Gonorrhoea test-of-cure (TOC) by post maintains return rate

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2011 UK national guideline for management of gonorrhoea and 2012 gonorrhoea testing guideline:

A test of cure (TOC) is recommended for all GC infections:

- 1. to identify treatment failure/emerging resistance
- 2. because the susceptibility levels that indicate potential failure to ceftriaxone and cefixime are not yet defined.

(Bignell et al. 2011, 2012)







GC-TOC rate

• LA, USA: 26%

(Beymer et al. STD 2014)

 Manchester, Birmingham, Newcastle UK: 55-73%

(Rodgers *et al.* IJSA 2014; Holland *et al*. IJSA 2003; Malu *et al*, IJSA 2006)





Background

- 56 Dean Street symptomatic, complex, specialist service
- Dean Street Express (34 Dean Street) asymptomatic, nurse-led service
- Monthly attendances 11,500
- Annually attendances– 130,000





Background

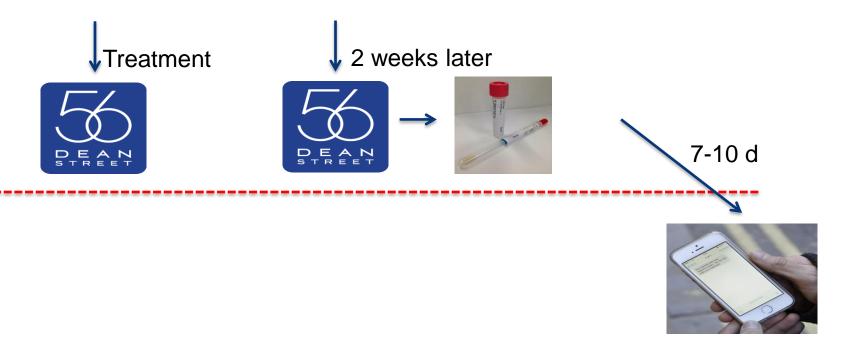
2013-2014 PHE

	England	Dean Street
Gonorrhoea	16066	4030 (25%)





Standard testing TOC pathway







Introduction of postal testing

• In November 2014, we introduced postal GC TOC for MSM to create capacity in clinic

- Service evaluation following implementation:
 - TOC return rate
 - Patient satisfaction





Eligibility

- MSM
- Site of GC infection known
- Ineligible if GC contact only or if GC diagnosed only on microscopy





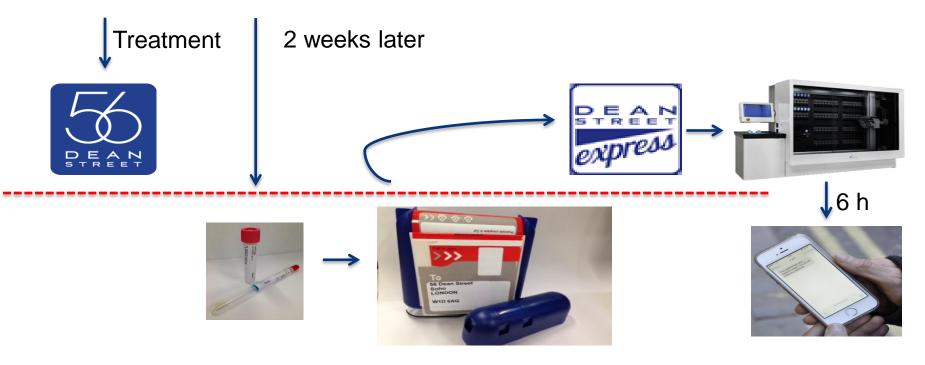
Contents of pack

- Swab(s) and urine sample container
- Instructions
- Questionnaire recent sexual history; partner notification; patient satisfaction
- Royal Mail safe box





Postal TOC pathway









Pre-postal pack TOC return rate = 75.8%





Results

- 446 cases of GC in MSM 1st 30th November 2014
- 142 given postal packs
 - 78 (55%) returned by post
 - 29 walked in
- Return rate for patients given postal packs 75.3%







- Of remaining 304 (standard TOC)
 - 227 (74.6%) attended

• Total TOC rate: 334/446 = 74.9%





Results: Reasons for not giving postal pack

- Ineligible 121
- Staff forgot!
- Patient declined
- Other follow-up pending e.g. PEP; LGV





Results: Time to results by text

19 days (IQR: 16 – 24 days) i.e. 5 days after TOC due





Results: patient satisfaction

	Very easy <i>or</i> easy
How easy did you find the pack to use?	82% (53/65)

	Very clear <i>or</i> clear
How clear were the instructions?	84% (54/64)

	Yes
Do you prefer this method of testing?	65% (42/65)
Would you have preferred to come to clinic?	25% (16/65)





Discussion

- Well received by patients
- Overall return rate maintained
 - 25% prefer TOC in person
- 1 clinic consultation at 56 Dean Street saved per episode
- Slow transition to postal testing by clinic staff
- New pathway implemented March 2015
 - extended to ALL GC diagnoses (MSM, hetero, trans*)



Discussion

• Is TOC necessary where organism is known to be sensitive and we continue to collect data via GRASP?

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- 8% in postal group positive TOC (1 azithromycin resistant organism)
 - -? Re-infection
 - ? TOC performed too soon
- GRASP 1.6% azithromycin resistance



Discussion

- 25% failed to return for TOC
- Would they be more likely to return if recalled for 3/12ly STI screens as recommended by PHE?
- 44% vs 19% returned for repeat screen after active recall (see Poster 171)





Thanks

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