

Genital Chlamydia Infection Fact Sheet for Healthcare Workers

The majority of people with genital chlamydia infections will be asymptomatic. However, patients infected with chlamydia may present with a number of clinical signs and symptoms, including urethral discharge, dysuria, abdominal or pelvic pain, and mucopurulent cervicitis. The major principles underlying the control of chlamydial infection are effective treatment, partner notification, and education.

1. Effective treatment

The success of the treatment regime is reliant on taking of a sexual history at the time of the initial consultation. The information from this helps to guide the necessary treatment and follow up. The currently recommended treatment for uncomplicated cervicitis and urethritis is:

Azithromycin 1g orally as a single dose	OR	Doxycycline 100mg orally 12-hourly for 7-10 days
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For recommendations on alternative antibiotic regimens, the treatment of pregnant women and the treatment of complicated chlamydial infections refer to the latest editions of the *Antibiotic Guidelines*¹ and the *National Management Guidelines for Sexually Transmissible Infections*².

If symptoms persist or recur, further investigation of the aetiology and a second course of antibiotics may be required.

Specialist consultation should be sought for complicated or disseminated infections. Advice can be obtained from the duty medical officer at Melbourne Sexual Health Centre on telephone (03) 9347 0244.

2. Partner Notification & Treatment

Sexual partners of the case should be tested and then treated at the time of presentation, regardless of the absence of symptoms, to prevent re-infection.

Suggested strategies for notifying sexual partners of the need for investigation and treatment:

- Inform the patient to advise their partner(s) either verbally or with a 'contact letter'
- The doctor can directly inform the partner(s) with the patient's consent
- The partner(s) may be contacted by the Department of Human Services' partner notification officer with the consent of the patient. The identity of the patient is not disclosed to partners who are contacted. (Assistance can be requested by the doctor or by the patient.)

The Department's partner notification officers can be contacted on telephone (03) 9637 4114 for further information. A copy of the 'partner notification letter' can be downloaded from <http://www.health.vic.gov.au/ideas/diseases>.

3. Education

Patients should be given education on STIs and their transmission. In particular:

- Encourage reduced risk of further STIs through use of condoms.
- Advise patients to abstain from sexual intercourse for 7 days after single dose therapy or until completion of a 7 day regimen and until all their sexual partners have been treated.

Written information on STIs can be obtained from the Department of Human Services on telephone (03) 9637 4114 or downloaded from <http://www.health.vic.gov.au/ideas>.

¹ Working Group for Therapeutic Guidelines: Antibiotic 2003, *Therapeutic Guidelines: Antibiotic*, version 12, Therapeutic Guidelines Limited, Melbourne.

² Venereology Society of Victoria 2002, *National Management Guidelines for Sexually Transmissible Infections*, Venereology Society of Victoria, Melbourne.