

### Background

The treatment of sex partners of individuals with sexually transmitted infections is a key intervention strategy to effectively reduce transmission of these infections. Traditionally this preventive measure has been accomplished through partner notification by the infected individual as required by 10A NCAC 41A .0204. Partner referral has had variable impact on control of sexually transmitted infections.

The North Carolina Division of Public Health, in accordance with the N.C. Board of Medicine practice guidelines, has traditionally required clinical evaluation and treatment of partners exposed to a sexually transmitted infection. The N.C. Board of Medicine has endorsed exceptions to the guidelines in accordance with the CDC recommendations for management of partners of individuals with certain sexually transmitted conditions.

*“It is the position of the North Carolina Medical Board that prescribing drugs for an individual whom the licensee has not met or personally examined may be suitable when that individual is the partner of a patient whom the licensee is treating for gonorrhea or chlamydia”. (November 2009)]*

The Division of Public Health endorses utilization of Expedited Partner Therapy (EPT) to treat partners of individuals diagnosed with chlamydia. EPT represents an additional strategy for partner management and does not replace other public health strategies for partner management. A medical examination with testing for sexually transmitted disease, followed by treatment for presumed infection, remains the preferred approach to assuring treatment of exposed partners.

Presently, eligibility criteria will focus on individuals with a confirmed case of chlamydia. When patients diagnosed with chlamydia indicate that their partners are unlikely to seek evaluation and treatment, providers can offer expedited partner therapy (EPT) in which known and named partners can be treated without previous medical evaluation or prevention counseling. If a patient diagnosed with chlamydia is accompanied by sex partner(s) at the time of his or her clinic visit for treatment, the health care provider should ensure that these partner(s) are examined, tested and treated during that visit. Individuals with gonorrhea infection are ineligible, since first-line therapy with Ceftriaxone must be administered in a clinical setting. Existing data suggest that EPT has a limited role in partner management for trichomoniasis, and there is no experience with EPT for gonorrhea or chlamydia infection among MSM.

Azithromycin from the Communicable Disease Branch STD Drug Program is available to be dispensed by the local health department free of charge to certain sex partners in accordance with specific criteria. Guidance provided in this document should be reflected in agency policies and procedures. Guidance: Expedited Partner Therapy

### Eligibility Criteria

- The index case has a diagnosis of chlamydia.
- The index case has been examined, tested and treated in the facility providing the partner therapy.
- The sexual exposure is a heterosexual partner.
- The partner of the index case is unlikely to present for examination and treatment.
- One-dose therapy is being prescribed.
- The partner has no contraindication to treatment with Azithromycin.
- Known sex partner within the last 60 days (or most recent sex partner if none in the previous 60 days).
- Names and demographic information are provided to comply with pharmacy regulation requiring the name on a written prescription. NCGS 106-134.

### Ineligible

- Gonorrhea, NGU, or other STD diagnosis.
- Individuals requiring multi-dose treatment regimen.
- Partner presents without appropriate documentation of exposure. Must be managed in accordance with protocol for STD contacts.
- MSM exposure.
- Partner has symptoms.
- Individuals with known allergies or other contraindications for the treatment.

*Note: Adverse reaction to Azithromycin is rare.*

### Treatment

Azithromycin 1gm PO in a single dose

Treatment method may be by prescription to be presented to a pharmacy.

*Note: STD Enhanced Role RNs must provide prescription written by midlevel or physician provider.*

Treatment may be via packaged pills in accordance with dispensing procedures, i.e, labeled with partner name, drug name, dosage, and date dispensed.

*Note: STD Enhanced Role RNs must follow policy and procedure for RN dispensing.*

*Guidance: Expedited Partner Therapy*

### Documentation

Partner names should not be listed in the medical record of the index case. The prescribing provider must maintain a log or file reflecting the following:

- 1) Name and diagnosis of the index case
- 2) Names and demographics for partners within the last 60 days who will receive the prescribed treatment. NCGS 106-134.1
- 3) Assessment for allergies
- 4) Dispensing date
- 5) Counseling and education materials provided
- 6) Copy of the prescription

### Counseling and Follow-up

Time spent with index patients to counsel them on the importance of notifying partners is associated with improved notification outcomes.

Along with medication, EPT should be accompanied by information that advises recipients to seek personal health care in addition to EPT. This is particularly important when EPT is provided to male patients for their female partners, and for male partners with symptoms.

The provider must assure the following education information is packaged with the prescription or packaged pills:

- Statement stressing personal medical evaluation if client is symptomatic, i.e., discharge, lesions, abdominal pain, possible or known pregnancy, scrotal or rectal pain.
- Treatment instructions – stress “one dose” consumption.
- Appropriate warnings about taking medications (side effects, allergy to the medication).
- Instructions for follow-up of adverse reaction.
- General STD client information, i.e., “STD Facts” brochure.

Re-testing the infected individual is recommended three (3) months after treatment.

Sample tools may be found on the following web sites:

Texas Department of State Health Services HIV/STD Program EPT:

<http://www.dshs.state.tx.us/hivstd/ept/default.shtm>

Illinois Department of Health STD Fact Sheet for Sex Partners:

[http://www.idph.state.il.us/health/std/TREATMENTFACT\\_SHEET\\_FOR\\_SEX\\_PARTNERS\\_Chlamydia.pdf](http://www.idph.state.il.us/health/std/TREATMENTFACT_SHEET_FOR_SEX_PARTNERS_Chlamydia.pdf)