Expedited Partner Therapy for Teens

November 3, 2021 Kala Heekin, STI Prevention Specialist





Poll: Are you familiar with the term expedited partner therapy?

Yes

No



Essential Access Health

- Champions and promotes quality sexual + reproductive health care for all
- Partners with the California Department of Public Health, STD Control Branch and LA County Department of Public Health, Division of HIV/STD Programs
- Implements best practices in STI prevention and case management statewide



Agenda

- Basics of Chlamydia + Gonorrhea
- Partner Management
- Expedited Partner Therapy
- Essential Access Health's Chlamydia/Gonorrhea EPT Distribution Program
- Resources



Objectives

- Explain the importance of EPT as a partner management and STI prevention strategy.
- Identify resources to support EPT implementation in a clinic setting.
- Understand EPT insurance coverage and payment options.



The Basics of Chlamydia + Gonorrhea



Persistent Threats to Sexual Health

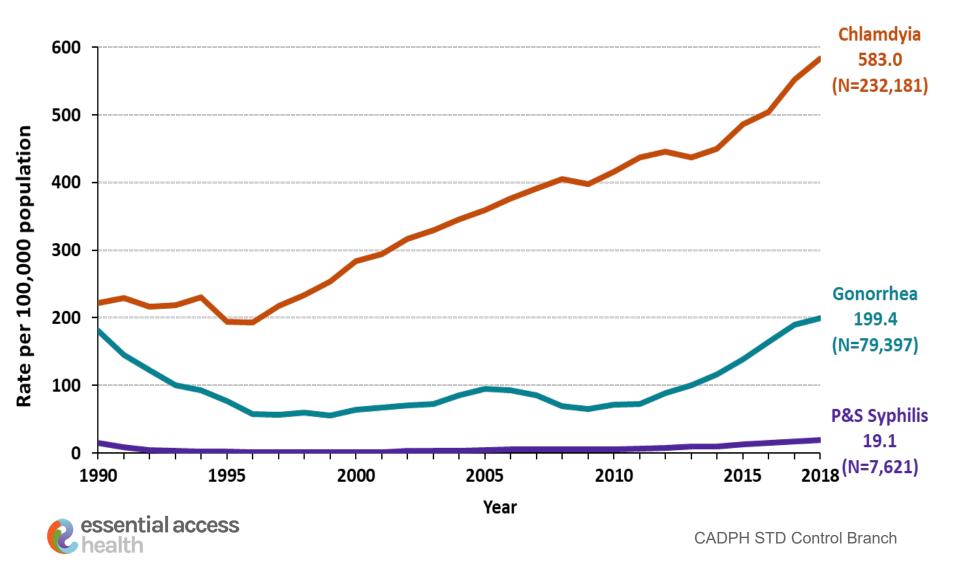
Most common reportable STIs in US

- Chlamydia: ~1.8 million incident cases in 2019
- Gonorrhea: ~616,000 incident cases in 2019
- Increased risk of HIV infection

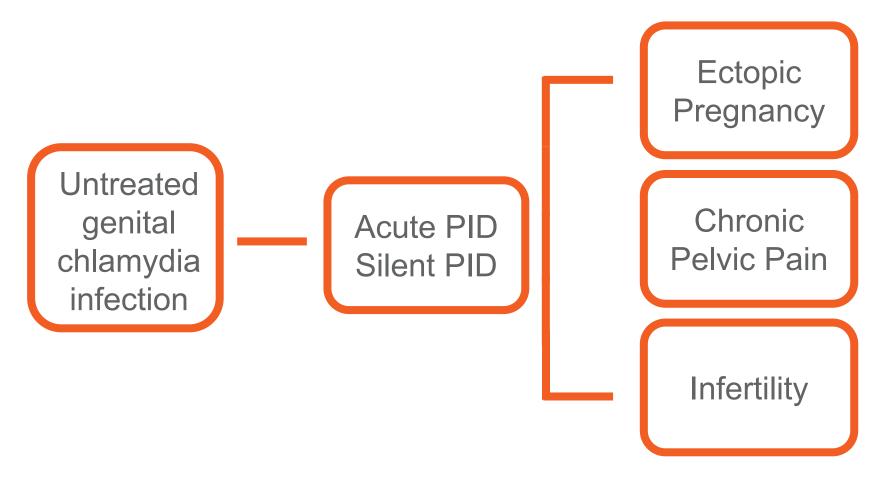


Centers for Disease Control and Prevention. Sexually Transmitted Disease Surveillance 2019. Atlanta: U.S. Department of Health and Human Services; 2021.

