

Georgia Department of Public Health Division of Health Protection Office of Sexually Transmitted Diseases

Expedited Partner Therapy Guidance for Healthcare Professionals

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We protect lives.

Background of EPT

Expedited Partner Therapy (EPT) is a strategy recommended by the Georgia Department of Public Health (DPH) for treating the sex partner(s) of persons diagnosed with chlamydia trachomatis, a bacterial sexually transmitted disease (STD). EPT allows health care providers to provide a person diagnosed with chlamydia trachomatis, also known as the index patient, with medication or a prescription for treatment to deliver to his or her sex partner(s). Sex partner(s) are not required to have a physical examination, but it is recommended.

Practitioners who are legally authorized to prescribe and dispense prescription drugs are also legally authorized to prescribe and dispense EPT. In addition, a practitioner who "reasonably and in good faith" prescribes or dispenses antibiotic drugs for EPT, in accordance with Georgia Code Section 31-17-7.1 and DPH's rules and regulations, is protected from civil and criminal liability or disciplinary action by a professional licensing board.

Although Georgia law also contemplates the use of EPT to treat gonorrhea, DPH does not recommend EPT for gonorrhea at this time.

Public Health Impact

Sexually transmitted chlamydial infections are a significant public health problem. The Centers for Disease Control and Prevention has estimated that 1 in 20 sexually active young women aged 14-24 years has chlamydia. Untreated infections can lead to pelvic inflammatory disease, ectopic pregnancy, and infertility. Pregnant women and newborns are among the vulnerable populations.

Benefits of EPT

Treating chlamydia in persons testing positive for infection and their partner(s) helps to prevent transmission complications. Prompt treatment of both infected individuals and their partner(s) can prevent adverse reproductive health complications.

Recommended Drug Regimen for EPT

The recommended EPT treatment for chlamydia is Azithromycin 1 g orally in a single dose. No other drugs are currently recommended by DPH for EPT treatment of chlamydia. Sex partner(s) with allergies to Azithromycin should seek medical care for an alternative treatment. DPH does not currently recommend EPT as a strategy for treating gonorrhea due to concerns of antibiotic resistance. DPH will continue to monitor literature associated with EPT for gonorrhea.

Eligibility Criteria for EPT

EPT *can* be provided in the following cases:

- Partner(s) of an index patient with a laboratory-confirmed chlamydia infection.
 - The practitioner may identify the index patient's sex partner(s) within past 60 days or may give EPT to the index partner's most recent sex partner(s) if there are no partner(s) within the past 60 days.
- Partner(s) who are pregnant or may be pregnant.
- Partner(s) who are unable or unlikely to seek timely clinical services.

EPT <u>should not</u> be provided in the following cases:

 It is not recommended that partner(s) of index patients co-infected with gonococcal infections, syphilis, or HIV at the time of chlamydia diagnosis receive EPT due to concerns regarding antibiotic resistance and the need for additional medical treatment.

Special populations not recommended to receive EPT:

- Male patients known to have sex with other men (MSM): EPT is not recommended for MSM due to the lack of data to demonstrate its effectiveness in the MSM population and the risk of missing STD/HIV co-infections.
- Index patients 19 years of age and younger: The preferred approach to managing the treatment of sex partner(s) of adolescents is for partner notification to be carried out by health department staff where feasible. If health department partner notification is not available and providers choose to use EPT for individuals 19 years of

age and younger, it is recommended that EPT be offered as dispensed medication, not a prescription.

 Victims of sexual assault/abuse: EPT should not be offered in cases involving suspected or confirmed child abuse, sexual abuse/assault, or where the patient's safety may be at risk.

Providing medication for EPT

When dispensing EPT medication the following should be considered:

 EPT medication may be dispensed either directly to the index patient's partner(s) or to the index patient for delivery to his or her partner(s).

When dispensing EPT medication the following warnings must be included:

- The medication should be taken as soon as possible and as directed.
- The partner should consult with a physician or local health department before taking the EPT drug if the partner is already taking prescription medication, is allergic to any drug, has ever had an adverse reaction to a drug, or has a serious health condition.
- The partner should abstain from sexual activity until at least a week after taking the drug.
- The partner should follow up for testing three months after taking the medication to ensure that the infection has been successfully treated.

When prescribing EPT medication the following should be considered:

- Prescriptions can be transmitted electronically, verbally, or in writing, but must contain the works "Expedited Partner Therapy" or "EPT".
- The prescription must include the wording "Do not fill after 30 days from the date written" and shall not authorize refills.
- A written EPT prescription in the name of the partner(s) may be given to the index patient for delivery to the partner(s). However, if the name of the partner(s) is unknown to the practitioner, the prescription can be written in the name of the index patient and may be dispensed to the patient for delivery to the partner(s).

Practitioners should provide the following additional information when utilizing EPT:

- The index patient should be advised to return for an STD/HIV re-test three months to twelve months after treatment.
- The index patient should be advised to notify his or her sex partner(s) of the exposure to chlamydia and the need for testing and treatment.
- Health education materials should be provided to the index patient and his or her partner(s).

Reporting of EPT

All prescriptions and medications given to an index patient for his or her sexual partner(s) can be reported through the index patient's record in the State Electronic Notifiable Disease Surveillance System (SendSS).

Health Education Materials

Providers should provide index patients and their partners with written educational materials to include the following:

- Basic chlamydia fact sheet in plain language.
- Notification of exposure and information about the importance of treatment.
- Potential therapy-related allergies and adverse effects.
- Symptoms suggestive of complications (e.g., testicular pain in men and pelvic or abdominal pain in women).
- Instructions to abstain from all sexual activity for seven days after treatment and until all symptoms have resolved. Condoms should be used if abstinence is not an option during this period.
- Instructions to abstain from all sexual activity with any partner who has not been treated to prevent re-infection.

References

- Center for Disease Control and Prevention (CDC). Chlamydia CDC Fact Sheet (Detailed). <u>https://www.cdc.gov/std/chlamydia/stdfactchlamydia-detailed.htm</u>
- 2. Center for Disease Control and Prevention (CDC). Expedited Partner Therapy in the Management of Sexually Transmitted Diseases. Atlanta, GA: US Department of Health and Human Services, 2006. <u>https://www.cdc.gov/std/treatment/eptfinalreport2006.pdf</u>
- 3. Center for Disease Control and Prevention (CDC). 2015 Sexually Transmitted Diseases Treatment Guidelines, Chlamydial Infections. <u>https://www.cdc.gov/std/tg2015/chlamydia.htm</u>
- 4. Center for Disease Control and Prevention (CDC). 2015 Sexually Transmitted Diseases Treatment Guidelines. Clinical Prevention Guidance, Partner Services, Expedited Partner Therapy. <u>https://www.cdc.gov/std/tg2015/clinical.htm#partner</u>
- Center for Disease Control and Prevention (CDC). 2015 Sexually Transmitted Diseases Treatment Guidelines. Gonococcal Infections, Antimicrobial – Resistant N. gonorrhoeae. <u>https://www.cdc.gov/std/tg2015/gonorrhea.htm</u>
- 6. Official Code of Georgia Annotated (O.C.G.A.) Section 31-17-7.1, Expedited partner therapy.
- Rules and Regulations of the State of Georgia, Chapter 511-2-8, Expedited Partner Therapy (EPT). <u>http://rules.sos.state.ga.us/gac/511-2-8</u>