Chlamydia is a problem in your population:

- *Chlamydia trachomatis* is the most common bacterial STD in the U.S.; nearly 3 million new cases of Chlamydia occur each year.
- Multiple studies in health plans, OB/GYN offices, family medical practices, and other private practice settings have demonstrated 5 to 15 percent of women of reproductive age are infected with Chlamydia.
- Tennessee had more than 27,000 Chlamydia cases reported in 2010. It is projected that there were actually four times as many cases.
- 73 percent of reported Chlamydia cases in Tennessee were female, and of that group, approximately 76 percent were under the age of 25.
- 10 to 15 percent of females with untreated Chlamydia develop pelvic inflammatory disease.
- The 2009 Tennessee Youth Risk Behavior Survey data indicated that 53 percent of responding high school students had ever had sexual intercourse and that 16.6 percent reported four or more partners.

Chlamydia screening results in healthier women and better pregnancy outcomes:

- Of women with untreated Chlamydia who develop PID, approximately 1 in 5 will become infertile, almost 1 in 5 will suffer from chronic pelvic pain, and nearly 1 in 10 will have an ectopic (tubal) pregnancy.
- A woman infected with Chlamydia has a 3- to 5-fold increased risk of acquiring HIV infection.
- Chlamydia is one of the most common causes of eye infections and pneumonia in young infants.

National Screening Guidelines:

- The American Academy of Pediatrics recommends that all adolescents ages 11 and over be assessed for sexual activity. All sexually active adolescents should be periodically screened for STDs.
- The U.S. Centers for Disease Control & Prevention recommends routine screening of sexually active females 25 years of age and under.
- HEDIS 2010 (Health Plan Employer Data and Information Set) measures the proportion of sexually active females ages 16 through 24 who were screened for Chlamydia annually.

Look for opportunities to identify and treat Chlamydia:

Most women infected with Chlamydia have no symptoms of disease, minimizing the chances they will seek care. It is critical that clinicians seize opportunities to test women at risk for Chlamydia whenever possible. Any young woman age 25 or younger who is sexually active is at risk for Chlamydia. In order to avoid missed opportunities to prevent the harmful consequences of untreated Chlamydia, routine testing for Chlamydia should be provided for young women 15 to 25 years old who are seeking care for any of the following reasons:

- she suspects she is pregnant
- she has a history of any sexually transmitted disease
- she is seeking gynecological services
- she has indicated that she has been sexually assaulted or abused
- she indirectly indicates that she may have had sexual relations

Upon recognizing a young woman is at risk, clinicians should:

- provide appropriate STD prevention counseling, and
- set up a reminder system in the medical record to routinely test for Chlamydia as well as other common STDs.

Websites and sources of additional information:

- Centers for Disease Control and Prevention: [http://www.cdc.gov](http://www.cdc.gov)
- American Social Health Association: [http://www.ashastd.org](http://www.ashastd.org)
- Tennessee Department of Health: [http://www.state.tn.us/health/](http://www.state.tn.us/health/); 1-800-525-2437
- Bureau of TennCare: [http://www.tn.gov/tenncare/forms/hedis10.pdf](http://www.tn.gov/tenncare/forms/hedis10.pdf)