Audit of outcome following positive Chlamydia result in Community Family Planning Clinic

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Objectives: at the time of the first audit local policy was that women testing positive for Chlamydia (CT) were referred to the local Genito-Urinary Medicine (GUM) Dept for treatment and contact tracing. There was concern that some women, despite being aware of the test result were not attending for treatment. One of the objectives of the audit was to determine how many women received appropriate treatment after a positive test result.

Design and Methods: names of all women with a positive CT result from a Family Planning Clinic (FPC) were obtained. FPC and GUM notes were examined for evidence of women having been treated.

Results: for the twelve month period from 1.6.98 to 31.5.99 five hundred and ninety nine CT tests were performed in community FP clinics. 47 (8%) were positive (age range 13-32, median age 20). Of women with positive results 28 attended a GUM clinic and 7 were treated either at the FPC or by their General Practitioner. For 12 women (25%) there was no evidence of treatment having been received. Of the 25 women attending the local GUM clinic co-infection was found in 11 (44%) and 23 provided information on 26 contacts.

Conclusions: the policy of referring women testing positive for CT in community FP clinics led to an unacceptably low treatment rate. Women with CT have a significant rate of co-infections justifying further screening and their sexual contacts represent an important undiagnosed pool of infection in the community. As a result of this audit local policy was changed and women are now provided with antibiotics at the clinic where the test is performed. Additionally they are asked to attend GUM for further care. Improved cooperation between the FP and GUM departments has led to increased treatment rates and a re-audit has demonstrated a higher rate of GUM attendance among referred women.