Chlamydia, Gonorrhea, and Primary & Secondary Syphilis Incidence Rates in CA, 1990-2018



Potential Complications from an Untreated Infection





Source: "Lesson 2. Pelvic Inflammatory Disease." *National STD Curriculum*, <u>https://www.std.uw.edu/go/syndrome-based/pelvic-inflammatory-disease/core-concept/all.</u>

CDC Screening Recommendations

Population	Screening Recommendation
Young women (<24)	 Annual screening for chlamydia and gonorrhea
Older women (25+) and Men who have sex with women	 Screening based on risk
Pregnant women	 Syphilis, HIV, chlamydia, gonorrhea and hepatitis B
Men who have sex with men	 Screening at least once year for syphilis, chlamydia, gonorrhea, and HIV
Transgender and Gender Diverse People	Adapted based on anatomy



The STI/PrEP Connection

- Syphilis and HIV testing is recommended for all CT/GC positive patients due to increased risk for co-infections
- Inform patients with positive STI results and negative HIV results about PrEP (Pre-Exposure Prophylaxis)
- Document additional STI/HIV counseling and/or testing
- An open sore is an open door, PrEP helps prevent HIV infection





Counseling Positive Patients

What your patients *need* to know:

- Chlamydia and Gonorrhea are sexually transmitted
- Take medication properly
- Abstain from sexual activity/use condoms for 7 days after treatment of patient and partner(s)
- Return for a retest in 3 months
 - Opportunistic retesting encouraged
- Treating all partners is important to prevent reinfection

CDPH STI Control Branch. Best Practices for the Prevention and Early Detection of Repeat Chlamydial and Gonococcal Infections: Effective Partner Treatment and Patient Retesting Strategies for Implementation in California Health Care Settings. June 2011.

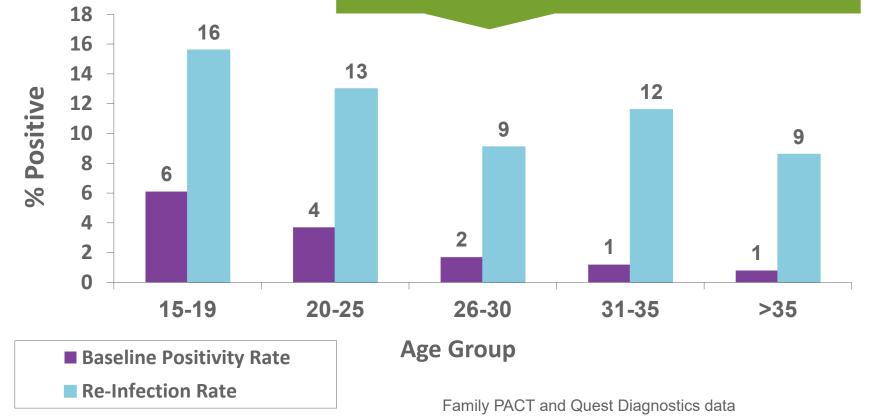


Chlamydia Reinfection is Common

Regardless of age, reinfection rates at retest are often 2-3 times higher than baseline positivity rates.

Prepared by: CDPH STI Control Branch

CT positivity by age in Females (2008/2009) N = 124,650

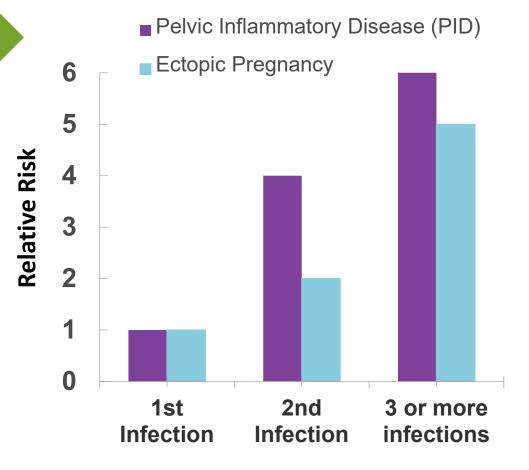


essential access health

Chlamydia Reinfection is Dangerous

Highly associated with increased risk for adverse reproductive health issues.

