Who gets Chlamydia and how is it spread?

In 2018 there were over 27,000 cases of Chlamydia in the State of Wisconsin. People between the ages of 15-24 years old were most commonly affected. Chlamydia can cause infection in the vagina, urethra, rectum, and throat, and many cases are asymptomatic. It is therefore important to ask appropriate questions of patients to determine how to test for Chlamydia. Questions such as: “How often are you having vaginal, anal, and/or oral sex?” or, “When was the last time you had sex with a man, woman, or transgender person?”, can elicit more information than questions such as “Do you have vaginal, anal, or oral sex?”. Because there are times pregnant women may have Chlamydia, infants need to be treated prophylactically with an antibiotic ointment for the eyes.

Language for the Patient: Chlamydia is spread by having vaginal, anal, and/or oral sex with someone who has it. Babies can get Chlamydia during birth if the mother has it as well.

If you have sex, you can get Chlamydia; however, there are groups of people more likely to get Chlamydia:

- Young people who have sex.
- If you or your sex partner have any STD, you can also get Chlamydia.
- If you have more than one sex partner and/or a new sex partner.

What are the signs and symptoms?

The symptoms of Chlamydia appear in only about 10% for men and 5-30% for women. In women, Chlamydia initially infects the cervix, where the infection may cause signs and symptoms of cervicitis and sometimes the urethritis. Chlamydia can spread from the cervix to the upper reproductive tract causing pelvic inflammatory disease (PID). Men can have urethritis, discharge, and/or dysuria. Some men may develop epididymitis. Chlamydia can infect the rectum in men and women, and while often asymptomatic, it can cause symptoms of proctitis. Chlamydial conjunctivitis (eyes) can occur in both men and women and can also be found in the throats of women and men having oral sex (though not thought to be an important cause of pharyngitis).

Language for the Patient: Most people have NO symptoms when they have Chlamydia, but find out when they get tested. Men and women may have a burning feeling when urinating. Women may also have a vaginal discharge and/or feeling they need to urinate more often. If you get these symptoms, it is usually 1-2 weeks after having sex with someone who has Chlamydia.
What are the testing and treatment options?

After determining what sites are appropriate for testing (See questions under, “How is it spread and who gets Chlamydia?”) ask your laboratory what types of Chlamydia tests can be used and whether they need to be physician and/or patient collected. The current 2015 CDC STD Treatment Guidelines recommendation for the treatment of uncomplicated Chlamydia is: 1gm of azithromycin 1x PO or seven days of doxycycline 100mg BID. If this is a more complicated Chlamydia infection, please consult the current CDC STD treatment guidelines for recommendations on treatment. Patients should have a test of cure (TOC), especially if they are at high risk of re-infection. Consult with your laboratory to determine how many days after treatment you should perform a TOC as sometimes remnants of the bacteria can create a false positive test result if performed to soon.

Language for the Patient: You can get tested for chlamydia at a doctor’s office, family planning clinic or an STD clinic. Getting tested and treated early can prevent serious problems and stop the spread of Chlamydia. If you have Chlamydia, get your most recent sex partners of the past three months tested AND treated. They may not have symptoms but still have Chlamydia. If you have sex with same partner, you can get infected again unless they get tested and treated. You can get treated with a one time dose of azithromycin or seven days of doxycycline. Women who don’t get treated can get pelvic inflammatory disease (PID) which is very painful. PID can lead to making it hard to have a baby and cause scar tissue which can lead to ectopic pregnancies. In men, it can lead to pain in the testicles and sterility.

How can your patient prevent getting chlamydia?

Partner Services is a valuable service for the prevention of repeat infection in patients. The primary purpose of Partner Services is to ensure that the spread of STDs is contained by contacting the sexual partners of patients and ensuring those partners are tested and/or treated based on confidential conversations with the patient. Partner Services can also assist health care professionals a number of ways when dealing with the treatment and/or further testing of the patient. Because of the burden of disease in certain areas of Wisconsin, Partner Services may not be available for patients with a Chlamydia infection. Below are messages health care professionals can use to help prevent future infection.

Language for the patient: There are many ways to prevent getting Chlamydia and it’s as easy as ABC:

Avoid having sex until you feel prepared to protect yourself. For instance;
Be monogamous or have sex with just one person who only has sex with you and doesn’t have any STDs. You can find out if both of you have an STD like Chlamydia by getting tested together.
Condoms can protect you from getting Chlamydia but only when they cover the body parts that are in contact.. If you are not using condoms for oral sex, you can still get Chlamydia.