

# COVID-19 Pandemic

## Impact on STI Testing

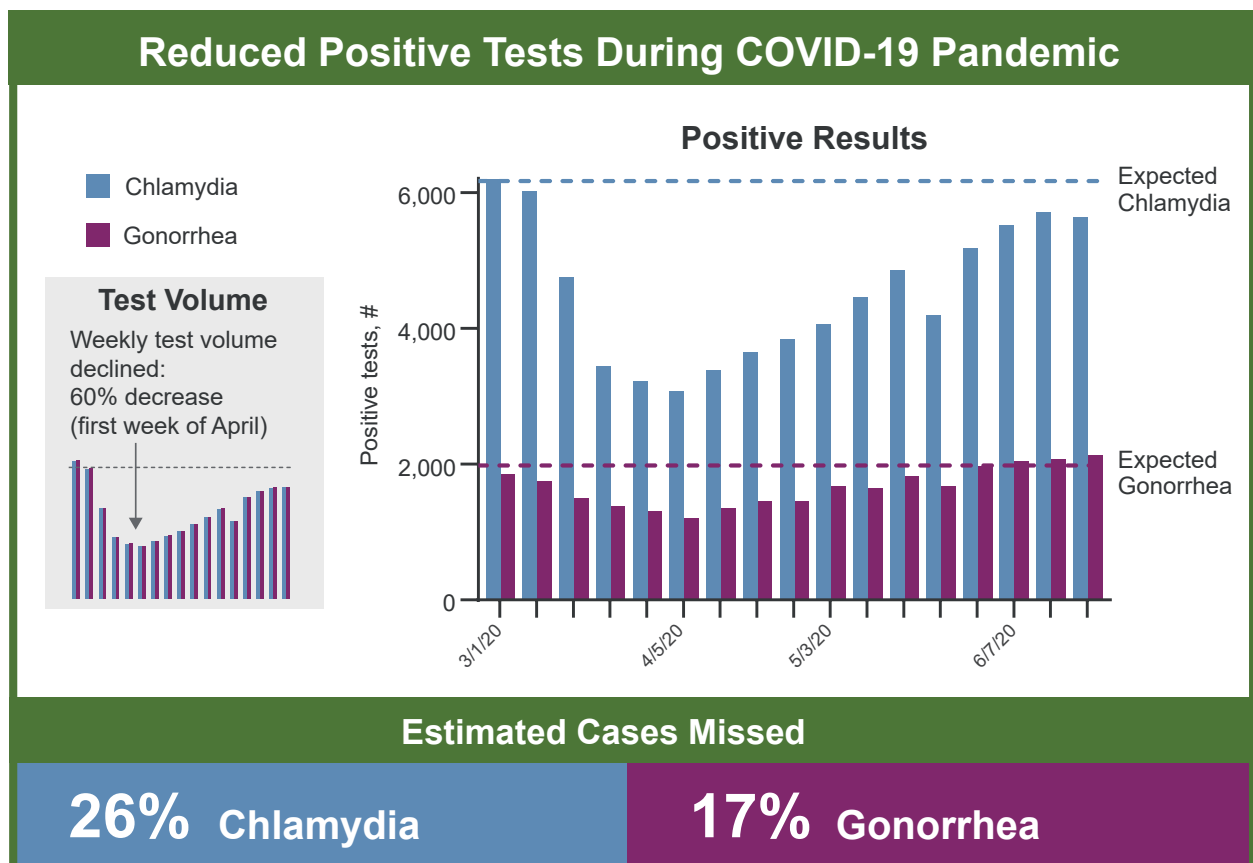
**?** How was testing for common sexually transmitted infections (STIs) affected by the COVID-19 pandemic?

### **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.

# COVID-19 Pandemic Impact on STI Testing

## 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.<sup>1</sup>
- 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

1. 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>