

NEW YORK STATE Of Health

Let's Talk STIs: Clinical Insights into Symptoms, Testing, and Treatment

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OBJECTIVES

- Discuss preventative treatments: Doxycycline Post Exposure Prophylaxis (Doxy-PEP) and Pre-exposure Prophylaxis (PrEP)
- Review symptoms of common Sexually Transmitted Infections (STIs)
- Discuss testing options
- Outline recommended treatment





Poll Question



How do you know if you have been in contact with someone who has an STI?

A. A healthcare provider contacts you as a partner
B. You notice symptoms after sexual contact
C. You might not know- many STIs have no symptoms
D. All of the Above



Preventative Tools for STIs



- Abstinence
- Condoms
- Vaccination- Human Papilloma Virus (HPV) and MPox
- Doxycycline Post Exposure Prophylaxis (Doxy-PEP)
- Pre-exposure Prophylaxis (PrEP)

Docycycline Post-Exposure Prophylaxis

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Doxy-PEP



Highlights

- Can prevent Chlamydia, Gonorrhea and Syphilis
- Doxy-PEP should be taken preferably within 24 hours, but no later than 72 hours after condomless sex.
- Doxy-PEP is taken as a 200 mg dose at one time.
- Does not help prevent pregnancy
- Does not help prevent HIV, MPOX, or other viral infections



Source: https://www.health.ny.gov/diseases/communicable/std/doxy_pep/

PrEP





PrEP reduces the risk of getting HIV from sex by about 99% when taken as prescribed.

Among people who inject drugs, it reduces the risk by at least 74% when taken as prescribed.

Source: https://www.hiv.gov/hiv-basics/hiv-prevention/using-hiv-medication-to-reduce-risk/pre-exposure-prophylaxis

PrEP



Daily PrEP

- · Medicines to use: Truvada (available as a generic) or Descovy
- Who can take it: Anyone can take Truvada as daily PrEP. Descovy has not been approved for people who may have receptive vaginal sex.
- · When to take it: Every day
- · Planning around sex: None
- If you miss a pill or injection: Protects during anal sex even if you occasionally miss a pill. May not protect as well during receptive vaginal sex if you miss pills.

PrEP on Demand

- · Medicines to use: Truvada
- Who can take it. Only shown effective for cisgender men who have sex with men. Not
 for people having receptive vaginal sex.
- · When to take it: Before sex and then every day until two days after you last have sex
- Planning around sex: Must take first dose two to 24 hours before sex closer to 24 hours is better
- If you miss a pill or injection. You must take each pill as prescribed. Use condoms if you are unable to take a pill in time, or emergency PEP if you miss a dose.

Injectable PrEP

- · Medicines to use: Apretude
- · Who can take it Anyone who may be exposed to HIV during sex
- · When to take it: Every two months
- Planning around sex: None
- If you miss a pill or injection: If you delay a scheduled injection by more than seven days, you must take the medicine in pill form until your next injection.

Transmission and Symptoms



Chlamydia



Bacterial or Viral: Bacterial infection

Transmission

All types of sex, including oral, vaginal, and anal sex.

Most often during unprotected vagina or anal sex.

Symptoms

- Asymptomatic
- Thick yellow or clear discharge
- Pain or burning with urination
- Pain or bleeding during sex

Testing

Urine test and/or swab sample

Routine testing with unprotected sex

Possible Complications

Pelvic Inflammatory Disease

- □ Infertility
- Ectopic Pregnancy
- Testicular pain

Source: https://www.health.ny.gov/publications/3835.pdf

Gonorrhea



Bacterial or Viral: Bacterial infection

Transmission

All types of sex, including oral, vaginal, and anal sex.

Most often, it infects the penis or vagina, but it can also infect the rectum, throat, or eyes.

Symptoms

- Asymptomatic
- AMAB might experience burning during urination, a white, yellow, or green discharge from the penis, or painful, swollen testicles.
- AFAB might have pain with urination, vaginal bleeding between periods, or pain in their lower abdomen.
- \circ Rectal pain

Testing

Urine test and/or swab sample

Routine testing with unprotected sex

Source: https://www.health.ny.gov/publications/3802.pdf

Possible Complications

Pelvic Inflammatory Disease

- Infertility
- If pregnant-transmit to baby during birth impacting the eyes

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Syphilis



Bacterial or Viral: Bacterial infection

Transmission

All types of sex, including oral, vaginal, and anal sex.

Syphilis is spread through contact with sores (called chancres) or other symptoms of syphilis.

Symptoms

- The first sign is a painless sore, called a chancre.
- After a few weeks or months without getting treated, you may have a rash on the palms of your hands or soles of your feet, swollen glands, joint pain, fever, hair loss, sore throat, or headaches.

