

### **What is Expedited Partner Therapy?**

Expedited partner therapy (EPT) is the practice of treating the sex partners of persons with sexually transmitted diseases (STD) without an intervening medical evaluation or professional prevention counseling.<sup>1</sup> EPT is widely used throughout the US and is important because lack of partner treatment is a major cause of STD reinfection.<sup>2-3</sup> The usual implementation of EPT is through patient-delivered partner therapy (PDPT), though other methods may be employed.<sup>4</sup>

### **EPT is Legal for Chlamydia, Gonorrhea, and other Sexually Transmitted Infections in California.**

As of January 1, 2007, California medical providers are allowed to prescribe or dispense antibiotic therapy for the sex partners of patients infected with chlamydia and/or gonorrhea, as well as for other STDs, as determined by the California Department of Health Services. AB 2280 amended current law to allow physicians to prescribe and nurse-practitioners, physician assistants, and certified nurse-midwives to dispense antibiotic therapy for the male and female sexual partners of male and female individuals infected with genital *Chlamydia trachomatis*, *Neisseria gonorrhoea*, or other STDs, even if they have not been able to perform an exam of the patient's partner(s).<sup>5</sup>

### **Issues Surrounding EPT for Men Who Have Sex with Men.**

EPT in the population of men who have sex with men (MSM) presents some issues that remain under study, including the possibility that recipients of EPT for some infections (for instance, antimicrobials for *Chlamydia trachomatis*) may forgo clinical evaluation, resulting in missed opportunities for the diagnosis and treatment of co-morbid conditions, such as HIV.<sup>1</sup>

Whether the benefit of 2 to 5 times decreased HIV acquisition and transmission risk afforded by curing co-morbid STDs through EPT outweighs the risk of possibly failing to diagnose HIV at the emergent timepoint remains to be established in real world studies. It is, however, established that recipients of EPT should be given a referral to accessible HIV testing resources at the time of therapy and should be encouraged to be seen by a health care provider.

**First-choice strategy:** Attempt to bring partners in for evaluation and treatment.

**Most-appropriate partners:** Males who are uninsured or unlikely to seek medical services.

**Medication<sup>6</sup>:** The law does not specify, but for:

*Chlamydia trachomatis:* Azithromycin (Zithromax®) 1 gram (250 mg tablets x 4) once orally.

*Gonorrhea:* Cefpodoxime (Vantin®) 400 milligrams (200 mg tablets x 2) once orally.

*Non-gonococcal Urethritis:* Azithromycin (Zithromax®) 1 gram (250 mg tablets x 4) once orally.

*Syphilis:* EPT recommended against.

**Number of doses** are limited to the number of known sex partners in the past 60 days.

**Education materials** must accompany medication.

**Patient counseling:** Abstinence until 7 days after treatment and until 7 days after partners have been treated.

**Evaluation:** Recommend re-testing patients for chlamydia and/or gonorrhea three to four months after treatment

**Adverse reactions:** As with any medical treatment, the law does not protect providers from liability. Report adverse events to 1-800-FDA-1088.

**References:**

1. Stekler, J, et al. Concurrent sexually transmitted infections (STIs) in sex partners of patients with selected STIs: implications for patient-delivered partner therapy. Clin Infect Dis. 2005 Mar 15;40:787-93.
2. Hogben M, McCree DH, Golden MR. Patient-delivered partner therapy for sexually transmitted diseases as practiced by U.S. physicians. Sexually Transmitted Diseases 2005;32(2):101-105.
3. California Dept of Health Services-STD Control Branch . Patient-Delivered Therapy for Chlamydia trachomatis: Guidance for Medical Providers in California. June 4, 2001. Chlamydia Care Quality Improvement Toolbox. Accessed from the web: [http://www.ucsf.edu/castd/toolbox/Patient\\_Delivered\\_Therapy\\_Guidance.pdf](http://www.ucsf.edu/castd/toolbox/Patient_Delivered_Therapy_Guidance.pdf)
4. Centers for Disease Control and Prevention. Expedited partner therapy in the management of sexually transmitted diseases. Atlanta, GA: US Department of Health and Human Services, 2006. Accessed from the web: <http://www.cdc.gov/std/treatment/EPTFinalReport2006.pdf>
5. California Health and Safety Code SEC. 2. Section 120582 (2006).
6. Centers for Disease Control and Prevention. STD Treatment Guidelines 2006. MMWR. Aug 4, 2006. 55 (RR11);1-94.