- 2nd infection:
 - 4x risk of PID
 - 2x risk of ectopic pregnancy
- 3+ infections:
 - 6x risk of PID
 - 5x risk of ectopic pregnancy



Prepared by: CDPH STI Control Branch

Hillis SD, et al. (1997). Am J Obstet Gynecol 176(1 Pt 1): 103-7



Why does reinfection occur?

- Sex with untreated partner
- Sex with new partner

Other important factors:

- Sex before patient and partner complete adequate treatment
- Power differential between patient + partner(s)
- Intimate partner violence
- Other socio-economic factors



Partner Management



How does your clinic treat partners of STDpositive patients?



Partner Treatment

- Treat all sexual partners from 2 months prior to positive test
- Provide options to allow patient to customize plan for ensuring all partners are treated:
 - Brings partner to clinic (BYOP)
 - Refers partner for testing
 - Anonymous partner notification
 - Expedited partner therapy (EPT)



CDPH STI Control Branch. Best Practices for the Prevention and Early Detection of Repeat Chlamydial and Gonococcal Infections: Effective Partner Treatment and Patient Retesting Strategies for Implementation in California Health Care Settings. June 2011.



STI Treatment Guidelines (cdc.gov)

EPT + California Law

- EPT is legal + allowable in California
- Exception to Medical Practice Act
 - Health and Safety Code §120582
 - Chlamydia SB 648

(Ortiz, Chapter 835, Statues of 2000)

- Gonorrhea and other STIs AB 228 (Leno, Chapter 771, Statutes of 2006)
- STD Coverage and Care Act

SB 306



CDPH STI Control Branch. Patient-Delivered Partner Therapy (EPT) for Chlamydia, Gonorrhea, and Trichomoniasis: Guidance for Medical Providers in California. July 2016.

Expedited Partner Therapy



What is EPT?

- Alternative evidence-based partner management strategy
- Harm-reduction approach for cases where partners are unable or unlikely to seek care in a clinical setting





EPT Method

EPT involves providing the index patient with the appropriate **medication/prescription** and **educational materials** for sex partners

Medical Provider

Treats the patient
Gives the patient medication or a prescription + educational materials for sex partners

Index Patient

 Delivers medication or prescription + educational materials to sex partners

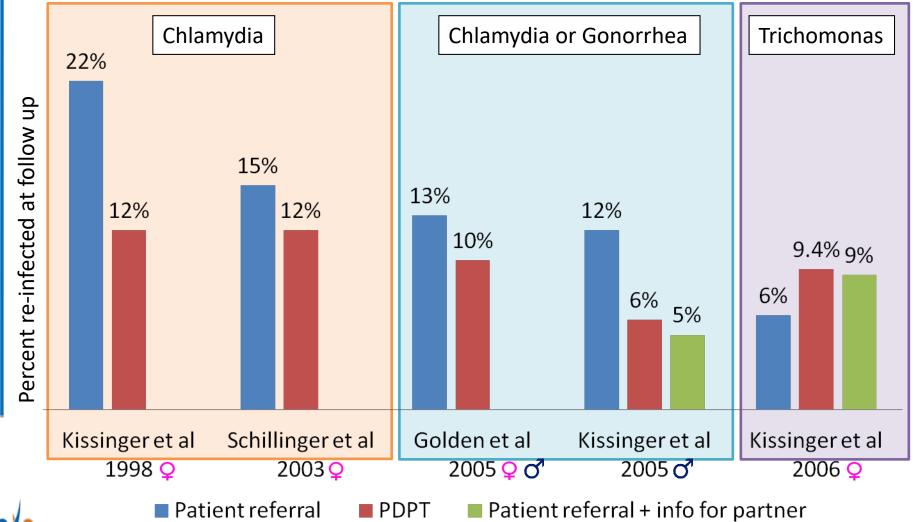
Sex Partners

• Take the medication and completes treatment for CT and/or GC



EPT Effectiveness in Randomized Controlled Trials

Reduces reinfection with chlamydia & gonorrhea, but not trichomonas





Source: Trelle S, et al. Improved effectiveness of partner notification for patients with sexually transmitted infections: systematic review. BMJ. 2007;334:354. Slide courtesy of Stella Morris, CDPH STI Control Branch STI Control Branch

