

Screening for Chlamydia and Gonorrhea

The U.S. Preventive Services Task Force (Task Force) has issued a **final** recommendation statement on *Screening for Chlamydia and Gonorrhea*.

These final recommendation statements apply to all sexually active adolescents (teens ages 12-18) and adults, including pregnant women.

The final recommendation statements summarize what the Task Force learned about the potential benefits and harms of screening for chlamydia and

gonorrhea: (1) Sexually active women age 24 years and younger should be screened for chlamydia.

Women older than 24 years who are at increased risk for this infection also should be screened. (2) Sexually active women age 24 years and younger should be screened for gonorrhea. Women older than 24 years who are at increased risk for this infection also should be screened. (3) There is not enough evidence to determine the potential benefits and harms of screening men for chlamydia and gonorrhea.

What are chlamydia and gonorrhea?

Chlamydia and gonorrhea are sexually transmitted infections (STIs). These infections are usually spread during unprotected sexual activity, but they also can be passed from mother to child during childbirth.

Facts About Chlamydia and Gonorrhea

Chlamydia and gonorrhea are very common STIs in the United States. In 2012, more than 1.4 million cases of chlamydia infection were reported, and the Centers for Disease Control and Prevention estimates that more than 800,000 people are infected with gonorrhea every year. However, it is hard to know exactly how many infections occur, because many infected people show no symptoms and do not get tested.

Similar to other STIs, risk factors for chlamydia and gonorrhea include having a new sex partner or having more than one sex partner, having had an STI in the past, or having a sex partner infected with an STI. Not using condoms consistently and exchanging sex for money or drugs also increases a person's risk for getting chlamydia or gonorrhea.

Women with chlamydia and gonorrhea often do not have any symptoms. This is a serious problem because undetected and untreated infections can progress to other conditions:

- Pelvic inflammatory disease (a bacterial infection in the uterus, fallopian tubes, ovaries, or pelvis);
- Chronic pelvic pain;
- Ectopic pregnancy (an abnormal pregnancy in which the fertilized egg attaches somewhere other than the uterus, such as in the tubes that carry eggs from the ovaries to the uterus); and
- Infertility (when a woman cannot become pregnant after a year of trying with her partner).

In men, chlamydia and gonorrhea infections are more likely to cause symptoms. These can include discharge from the penis, painful urination, or pain and swelling of the testicles. Because men with symptoms are more likely to seek medical attention, they are much less likely than women to experience long-term complications of untreated infections.

Screening and Treatment for Chlamydia and Gonorrhea

The goal of screening for chlamydia and gonorrhea is to detect infection so that a person can get treatment. Screening involves testing a urine sample or a sample of fluid from the vagina or penis for evidence of infection. These screening tests are very accurate. If chlamydia and gonorrhea infections are identified, they can be treated with antibiotics.

Potential Benefits of Screening and Treatment for Chlamydia

The Task Force found that chlamydia screening has benefits in sexually active **women age 24 years and younger** and in **older women who are at increased risk**. Women who have chlamydia infection but don't have symptoms can be identified with accurate tests and effectively treated, reducing serious complications of chlamydia.

The Task Force found insufficient evidence on the benefits and harms of screening for chlamydia in **men**.

Potential Benefits of Screening and Treatment for Gonorrhea

The Task Force found that women with gonorrhea infection often do not have any symptoms, and untreated infection can lead to pelvic inflammatory disease and other serious complications. However, screening tests are accurate and treatment can cure the infection. Therefore, the Task Force determined that screening and treatment for gonorrhea have benefits in **women who are at increased risk** for infection.

The Task Force found insufficient evidence on the benefits and harms of screening for gonorrhea in **men**.

Potential Harms of Screening and Treatment for Chlamydia and Gonorrhea

The Task Force found that potential harms of screening and treatment are minimal. Potential harms to screening and treatment may include anxiety and stress on relationships.

The Final Recommendations on Screening for Chlamydia and Gonorrhea: What Do They Mean?

The Task Force's final recommendations on screening for chlamydia and gonorrhea are based on the quality and strength of the evidence about the potential benefits and harms of screening for this purpose. They are also based on the strength of the potential benefits and harms. Task Force recommendation grades are explained in the box at the end of this fact sheet.

When the Task Force recommends a screening (**Grade B**), it is because it has more potential benefits than potential harms. When there is not enough evidence to judge benefits and harms, the Task Force does not make a recommendation for or against—it issues an **I Statement**. The Notes explain key ideas.

