt clinics. For further information, please contact ACCEPt at info@accept.org.au.

**ACCEPt Progress Report**

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<td>59</td>
<td>Clinics who have agreed to be part of ACCEPt</td>
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<td>19</td>
<td>Rural townships that have seen 100% recruitment across clinics, as required for participation</td>
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<td>16</td>
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**Correction**

In the last issue of ACCEPtability (Issue 3), development of the GRHANITE™ data extraction tool was incorrectly attributed. GRHANITE™ was developed by staff at the Health Informatics Unit at The University of Melbourne’s Rural Health Academic Centre in Shepparton. The corrected version of Issue 3 is available for download from the ACCEPt website, www.accept.org.au

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