Expedited Partner Therapy

Physician's Guide



EPT reduces the risk
of your patients
becoming re-infected
with Chlamydia and
gonorrhea from their
untreated sex partners.
It's effective, saves time,
is private and convenient.

Introduction

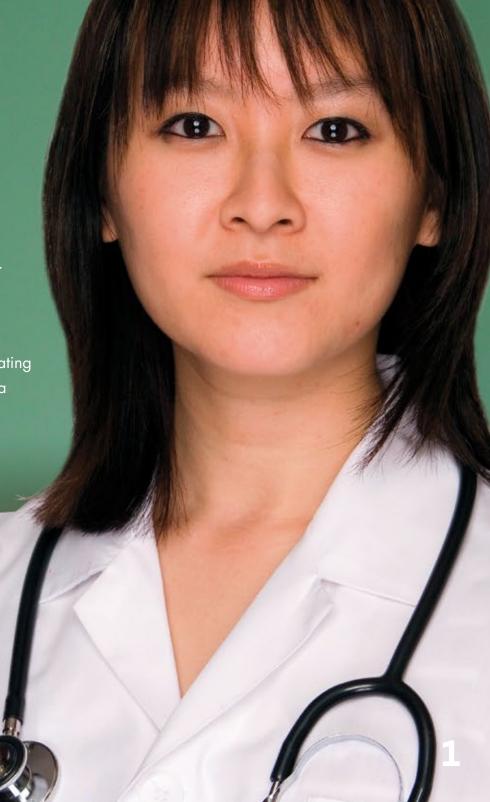
Expedited Partner Therapy (EPT) is the general term for the practice of treating sexual partners of patients diagnosed with an STD (specifically Chlamydia and/or gonorrhea) without an intervening medical evaluation. EPT is a treatment option to increase the likelihood that sex partners get needed medication thus reducing the risk of re-infection and potential further dissemination of these diseases within the community.

Why use EPT?

1) EPT is a useful option to facilitate partner treatment among heterosexual men and women with Chlamydia or gonorrhea, and to prevent re-infection of patients with Chlamydia or gonorrhea.

2) EPT is at least equivalent in efficacy to standard partner management for gonorrhea and Chlamydia.

3) EPT is a cost-saving and cost effective partner management strategy.



Eligible Patients:

 Heterosexual persons with a lab-confirmed diagnosis of Chlamydia trachomatis or Neisseria gonorrhoeae. EPT has not been studied among men who have sex with men so is only advised for heterosexuals.

Eligible Partners of Patients:

 Heterosexual sex partners of patients treated for Chlamydia and/or gonorrhea who were exposed within the previous 60 days and who are unable or unlikely to seek medical care.

Preferred Treatment for Partners:

Request that partners schedule an appointment for complete clinical evaluation, STD/HIV testing, counseling, and treatment. If not possible, please consider prescribing or dispensing medication to your patient that he/she will give to their sex partner(s).

Points to discuss with patients:

 Patients and partners should not engage in sexual activity for 7 days following EPT.

• Discuss possible allergic reactions to antibiotics.

 Encourage patients to have partners seen by a medical provider for STD testing and treatment.

 Encourage patients to visit the Centers for Disease Control and Prevention website at http://www.cdc.gov/std/default.htm for more information on STD prevention and management.



Recommended Medication Given to Sex Partners for EPT

Index Patient	Recommended Medication for EPT
Chlamydia only	Azithromycin (Zithromax) tablets 1 gram (500 mg tablets x 2) orally once.
Gonorrhea only OR Gonorrhea and Chlamydia coinfection.	Cefixime (Suprax) 400 mg orally once, PLUS Azithromycin (Zithromax) tablets 1 gram (500 mg tablets x 2) orally once.

Medical providers may access informational materials on EPT by visiting http://www.in.gov/isdh/17440.htm

Partner management of patients with gonorrhea or Chlamydia shall include providing the following items:

 Notification to the infected patient that all partners should be evaluated and treated

- Materials for the infected patient to give partners that state:
 - that a clinical evaluation is desirable
 - the common medication side effects and the appropriate response to them
 - facts regarding sexually transmitted diseases
 - emergency contact information

Prescriptions or dispensed medications and accompanying written materials shall be given to the physician's patient for distribution to named partners. The physician shall maintain appropriate documentation of partner management.

Documentation shall include the names of partners, if available, and a record of treatment provided. If the partner's name is not available, documentation shall be kept within patient's file.

NOTE: HIPAA prohibits putting partners'names in patients' charts.

Liability

Indiana Administrative Code allowing EPT protects licensed physicians providing prescription antibiotics to sex partners (EPT) without fee or compensation from civil and professional liability, except in cases of willful and wanton misconduct. Licensed physicians must provide the index patient with counseling and written materials developed by the Indiana State Department of Health and located in the Guidance for Health Care Professionals in Indiana for his/her sex partner(s). The same protection applies to licensed physicians choosing not to provide EPT.

References:

Expedited Partner Therapy in the Management of Sexually Transmitted Diseases: Review and Guidance, Centers for Disease Control and Prevention (CDC), 2006.

http://www.cdc.gov/std/treatment/EPTFinalReport2006.pdf

Expedited Partner Therapy

www.cdc.gov/std/ept

The Indiana State Department of Health's Division of HIV/STD/Viral Hepatitis

http://www.in.gov/isdh/17440.htm

Guidance for Health Care Professionals in Indiana http://www.in.gov/isdh/17440.htm

Frequently asked questions about Expedited Partner Therapy http://www.in.gov/isdh/17440.htm

Indiana's Medical Licensing Board published its regulation concerning EPT in September 2011. This rule may be accessed

at: http://www.in.gov/legislative/iac/T08440/A00050.PDF

844 IAC 5-4-2 Expedited partner therapy

Authority: IC 25-22.5-2-7

Affected: IC 25-1-9: IC 25-1-9

For additional information or questions regarding EPT, please contact:

Indiana State Department of Health Division of HIV/STD Viral Hepatitis

http://www.in.gov/isdh/17440.htm 317-233-7499



www.StateHealth.in.gov