Visit the Task Force Web site to read the full **final recommendation statement**. The statement explains the evidence the Task Force reviewed and how it decided on the grade. An **evidence document** provides more detail about the studies the Task Force reviewed.

- 1 The Task Force recommends **screening** for chlamydia in **sexually active** women age 24 years or younger and in **older women** who are **at increased risk** for infection. **Grade B**
- 2 The Task Force recommends screening for gonorrhea in sexually active women age 24 years or younger and in older women who are at increased risk for infection. **Grade B**
- 3 The Task Force concludes that the **current evidence is insufficient** to assess the balance of benefits and harms of screening for chlamydia and gonorrhea in men. **I statement**

Notes

- 1 **screening**
Tests of urine or other body fluids for signs of infection.
- sexually active**
Engaging in any kind of sexual activity, including oral, vaginal, and anal sex.
- older women**
Women older than age 24 years.
- at increased risk**
Having a greater chance of getting or spreading an STI because of risky behaviors such as not using a condom or having more than one sex partner.
- current evidence is insufficient**
The Task Force did not find enough information to determine the benefits and harms of testing in men.

Should You Be Screened for Chlamydia or Gonorrhea?

Getting the best health care means making smart decisions about what screening tests, counseling services, and preventive medicines to get and when to get them. Many people don't get the tests or counseling they need. Others get tests or counseling they don't need or that may be harmful to them.

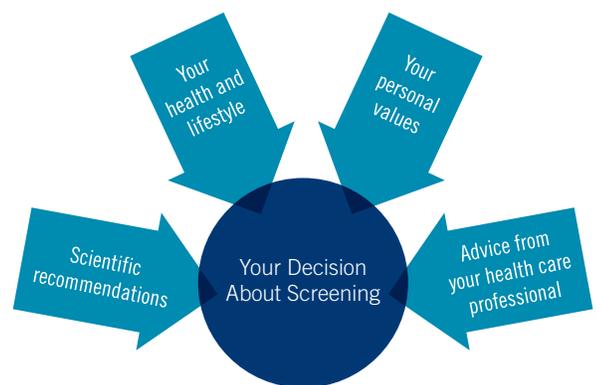
Task Force recommendations can help you learn about screening tests, counseling services, and preventive medicines. These services can keep you healthy and prevent disease. The Task Force recommendations do not cover diagnosis (tests to find out why you are sick) or treatment of disease. Task Force recommendations also apply to some groups but not others. For example, this recommendation does not apply to children or to people who are not sexually active.

Deciding Whether to Get Screened for Chlamydia or Gonorrhea

Consider your own health and lifestyle. Think about your personal beliefs and preferences for health care. And consider scientific recommendations, like this one from the Task Force.

If you are concerned about your risk for chlamydia or gonorrhea, talk with your doctor or nurse. You may be at increased risk for infection if you have had more than one sex partner, if you have had an STI in the past, or if you have a sex partner who is infected with an STI. Not using condoms consistently and exchanging sex for money or drugs also can increase your risk.

If you do get a chlamydia or gonorrhea screening test, talk with your doctor or nurse about the results of the test and next steps you may need to take.



What is the U.S. Preventive Services Task Force?

The Task Force is an independent group of national experts in prevention and evidence-based medicine. The Task Force works to improve the health of all Americans by making evidence-based recommendations about clinical preventive services such as screenings, counseling services, or preventive medicines. The recommendations apply to people with no signs or symptoms of the disease being discussed.

To develop a recommendation statement, Task Force members consider the best available science and research on a topic. For each topic, the Task Force posts draft documents for public comment, including a draft recommendation statement. All comments are reviewed and considered in developing the **final recommendation statement**. To learn more, visit the **Task Force Web site**.

| USPSTF Recommendation Grades | |
|------------------------------|--|
| Grade | Definition |
| A | Recommended. |
| B | Recommended. |
| C | Recommendation depends on the patient's situation. |
| D | Not recommended. |
| I statement | There is not enough evidence to make a recommendation. |

Click Here to Learn More About Sexually Transmitted Infections

-  **Chlamydia — CDC Fact Sheet** (Centers for Disease Control and Prevention)
-  **Gonorrhea — CDC Fact Sheet** (Centers for Disease Control and Prevention)
-  **Straight Talk about Sexually Transmitted Infections** (Girlshealth.gov)

Click Here to Learn More About the Task Force Final Statement on Behavioral Counseling Interventions to Prevent Sexually Transmitted Infections