

Chlamydia

Chlamydia is the most common bacterial STD, afflicting **3-4 % of women younger than 25**, but less commonly in men. Initially, it can **infect the cervix and urethra, and occasionally the rectum, throat, and eyes**. A chlamydia infection **does not cause symptoms in 70-80 % of women**, but when it does, it is usually an increased amount of vaginal discharge and sometimes pain or bleeding after intercourse. Because many conditions will cause an increased discharge, **the diagnosis requires laboratory tests from the vagina or the cervix**.

In more advance stages, it can cause moderate to severe pain in the lower abdomen and pelvis, produced by the **spread of the bacteria to the fallopian tubes (pelvic Inflammatory disease, or PID)**. PID can then lead to infertility, increased risk of a tubal pregnancy, or chronic pelvic pain. Fortunately, most cases are diagnosed before the infection has a chance to spread up.

Chlamydia can be treated successfully if detected at an early stage. **To make the diagnosis, a swab for chlamydia** (and gonorrhea) can be collected **from the vagina** (this is the most accurate), either as a self-administered vaginal swab, or from the vagina or **cervix** by a health care provider. **In women, the urine test for chlamydia is less accurate than the vaginal swab**. If you or your sexual partner are diagnosed with a sexually transmitted infection like chlamydia, you should also be tested for other STDs, including HIV, syphilis, hepatitis B, gonorrhea and trichomoniasis.

The Public Health Agency of Canada (PHAC) recommends checking for chlamydia **yearly** in all sexually active women age 25 or younger, because chlamydia is common in this age group and the infection usually does not cause symptoms. It can be performed any time in women with symptoms such as discharge and pain, in women who engage in high risk sexual behavior, like multiple sex partners, or have sex with infected individuals.

Once the diagnosis is confirmed, **treatment is offered free of charge** (provided by BC CDC) with an antibiotic called **azithromycin** (4 pills, taken orally, all at once). Another antibiotic called **doxycycline** can also be used, but the treatment is a week-long one pill orally twice a day. They are both 98-99% effective if taken properly. **You should not have sex until one week after both you and your partner were treated**.

Sexual partner(s) who have had contact with an infected person within 60 days of diagnosis, or the most recent sexual partner if it has been longer than 60 days, require testing and treatment.

It is recommended that anyone who is diagnosed with chlamydia have a repeat vaginal swab after six months because many people (as many as 25 percent) are re-infected from poorly treated or untreated sexual partners.

The most effective way to prevent chlamydia is to avoid sexual intercourse. Failing that, stay in a monogamous relationship, and use condoms consistently every time you have sex.

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