Testing

Swabbing of sores, or blood test

Routine testing with unprotected sex

Possible Complications
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their babies

Source: https://www.health.ny.gov/publications/3807.pdf

Syphilis

Primary Syphilis

- A single sore or multiple sores
- o Painless
- Lasts 3 to 6 weeks, sore will go away on its own

Secondary Syphilis

- Skin rashes and/or sores
- Rash typically on palm of hands and/or the bottoms of your feet
- o Fever
- o Swollen lymph nodes
- o Sore throat
- o Muscle aches
- o Fatigue



Source: https://www.cdc.gov/syphilis/about/index.html

SYPHILIS







Source: https://www.cdc.gov/syp hilis/hcp/images/index.html





HIV



Bacterial or Viral: Viral Infection

Transmission

Through contact with an infected person's bodily fluids – blood, pre-ejaculate (pre-cum), semen, vaginal fluids, and/or breast milk.

Symptoms

- Asymptomatic
- Rapid weight loss
- \circ Fever
- o Diarrhea
- Night sweats
- Fatigue

Testing

Rapid tests, and/or blood test

Routine testing with unprotected sex

Possible Complications

□ HIV cannot be cured

- Progression to AIDS
- Mothers can pass HIV to their baby prior to birth, during childbirth, or through breast milk

Source: https://www.hiv.gov/hiv-basics/overview/about-hivand-aids/how-is-hiv-transmitted

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Herpes



Bacterial or Viral: Viral Infection

Transmission

All types of sex, including oral, vaginal, and anal sex.

Any **skin-to-skin touching with infected areas can pass along herpes**, even if the person who has herpes doesn't have any visible sores or other symptoms.

Symptoms

- Asymptomatic
- Blisters or sores on their lips, inside the mouth, or on or inside the vagina, penis, thighs, or buttocks.

Testing

Swabbing the open sore with a cotton swab.

Blood test



Source: https://www.health.ny.gov/publications/3801.pdf

HPV



Bacterial or Viral: Viral Infection

Transmission

All types of sex, including oral, vaginal, and anal sex.

Any skin-to-skin contact with infected areas.

Symptoms

- Asymptomatic
- Small bumps
- Discomfort and itching

Testing

During PAP smear and/or cervical cancer screening for AFAB

Clinical examination of symptoms for AMAB

HPV Vaccination

 HPV Vaccine Series is recommended to be given between 9-11 years old.

HPV vaccine still recommended if someone has had HPV

Source: https://www.health.ny.gov/publications/3837.pdf

Possible Complications



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Chat Question



RECOMMENDED TESTING

Who should be tested

- Everyone ages 13 to 64 years should be tested at least once for HIV.
- All sexually active women younger than 25 years should be tested for gonorrhea and chlamydia every year.
- Women 25 years and older with risk factors should be tested for gonorrhea and chlamydia every year. Risk factors include having new partners, multiple partners, or a partner who has an STI.
- **Pregnant women** should be tested for syphilis, HIV, hepatitis B, and hepatitis C starting early in pregnancy. Repeat testing may be needed.
- **Pregnant women at risk** should also be tested for chlamydia and gonorrhea starting early in pregnancy. Repeat testing may be needed in some cases.
- Sexually active men who are gay or bisexual and men who have sex with men should be tested:
 - For syphilis, chlamydia, and gonorrhea at least once a year. Those with multiple or anonymous partners should be tested more frequently (e.g., every 3 to 6 months).
 - For HIV at least once a year and may benefit from more frequent HIV testing (e.g., every 3 to 6 months).
 - For hepatitis C, at least once a year, if living with HIV.
- Anyone who shares injection drug equipment should get tested for HIV at least once a year.
- **People who have had oral or anal sex** should talk with their healthcare provider about throat and rectal testing options.

Source: https://www.cdc.gov/sti/ testing/index.html

Gonorrhea

Chlamydia



HIV

Syphilis

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HIV TESTING

WHAT IS THE WINDOW PERIOD FOR THE HIV TEST I TOOK?





For more information, visit www.cdc.gov/hiv/basics/testing.html





ALTERNATIVE TESTING OPTIONS

STI Self-Collection Tests







Source: https://www.ashasexualhealth.org/fda-approves-a-newat-home-test-for-three-common-stis/

Recommended Treatment



Chlamydia

Department

Treatment

Treating persons with *C. trachomatis* prevents adverse reproductive health complications and continued sexual transmission. Furthermore, treating their sex partners can prevent reinfection and infection of other partners. Treating pregnant women usually prevents transmission of *C. trachomatis* to neonates during birth. Treatment should be provided promptly for all persons with chlamydial infection; treatment delays have been associated with complications (e.g., PID) in a limited proportion of women (*810*).