Medicolegal Considerations- SB306

Expanded Provider & Pharmacists Liability Protections

- Health care providers are not liable in medical malpractice action or professional disciplinary action
- Pharmacists not liable in a civil, criminal, or administrative action

EPT prescriptions can be written without a name

Expedited Partner Therapy or EPT can be written in place of a name



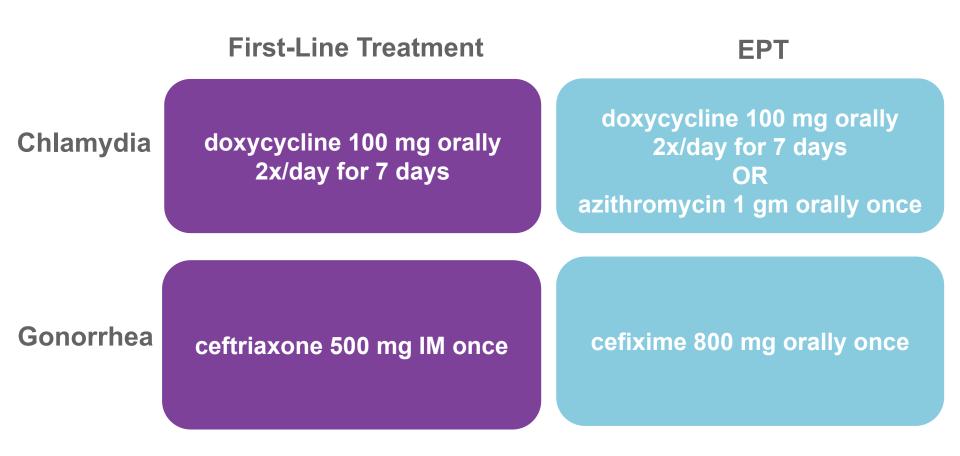
Medi-Cal + Family PACT Reimbursement

As of February 1st, 2020, EPT is a covered benefit for FPACT and Medi-Cal recipients

- For chlamydia, gonorrhea, and trichomoniasis
- Can be provided in-visit if sites package their own medication
- Prescriptions should be written in the name of the index patient
- Index patient can be provided treatment for up to five partners



Treatment : First-Line vs. EPT





Chat: Share your thoughts on providing doxycycline as the preferred treatment for chlamydia

- What questions or concerns do you have?
- Does your clinic currently provide doxycycline for patients who test positive for chlamydia?



Provider Questions: Is EPT Appropriate for My Patient?

- What's the likelihood your partner will come in to the clinic to get tested and treated?
- Would you feel comfortable directly notifying your partner and providing medication?
- Does your partner have...
 - Medication allergies?
 - Serious health problems?
 - Symptoms of a more serious infection?



EPT Counseling: Supporting Questions

- How do you think your partner is going to react?
- What are you most worried about?
- When and where is a good place to have this conversation with her/him/them?
- Would practicing this conversation help you?





Screening for EPT provides another opportunity to:

- Screen for intimate partner violence
- Provide a space for clients to think about what's on their safe(r) sex checklist
- Review that consent is not just about if you want to have sex but also how you want to have sex
- Educate + emphasize the importance of testing regularly for STIs; especially as most STIs present no symptoms



Who can receive EPT?

- All sex partners within last 2 months of index patient's diagnosis
- Most recent sex partner(s) if no sex partners within last 2 months
- Partners of any sex or gender
- Sexual orientation of a patient does not impact EPT consideration
- No limit to number of doses that can be distributed in the case of multiple sex partners



CDPH STI Control Branch. Patient-Delivered Partner Therapy (PDPT) for Chlamydia, Gonorrhea, and Trichomoniasis: Guidance for Medical Providers in California. July 2016.

When is EPT not Recommended?

