CHLAMYDIA

WHAT IS IT?
Chlamydia is a common sexually transmitted infection (STI) caused by the bacterium *Chlamydia trachomatis*.

HOW COMMON IS IT?
Chlamydia is the most frequently reported bacterial STI in the United States.
- In 2010, over 1.3 million cases of chlamydia were reported to the Centers for Disease Control and Prevention. The actual number of cases is believed to be higher because most people are not aware that they are infected.
- Chlamydia is such a common infection in young women that by age 30, 50% of sexually active women in this country have had the disease.

HOW IS IT TRANSMITTED?
- Chlamydia is spread through vaginal, anal, and oral sex. Any sexually active person can be infected. However, female teenagers and young women are especially susceptible because of the immature nature of the cells that line the cervix (the opening to the uterus).
- Chlamydia can also be passed from a mother to her child during vaginal delivery, causing eye infections and/or pneumonia in the newborn.

WHAT ARE THE SYMPTOMS?
Chlamydia is known as a “silent” disease because up to 75% of infected women and about 50% of infected men have no symptoms. If symptoms do occur, they usually do so within one to three weeks of exposure.
- **Women** can have an abnormal vaginal discharge or burning with urination when the infection first begins in the cervix and urethra (the urinary canal). If the infection spreads to the uterus and fallopian tubes, women can develop lower abdominal pain, back pain, nausea, fever, pain with vaginal penetration, and bleeding between menses.
- **Men** can experience penile discharge, burning with urination, and irritation around the opening of the penis. These symptoms are often worse in the early morning.
- **Both men and women** can develop rectal pain and/or bloody discharge from the rectum if they have had anal sex with an infected partner. Transmission from oral sex is less likely but can cause painful throat infections. In rare instances, chlamydia can lead to Reiter’s syndrome, a condition characterized by arthritis, skin lesions, and inflammation of the eyes.

WHAT ARE THE COMPLICATIONS?
- If left untreated in women, chlamydia can advance from the cervix to the upper reproductive organs, leading to pelvic inflammatory disease (PID). This occurs in 20-40% of untreated women. PID can cause permanent damage to the uterus and fallopian tubes, leading to chronic pelvic pain, infertility, and potentially fatal ectopic pregnancies (pregnancies that occur in the fallopian tube instead of the uterus).
- If left untreated in men, chlamydia can cause epididymitis, an infection of the tube that transports sperm from the testis to the penis. This condition can cause pain, fever, and/or infertility.
- Men and women infected with chlamydia are also five times more likely to become infected with HIV.

HOW IS IT DIAGNOSED?
- In women, a sample of discharge is obtained from the cervix and sent to the lab for testing.
- In men, a urine specimen is sent to the lab. For accurate testing, it is important for males not to urinate for at least one hour prior to giving a urine sample.
- Because chlamydia can infect the rectum and throat, inform your healthcare provider if you have had anal or oral sex so that appropriate testing can be done.
- Since gonorrhea and chlamydia often occur simultaneously, samples sent to the lab are usually tested for both organisms.
HOW IS IT TREATED?
Chlamydia is effectively treated and cured with antibiotics. The most common antibiotic prescribed is Azithromycin 250mg:

- You will take four pills all at one time. Eat before taking this medication so that it does not upset your stomach.
- If you vomit within two hours of taking this medication, contact your medical provider because you will need to take the medication again.
- If you are allergic or have had problems taking azithromycin in the past, an antibiotic from a different class will be prescribed.

If symptoms do not resolve within one week of starting treatment, contact your healthcare provider.

DO I NEED TESTING AFTER TREATMENT?

- A test of cure three to four weeks after completing treatment is recommended only for patients with persistent symptoms and pregnant females.
- The CDC recommends rescreening for infection in all patients approximately three months after treatment is completed.

WHAT ABOUT MY PARTNER(S)?

- All sexual partners who have had sexual contact with you within the last 60 days should be examined and treated even if they have no symptoms.
- If your last sexual contact was more than 60 days ago, your most recent sexual partner should be evaluated and treated.
- Do NOT have sexual contact for at least seven days after you and your partner(s) have completed treatment.

HOW IS IT PREVENTED?
Guidelines for preventing chlamydia are the same as for preventing other STIs:

- Know your partner. Avoid sex with casual partners or strangers. Ask your partner about his or her sexual history before becoming intimate, and be prepared to share your history as well.
- Limit your number of partners. Your risk of getting an infection increases as your number of partners increases.
- Use latex barriers (eg. condoms, dental dams, finger cots) consistently. Using these barriers from the beginning to the end of skin contact offers the best protection. Substitute a polyurethane condom if either you or your partner is sensitive to latex. Remember that the birth control pill, NuvaRing, Depo shot, and other forms of hormonal contraception provide no protection against chlamydia and other STIs.
- Get regular STI screens. Sexually active men and women (especially those 25-30 years of age or younger) should have annual STI screens. Individuals practicing risky sexual behavior and all pregnant women should also be screened.

RECOMMENDED WEBSITES:

- www.niaid.nih.gov
- www.cdc.gov/std/

If you develop any of the symptoms discussed in this handout or suspect that you have been exposed to chlamydia, you should see your healthcare provider immediately. Early diagnosis and treatment are necessary to prevent complications and the spread of infection.
The person giving you this notification has been treated for CHLAMYDIA.

1. Even if you do not have any signs or symptoms, you need to be examined and treated.
2. You should see your healthcare provider or go to the public health department at once.
3. When you go, show this card to your healthcare provider so that you can be properly tested and treated.

Dear Healthcare Provider:

The person presenting this notification has been told that he/she has been exposed to chlamydia.

The Center for Disease Control recommends the following for the treatment of chlamydia:

- Azithromycin 1 gram orally in a single dose or
- Doxycycline 100mg orally twice a day for 7 days

If you have any questions, please call VCU Student Health Services at the numbers listed above or your local health department.

Thank you for your cooperation.