Recommended Regimens for Chlamydial Infection Among Adolescents and Adults

Doxycycline 100 mg orally 2 times/day for 7 days

Alternative Regimens

Azithromycin 1 g orally in a single dose OR Levofloxacin 500 mg orally once daily for 7 days



Source: https://www.cdc.gov/std/treatmentguidelines/chlamydia.htm

Gonorrhea

Recommended Regimen for Uncomplicated Gonococcal Infection of the Cervix, Urethra, or Rectum Among Adults and Adolescents

Ceftriaxone 500 mg* IM in a single dose for persons weighing <150 kg

If chlamydial infection has not been excluded, treat for chlamydia with doxycycline 100 mg orally 2 times/day for 7 days.

* For persons weighing \geq 150 kg, 1 g ceftriaxone should be administered.





Source: https://www.cdc.gov/std/treatment-guidelines/gonorrheaadults.htm

Syphilis

Treatment

Parenteral penicillin G has been used effectively for achieving clinical resolution (i.e., the healing of lesions and prevention of sexual transmission) and for preventing late sequelae. However, no comparative trials have been conducted to guide selection of an optimal penicillin regimen. Substantially fewer data are available for nonpenicillin regimens.

Recommended Regimen for Primary and Secondary Syphilis* Among Adults

Benzathine penicillin G 2.4 million units IM in a single dose

* Recommendations for treating syphilis among persons with HIV infection and pregnant women are discussed elsewhere in this report (see Syphilis Among Persons with HIV Infection; Syphilis During Pregnancy).





Source: https://www.cdc.gov/std/treat ment-guidelines/p-and-s-syphilis.htm

Are there different types of HIV treatment?

There are two types of HIV treatment: **pills** and **shots**.

- **Pills** are recommended for people who are just starting HIV treatment. There are many FDA-approved single pill and combination medicines available.
- People who have had an undetectable viral load (or have been virally suppressed) for at least three months may consider **shots**.

What are HIV treatment shots?

HIV treatment shots are long-acting injections used to treat people with HIV. The shots are given by your health care provider and require routine office visits. HIV treatment shots are given once a month or once every other month, depending on your treatment plan.



HIV



Source: https://www.cdc.gov/hiv /treatment/index.html $^{\sim}$

HIV



UNDETECTABLE = UNTRANSMITTABLE

HIV medicine can help you get and keep an **undetectable viral load**.

This means you can stay healthy and **will not transmit HIV** to HIV-negative partners through sex.



Source: https://www.hiv.gov/hiv-basics/staying-in-hiv-care/hiv-treatment/viral-suppression



HERPES & HPV



Herpes

- There is no cure for genital herpes.
- Medicines that can prevent or shorten outbreaks.
- Routine medication can make it less likely to pass the infection on to your sex partner(s).

HPV

- Typically clears on its own
- Genital warts can be treated with prescription medicine.
- Surgical treatment options

EXPEDITED PARTNER SERVICES (EPT)

What is EPT?



Expedited Partner Treatment (EPT) allows health care providers to give medication or a prescription to patients diagnosed with <u>chlamydia, gonorrhea, and/or trichomoniasis</u> to deliver to their sex partners, so they can also be treated, without requiring an examination.

What Infections is EPT for?



EPT in New York State (NYS) is for people who have:

- <u>chlamydia</u>, <u>gonorrhea</u>, and/or <u>trichomoniasis</u>. People diagnosed with syphilis are not able to get EPT for their sex partners.
- sex partners of persons diagnosed with syphilis should get immediate care and recommended testing and treatment.

Why is EPT Important?



EPT is important because:

- It is an option for quick treatment of sex partners.
- treatment of sex partner(s) may help prevent reinfection in the patient.
- It helps remove barriers to care when an inperson visit is not possible for sex partners.





EXPEDITED PARTNER SERVICES (EPT)

How does EPT work?



EPT is given to the person diagnosed with an STI as either:

- a nameless prescription that can be filled at any pharmacy; or
- medication-in-hand, where the full dose of medicine is given to the patient for them to deliver to their sex partners.

Who pays for EPT?



Health care providers may offer one of the following to deliver to partners:

- · free medication-in-hand,
- a prescription paid with:
 - partner's insurance
 - · cash, minus any discount coupons, or
 - <u>local health department</u> or <u>sexual health</u> <u>clinic</u> referrals.

Source: https://www.health.ny.gov/diseases/communicable/std/ept/



Chat Question



HELPFUL RESOURCES

NYS DOH- Office of Sexual Health and Epidemiology:

https://www.health.ny.gov/diseases/communicable/std/

Clinical Education Initiatives(CEI): https://ceitraining.org/

CEI STI Treatment Cards

NYS AIDS Insititute Training Center- https://www.hivtrainingny.org/

Doxy-PEP: https://courses.nnptc.org/DoxyPEP_Resources.html

PrEP for Adolescents: <u>https://www.michiganmedicine.org/community/community-health-services/adolescent-health/resources-type/timely-topics/prep-adolescents</u>