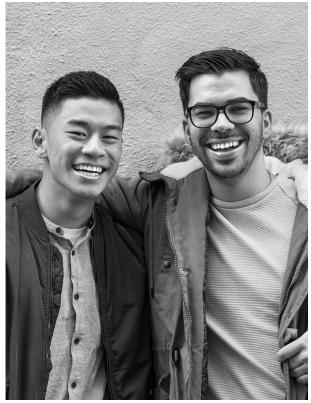
- **Co-infected** with STIs that are not treatable by EPT medications
- Suspected child abuse, sexual assault, or where a patient's safety is in question
- Partners have severe allergies to antibiotics
- Partners with pharyngeal gonorrhea
- Symptomatic partners who may have a more serious condition (i.e fever of unknown origin, pelvic pain in females, testicular pain in males)



CDPH STI Control Branch. Patient-Delivered Partner Therapy (EPT) for Chlamydia, Gonorrhea, and Trichomoniasis: Guidance for Medical Providers in California. July 2016.

California EPT Guidelines for MSM

- Guidelines state that EPT can be used regardless of the patient's gender/sexual orientation
- Other considerations:
 - EPT may not effectively treat complicated infections such as pharyngeal gonorrhea infection
 - Miss the opportunity to offer HIV screening to identify concurrent STI/HIV infection





Educational Materials With EPT

Always package EPT medication with written information about:

- The infection
- Medication instructions
- Medication warnings
- Getting tested for HIV/other STIs
- Clinic referral
- Additional resources to consider:
 - PEP + PrEP
 - Emergency contraception
 - Condoms



Potential Risks of EPT

- Adverse reactions
 - Medications generally well tolerated
 - Doxycycline: NOT safe in pregnancy
- Allergic reactions
 - Azithromycin: allergic reactions rare
 - Cefixime: allergic reactions uncommon
 - IgE-mediated penicillin allergy: contraindicated
- Missed opportunities to receive other services

CDPH STI Control Branch. Patient-Delivered Partner Therapy (EPT) for Chlamydia, Gonorrhea, and Trichomoniasis: Guidance for Medical Providers in California. July 2016.



Centers for Disease Control and Prevention. Sexually Transmitted Diseases Treatment Guidelines, 2015. MMWR Recomm Rep 2015;64(No. RR-3): 1-137.

Key EPT Counseling Messages

Partners should:

- Read the educational material before taking the medication
- Seek a complete STI evaluation as soon as possible
- Not take the medication and seek care if:
 - Allergic to antibiotics
 - Serious health problems
 - Symptoms of a more serious infection



Key EPT Counseling Messages

- Partners who are or could be pregnant should seek care as soon as possible
- Patients and partners
 - Should abstain from sex or use a condom for at least seven days after treatment in order to decrease the risk of reinfection
 - Should get retested 3 months after treatment



EPT in a School-Based Health Setting



Case Study, Max



- Max is a 16 year old male who is at the school-based health center for a sports physical. He decides to get tested for chlamydia and gonorrhea during his visit.
- His chlamydia test comes back as positive. He said he uses condoms sometimes.
- He shares that he has had 2 partners in the last two months. One partner goes to school here and one partner graduated from high school last year and lives two towns over.



Poll

Can Max receive PDPT as a minor?







Considerations



- When discussing partner management with a patient at a school-based health center, remember that some partners may attend the same school and some may not.
- Consider leveraging school-based model to bring partners in for first-line treatment.
- Offering on-site dispensing can be important for adolescents in particular as they are less likely to fill prescriptions for STD treatment.



Essential Access Health's Chlamydia/Gonorrhea (CT/GC) Expedited Partner Therapy (EPT) Distribution Program



Eligibility

Each clinic site and/or local health jurisdiction (LHJ) must:

- Be located in California
- Serve a population at risk for STIs
- Serve an uninsured or underinsured population
- Provide index patient treatment for CT and GC
- Participate in 340B Drug Pricing Program (State program only)



Eligibility Delivery of Index Patient CT and GC Treatment

- 1. Provide **direct onsite dispensing** of CT/GC medication to index patients for their own treatment in the clinical setting
- 2. Provide CT/GC medication to index patients for their own treatment through an **onsite pharmacy**
- Provide medication from the CT/GC EPT Distribution Program to index patients and/or their sex partners through fielddelivered treatment (FDT)

--Local health jurisdictions (LHJs) only



Kovaleski et al. "Gaps in chlamydia treatment within California family planning clinics." Sexually Transmitted Diseases, Journal of the American Sexually Transmitted Diseased Association, February 2019.

