

Nevada State Health Division Technical Bulletin

Topic: Patient-Delivered Partner Therapy (PDPT)

Section/Program: Bureau of Health Statistics, Planning, Epidemiology, and Response/Office of Epidemiology

Date: September 22, 2011

To: Health Care Providers

Background:

In December 2010, the Nevada State Board of Health updated Nevada Administrative Code (NAC) 441A regarding regulations that govern STD prevention and treatment practice in Nevada. Changes included the adoption of the Centers for Disease Control and Prevention's (CDC's) guidelines for partner services treatment, found in NAC 441A.200(2)(f). The following CDC guidelines concerning PDPT provide information on the most appropriate patients, medications, and counseling procedures recommended maximizing patient and public health benefit while minimizing risk.

Summary Guidance for Patient Delivered Partner Therapy (PDPT)

- **PDPT Eligible Patients:** Persons with a clinical diagnosis of *Chlamydia trachomatis* or *Neisseria gonorrhoea* preferably confirmed with a laboratory test.
- **PDPT Eligible Partners:** Sex partners of patients treated for chlamydia and/or gonorrhea who were exposed within the previous 60 days (or most recent sex partner if none in the previous 60 days), and who are unable or unlikely to seek medical care.
 - **Not recommended for:** Gonorrhea and chlamydial infection in men who have sex with men, women with trichomoniasis and patients with infectious Syphilis, and pregnant women.
- **First-choice Partner Management Strategy:** Attempt to refer partners in for complete clinical evaluation, STD/HIV testing, counseling, and treatment
- **Recommended Drug Regimens for Sex Partners Receiving PDPT:**
- **Patients diagnosed with chlamydia, but not gonorrhea:**
 - Azithromycin (Zithromax*) 1 gram (500 mg tablets x 2 or 250 mg x 4) by mouth once
- **Patients diagnosed with gonorrhea but not chlamydia:****
 - Cefixime (Suprax*) 400 mg orally by mouth once PLUS
 - Azithromycin 1 gram (500 mg x 2 or 250 mg x 4) by mouth
- **Patients diagnosed with both gonorrhea and chlamydia:**
 - Cefixime (Suprax*) 400 mg by mouth once, PLUS
 - Azithromycin (Zithromax*) 1 gram (500 mg tablets x 2) by mouth once
- **Informational Materials:** Health care professionals must provide patients participating in PDPT with counseling and written materials. Materials can be found at http://health.nv.gov/CD_HIV_STDProgram.htm.
 - A warning about administering PDPT to pregnant partners;
 - Information about the antibiotic and dosage provided or prescribed;
 - Information about the treatment and prevention of STDs;
 - Requirement of abstinence until a period of time after treatment;
 - Notification of the importance of sex partners to receive testing for HIV and other STDs;
 - Notification of the risk to self, others, and the public health if the STD is not completely treated;
 - The responsibility of the sex partner to inform his/her sex partners of the risk of STDs and importance of examination and treatment; and
 - Other information deemed necessary by the Department.
- **Patient Re-testing:** Patients treated for chlamydia and/or gonorrhea should be re-tested three months after treatment to identify possible re-infection.
- **Liability:** Health care providers or pharmacists who dispense PDPT in accordance with this law shall not be subject to liability or be deemed to have engaged in unprofessional conduct.

* Use of trade names is for identification only and does not imply endorsement.

** ceftriaxone 250 mg IM in a single dose or IF NOT AN OPTION cefixime 400 mg orally in a single dose OR single-dose injectable cephalosporin regimens PLUS azithromycin 1 gram orally in a single dose OR doxycycline 100 mg orally twice a day for 7 days.

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Resources:

1. Nevada State Health Division, Office of Epidemiology. PDPT partner information materials are available at on STD Prevention and Control Programs webpage at: http://health.nv.gov/CD_HIV_STDProgram.htm.
2. STD Treatment Guidelines 2010. Available online at <http://www.cdc.gov/std/treatment/>.
3. Expedited Partner Therapy in the Management of Sexually Transmitted Diseases. 2006. Available online: www.cdc.gov/std/EPT

The Nevada State Health Division would like to thank and acknowledge those many providers throughout the state who strive for optimal patient safety through proper use and disposal of single use only items in their practice.

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