

COVID-19 Pandemic Impact on STI Testing



How was testing for common sexually transmitted infections (STIs) affected by the COVID-19 pandemic?



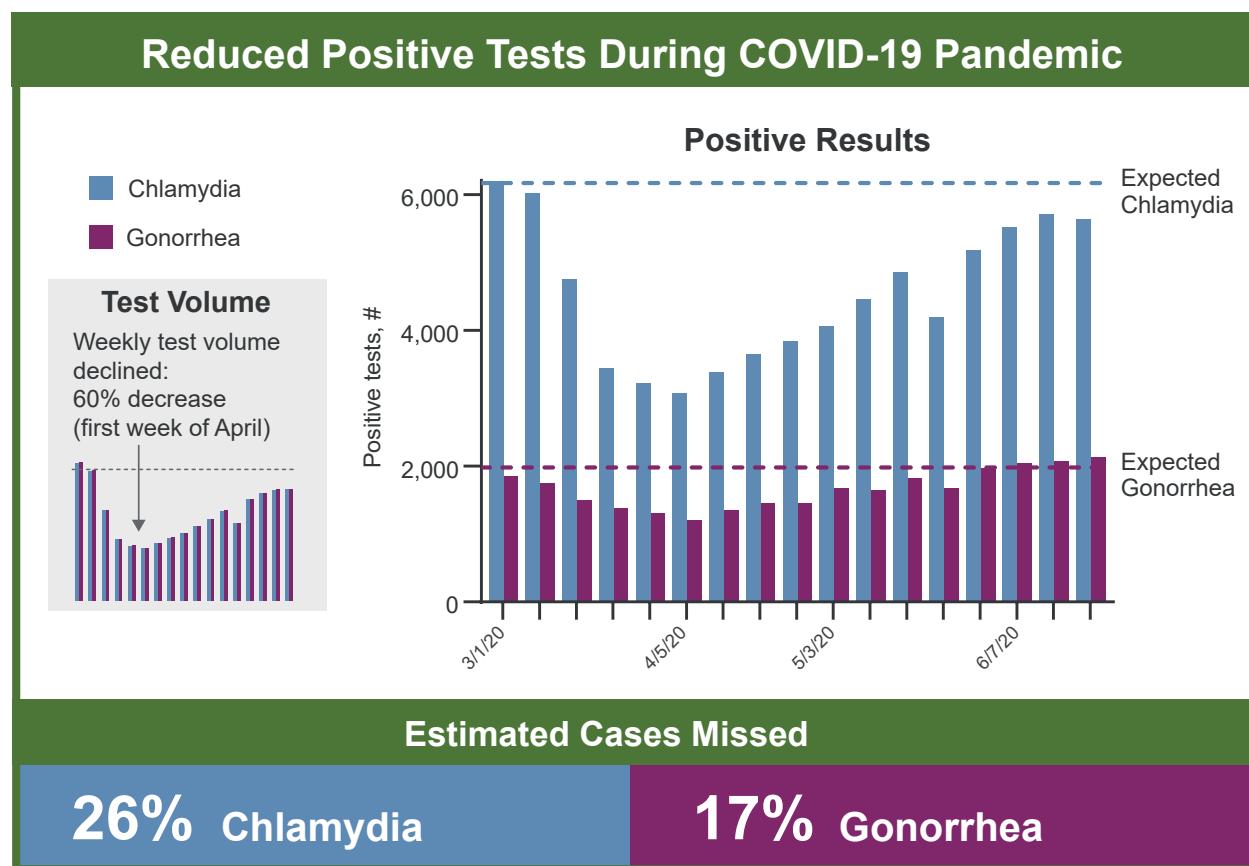
Background

During the COVID-19 pandemic, STI services were initially limited and the CDC recommended testing be prioritized for symptomatic and high-risk individuals. Although these measures may negatively affect case finding, as many STIs are asymptomatic, their impact on routine STI testing is not well defined.



Methods and Results

Comparison of average STI test volumes between pandemic (March 1-June 27) and baseline (preceding 60 weeks) periods in people ages 14-49.



These findings suggest a shift toward syndromic STI testing during the COVID-19 pandemic, resulting in missed asymptomatic cases.

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Article Title: Impact of the COVID-19 Pandemic on Chlamydia and Gonorrhea Screening in the US

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Background

- The Centers for Disease Control and Prevention (CDC) recommended that, during the COVID-19 pandemic, routine sexual health screening should be deferred; it also recommended that healthcare services be prioritized for patients who were symptomatic for sexually transmitted infections (STIs) over those who were asymptomatic.¹
- Understanding trends in STI testing and positive results during the pandemic may help estimate the number of cases that have been missed.
- Objective:** To evaluate changes in STI testing during the COVID-19 pandemic, investigators measured changes in test volume and positivity for chlamydia and gonorrhea, the 2 most commonly reported notifiable diseases in the United States.

Methods

- This study retrospectively assessed test volumes and results for chlamydia and gonorrhea at a national clinical reference laboratory. Only patients ages 14 through 49 years (the group accounting for >90% of US STI cases) were included.
- Weekly testing volume during the COVID-19 pandemic (March 1–June 27, 2020) and a baseline period (preceding 60 weeks) was observed.
- The number of positive specimens potentially missed during the pandemic was estimated based on anticipated volume and positivity rates extrapolated from baseline.

Results

- The analysis included >9.3 million test results for chlamydia and >9.3 million test results for gonorrhea; most (92.9%) of these results were from simultaneous testing for both STIs.
- Weekly testing volume during the pandemic declined rapidly and reached a low point in the first week of April (59% decline from baseline for women, 63% for men).
- Declines in test volumes correlated with increased positivity rates for chlamydia ($R^2=0.96$) and gonorrhea ($R^2=0.85$).
- The declines in test volumes suggest that 27,659 (26.4%) cases of chlamydia and 5,577 (16.5%) cases of gonorrhea were missed in March through June of 2020.

Conclusions

- The decrease in testing volumes combined with increased positivity suggests that a higher proportion of patients were tested because of symptoms (rather than for screening) during the first months of the pandemic.
- The long-term implications of missed screening opportunities warrant further studies and planning for future healthcare needs.

Reference

- Centers for Disease Control and Prevention. Guidance during disruption of STD clinical services. Updated September 8, 2020. <https://www.cdc.gov/std/prevention/disruptionGuidance.htm>