Participation Requirements

- Distribute EPT to CT/GC+ patients for treatment of partners unable or unlikely to seek care
- Dispense EPT with educational materials and clinic referral
- Maintain log of all dispensed EPT medication
- Watch Essential Access Health's EPT webinar series annually



Clinical Considerations: Operationalize EPT

- Clinical Protocols for STI Treatment/Family Planning Services
- Clinic Dispensary/Pharmacy for onsite treatment
- Same Day Visits for EPT
- Clinical and Staff Training
- Clinic Promotion of EPT
 - Signage/Flyers e.g. "EPT Offered Here"
 - Peer Health Educators for Adolescents and Young Adults
- Prepackage medication for EPT
 - Directions written on package or label for the use of the partner
 - Include key EPT counseling messages in bag/package



Take Home Points

- Reinfection is common + dangerous for the patient
- Preferable for partners to come into clinic to get treated
- When this is unlikely, EPT is an allowable, recommended + evidence-based alternative to ensure partners receive treatment
- Health care providers and pharmacists are protected from liability when offering EPT by California law
- Essential Access Health's CT/GC EPT Distribution Program provides a supply of free, pre-packaged PDPT to eligible sites

Learn more and register for Essential Access Health's CT/GC EPT Distribution Program at: www.essentialaccess.org/pdpt



EPT Resources



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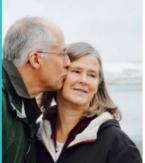


Our platform is

SECURE

Let your partners know they should get tested.

SEND A TEXT

















View the full STI Treatment Guidelines.

Access print-friendly versions of Explore the wall chart, pocket guide, and assista

Explore STD trainings, technical assistance, clinical consultation

Learn about recommendations and tools to help healthcare

https://www.cdc.gov/STI/treatment-guidelines/default.htm

CDPH PDPT Guidelines



Patient-Delivered Partner Therapy (PDPT) for Chlamydia, Gonorrhea, and Trichomoniasis:

Guidance for Medical Providers in California

These guidelines were developed by the California Department of Public Health Sexually Transmitted Diseases (STD) Control Branch in collaboration with the California STD Controllers Association, and the California Prevention Training Center (CAPTC)

January 2016



TAKE CARE OF YOURSELF + YOUR PARTNER



If you test positive, ask your health care provider about free chlamydia and gonorrhea treatment for your partner(s).

CT/GC EPT Distribution Program Resources

- Screening and treatment guidelines
- Sample EPT medication log
- Free patient education materials in multiple languages
- Patient awareness materials available to order via email and can be downloaded at: essentialaccess.org/pdpt/resources



Expedited Partner Therapy FAQs for California Pharmacists Document



What is Expedited Partner Therapy?

Expedited Partner Therapy (EPT) is the clinical practice of treating sex partners with a diagnosed ST0 without the health care provider first examining the partner. Multiple randomized controlled this have shown EPT to reduce charnydia and gonorhee minifection in the index patient.¹ EPT is efficience, safe, accoptable to patients and partners, and has been allowable in California since 2001. In fact, EPT is legally permissible in 45 states and the District of Columbia and only prohibited in one state (South Cardina).¹

California law supports EPT

California Health & Safety Code (HSC) & 120582 ateas that a provider "may dispanse, furnish, or otherwise provide prescription antibiotic drugs to the sexual partner or partners of a patient with a diagnosed sexually transmitted charnydis, goornhea, or other sexually transmitted infection, as determined by the department without examination of the patients sexual partner or partners." CA HSC & 120582 means that pharmacista can fill these valid prescriptions to treat STDs and meduce the burden of STDs in your community.

EPT is now covered by Family PACT + Medi-Cal

Effective February 1, 2020, EPT for the prevention of minfection of chlamydia, gonorrhea, and trichomoniasis is a covered service for Medi-Cal and Family PACT beneficiaries. For more information on this policy change please moler to <u>Medi-Cals</u>. Provensatavo: Services Guide: <u>Benefits: Family-Plansing Pedited Services</u>, and ef <u>PACTs</u> Billing Guide.

What medications will be prescribed?

According to CDC Guidelines, partners should be treated with Azithremycin 1 gram orally x 1 dose for chlamydia OR Cefixime 800 mg orally x 1 dose PLUS Azithromycin 1 gram orally x 1 dose for generrhea^{*}.

What will EPT Rxs look like?

