



# Implementation Of An Evidence-based Project To Reduce Sexually Transmitted Infections At A Small Family Clinic

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## Abstract

Sexually transmitted infections (STIs), including Chlamydia trachomatis and Neisseria gonorrhoeae, have reached record high rates in the United States. Sexually transmitted infections disproportionately affect reproductive-aged males and females 15–44 years of age, who account for 65% and 42% of the total reported C. trachomatis and N. gonorrhoeae cases, respectively. These infections are the most common treatable sexually transmitted infections in the United States. The purpose of this evidence-based practice project was to decrease the rates of recurrence of STIs in males and females older than 17 years at a private family practice clinic in Carrollton, Texas, in the Dallas metropolitan area over a period of 6 weeks. An average of 25 confirmed cases of STIs was observed quarterly in the clinic. In January 2022 alone, 20 cases of confirmed STIs were treated in the clinic, and EPT was offered for each sexual partner with whom they had had contact within the previous 60 days. Only ten of those 15 patients accepted EPT, with an acceptance rate of 57%. All twenty-five patients testing positive for infection, regardless of whether they accepted EPT, were asked to return for an infection check at 8 weeks after diagnosis to test for the rate infection recurrence. If EPT is found to be effective at reducing the rates of recurrence of infection in the sexually transmitted infection at the clinic, the intervention will be used on a permanent basis to reduce rates of recurrence of STI clinic-wide and in the community.

## PICOT QUESTION

The purpose of this DNP quality improvement (QI) project was to implement an EPT program that has already been found nationally to reduce rates of recurrence of STI in male and female patients who test positive for STIs in clinical settings, and to reduce the return rates among patients' repeat visits for the same reason. So, the PICO question is

- How well I can reduce reinfection of STI among patients aged 15 – 45 years who test positive for sexually transmitted infections, by providing EPT, which is research supported and Evidence Based, instead of conventional treatment and partner referral in a period of 6 weeks ?

## Summary of Evidence

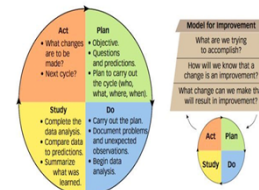
### Expedited Partner Therapy

- EPT is a treatment alternative for partners of a patient diagnosed with sexually transmitted diseases (STDs) without a medical evaluation of the partner.
- EPT allows the patient to deliver oral medication or prescriptions to their sexual partner who might not otherwise seek care.
- EPT prevents re-infection to the original patient, thus reducing the burden of STDs in the community.

### Literature Review



## Methodology



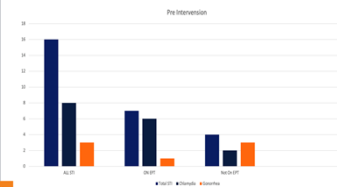
## Conclusion

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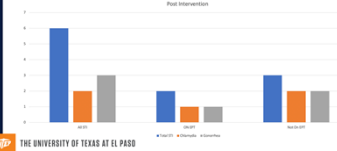
- EPT was effective in reducing persistent or recurrent infections due to chlamydia and gonorrhea
- EPT was associated with higher likelihood of partner notification and partner treatment
- Preliminary economic analysis suggest that EPT is a cost-saving and cost-effective partner management strategy
- EPT represents an additional strategy for partner management that does not replace other strategies

## Findings

### Preintervention



### Post Intervention



## Strengths

- Patients satisfied
- Staff Satisfaction
- Reduced reinfection

## Weakness

- Limited Time
- Language Barrier
- Small Number Of Patients