

# Counselling for Chlamydia Case Management

## A Rapid Review

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Region of Peel - Public Health

# Disclosure Statement

- We have no affiliation (financial or otherwise) with a pharmaceutical, medical device, or communications organization.

**Chlamydia cases in Peel increased by \_\_\_\_% from 2015 to 2018?**

- A. 5%
- B. 10%
- C. 15%
- D. 20%**

*Over the past 3 years (2015-2018), chlamydia rates increased in Peel from **244.4** to **273.8** per 100,000.*

**In 2018, chlamydia cases comprised \_\_\_\_% of all reportable STI cases in Peel.**

- A. 41%
- B. 61%
- C. 81%**
- D. 91%



## Issue

- Increasing rates of Chlamydia
- Limited resources

## Context

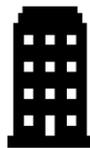
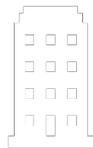
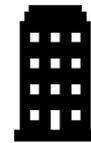
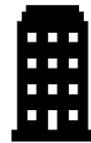
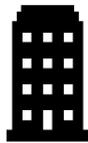
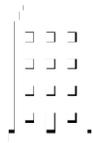
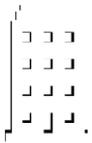
- Current practice is to counsel all priority chlamydia cases
- Provincial mandate: treatment and counselling be provided by either a healthcare provider or Public Health

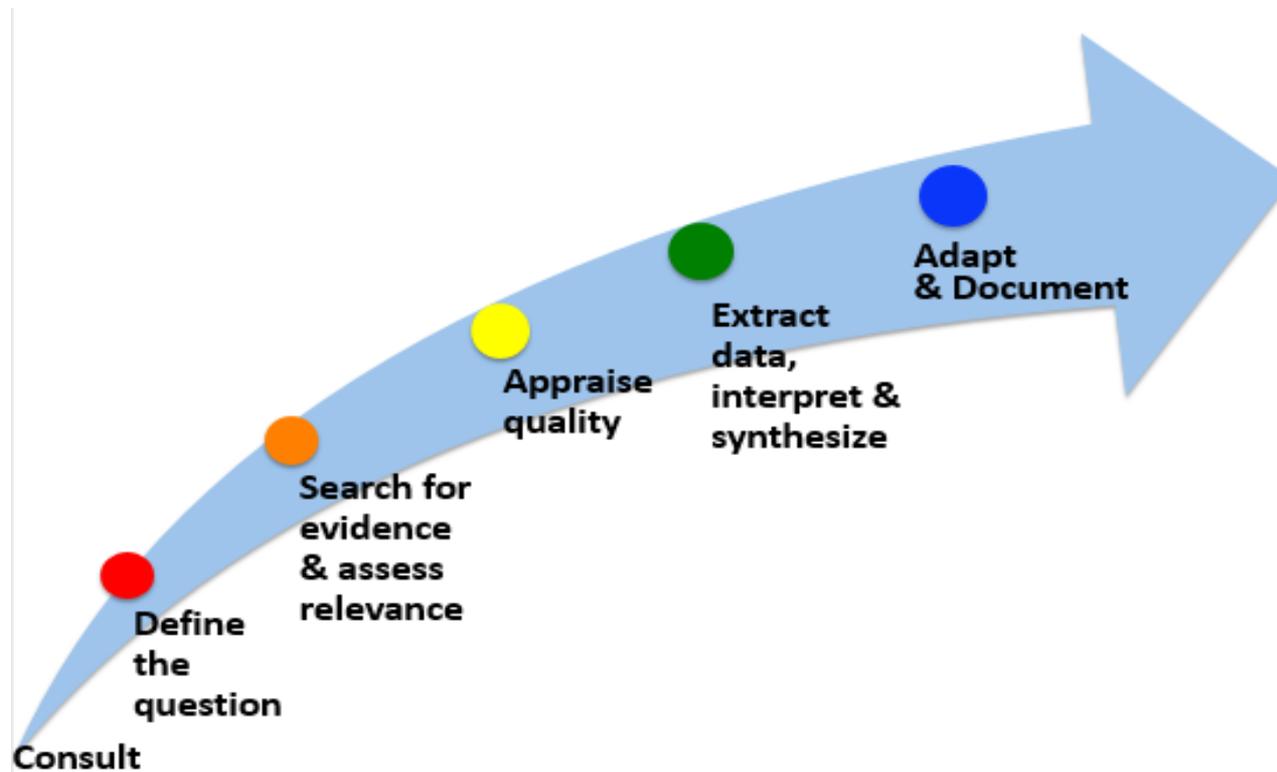


# Expert Opinion



# Public Health Unit Consultations



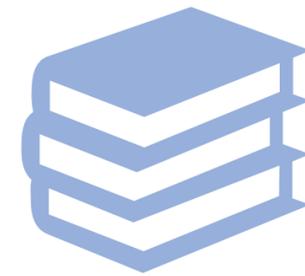


**A Rapid Review** is used to find, appraise and summarize the best available literature to provide information for making program and policy decisions.

# Research Question



- **Population:** Individuals who tested positive for chlamydia
- **Intervention:** Brief counselling
- **Comparison:** Any comparison
- **Outcome:**
  - Repeat STI's
  - Safer sexual behaviors, sexual risks behaviors



## Literature Search

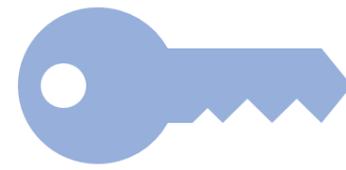
- Screened: 601 articles
- Met inclusion criteria: 5 articles

## Critical Appraisal

- Excluded: one systematic review due to weak quality
- Included: 4 articles
  - Two strong quality; two moderate quality

## Data Extraction & Synthesis

- Data were extracted and formulated into tables
- Common themes were identified and consensus reached with AMOH, Program Manager, and project team



# Key Findings

Counselling Duration	Outcomes	
	STI Incidence	Condom Use
Brief Duration (<30 mins)		
Moderate Duration (30 to 120 min)		
Longer Duration (>2 hours)		

Effective (+)  
Mixed effect (+/-)  
No effect (-)

**What Does This Mean?**



# Recommendations



Discontinue brief counselling for those who test positive for chlamydia.

- a. Continue conducting chlamydia case management to ensure adequate treatment for those who have not received treatment or require follow-up.

# Recommendations

2

Reallocate public health nursing resources from chlamydia brief counselling to other priority work.

# Recommendations

3

Consider other interventions that are effective and feasible to increase safer sex behaviours and reduce STI incidence.

# Recommendations

4

Consider how findings can be applied to brief counselling for other STIs.

**Next Steps**



**Thank You!**  
**Questions?**