For Medi-Cal and Family PACT patients, pharmacists should expect EPT prescriptions to include the name of the §ndexd patient seen by the prescribing provider and disgnosed with an STD. If multiple doese are prescribed, consult patient or provider on the number of partners intended to be treated and package individually EPT prescription benefits for patients with private insurance may vary please contact the payr directly for more information. If the moonsmended gosombeat meatment above is <u>not available</u>, the following alternate regimess may be furnished: + Cefxime 800 mg onallyx Idose PLUS Doxycycline 100 mg onally

- twice daily x 7 days + Cefpodoxime* 400 mg orally 610 x 2 doses PLUS Azithromycin I g orally x 1 dose
- Cefpodoxinae* 400 mg orally BID x2 doaes PLUS Doxyoyodine 100 mg orally BID x7 days

See: Reverse

Additional alternative regimens can be found at https://www.odc.gov/std/dd/stdp/DCL-STDTextment-COVID19-04082020.pdf
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Expedited Partner Therapy FAQs for California Pharmacists

- Two-page document designed to enhance pharmacists' knowledge, skills, and comfort in providing EPT
- Developed by Essential Access Health in partnership with Clint Hopkins PharmD, APh, Owner / Pharmacist in Charge, Pucci's Pharmacy

Download at: essentialaccess.org/pdpt/resources

For a print quality version, email Kala at **kheekin@essentialaccess.org**



Questions?

- Program Homepage <u>essentialaccess.org/pdpt</u>
- FAQ essentialaccess.org/pdpt/faq
- Email <u>STDprograms@essentialaccess.org</u>





Digital STI Prevention Resources for Youth and Parents



Digital Programs





text teensource to 877877

tips teensource

> we'll text you info every week. standard rates apply.





TeenSource.org

- 1.3 Million Page Views
- Youth Generated Content
- Birth Control, STIs, Healthy Relationships, Youth Rights
- Youth Advocacy/Engagement
- Social Media Follow Us
 - Twitter: @TeenSource
 - Facebook: TeenSource
 - Instagram: TeenSourceOrg
 - Total Reach: Over 25,000







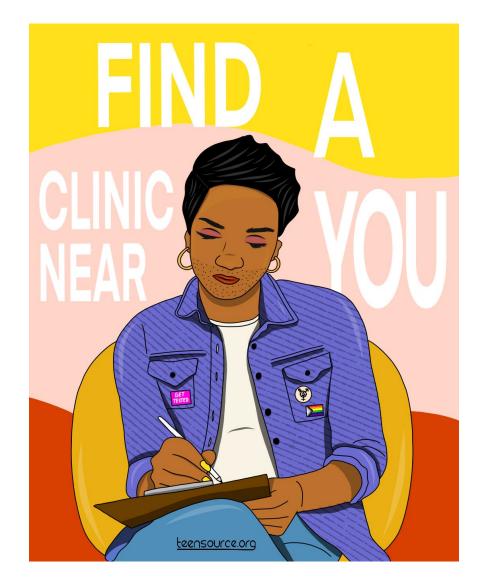


TeenSource Clinic Finder



Over 43,000 Clinic Searches in 2019.









Condom Access Project

- Condom Access for Youth 15-19
- Over 100 Condom Access Sites Across 36 LHJs
- 9 Mailer Counties (Alameda, Contra Costa, Fresno, Kern, Los Angeles, Sacramento, San Bernardino, San Diego, and San Joaquin)
- Over 500,000 Condoms Distributed in 2020





TeenSource Tips

- Over 6,000 Subscribers
- Over 4,000 Clinic Search Searches in 2019
- Program Updates
 - Increased Promotion, Geo-Specific Messaging, Focus On LGBTQ+, Advocacy Blogs



we'll text you info every week. standard rates apply.



TalkWithYourKids.org



"I want my daughter to get the facts and know she can always come to me."

- Tips/Blogs for Parents
- Healthy Relationships
- Teens + Health Care

- English + Spanish
- Expanded Timeline in 2018
- Facebook: Talk-With-Your-Kids
 - 14,000 Followers



Opportunities to Connect

- Join our CT/GC PDPT Distribution Program: www.essentialaccess.org/pdpt
- Join our Condom Access Project: <u>TeenSource.org/condoms/free</u>
- Order & Share Resources
- Share opportunities with for youth to create content (blogs, hookup texts, etc.)
- Explore further trainings on: <u>essentialaccesstraining.org</u>



Thank you!

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