



Objectives

The objectives of this study were to describe and compare chlamydia testing provided by general practitioners (GPs) in four selected European countries with well-developed primary health care systems and high reported chlamydia rates; we aimed to compare contrasting countries where chlamydia testing is provided by GPs (England, Sweden) with countries where primary care chlamydia testing is absent or very limited (France, Estonia).

Methods

Primary and secondary research methods were employed in data generation. A structured questionnaire developed by the research team allowed a systematic approach to analysing chlamydia care (including testing in general practice) and gather relevant data. Secondary research included a review of published literature relating to chlamydia management in the selected countries. This analysis was supplemented by documentary analysis of published reports, key legal instruments and policy documents (European CDC reports on sexually transmitted infections surveillance and chlamydia control (1,2)).

Results

There were no significant differences in the burden of the disease or the type of general practice care provision in the study countries. In all four countries, testing for chlamydia (with nucleic acid amplification test, NAAT) is available in the public sector, a substantial proportion (> 60%) of young people aged 16-25 years visit their general practitioner (GP) annually, and reimbursement for chlamydia testing costs to the relevant parties (GPs in England, Sweden and Estonia; and patients in France) by the national health insurance system or its equivalent.

In countries where chlamydia testing is provided by GPs (England, Sweden) a national strategy or plan on STI control that specifically mentions chlamydia was in force, chlamydia care guidelines for GPs were in place and STI management was more firmly established in the GP residency training curriculum, either formally (England) or informally (Sweden), than in the other countries.

1. Main results

| | England | Estonia | France | Sweden |
|---|--|--------------------------------------|--|--|
| Rate per 100 000 population, all age groups, in 2010 (and 2012) | 348/100 000 (389.6/100 000 in 2012 *) | 126/100 000 (119/100 000 in 2012) | 360 for women 240 for men (aged 18-24, in 2006) ** | 391/100 000 (395/100 000 in 2012) |
| Written guidelines or recommendations about chlamydia diagnosis and case management <u>specifically for GPs</u> | Yes, contained within National Chlamydia Screening Programme Core Guidance 6th Edition 2012 and BASHH 2006 | No | No | Yes, Recommendations from the Board of County Medical officers, 2010 |
| | Royal College of General Practitioners 2013 Sexually Transmitted Infections in primary care guidelines | | | |
| Is training for sexually transmitted disease care (during residency) mandatory for GPs? | Not mandatory, but GPs studying it must meet key competencies | Yes (but extremely limited) | No | No, but often done |
| % of GP services performing any testing for genital CT infection | 88% | < 5% | < 10% | > 80% |
| | * Data for 2012: England - Chlamydia Testing Activity Dataset 2012 | | | |
| | ** Extrapolated from the Goulet V et al 2011 (2) | | | |

Conclusion

Future research on the effectiveness of chlamydia screening (also in the context of general practice care) and program provision should reflect national needs and the prevention of complications.

References

1. European Centre for Disease Prevention and Control: Annual Epidemiological Report 2012. Reporting on 2010 surveillance data and 2011 epidemic intelligence data. Stockholm; 2013.
1. European Centre for Disease Prevention. TECHNICAL REPORT RE VIEW OF CHLAMYDIA CONTROL ACTIVITIES IN EU COUNTRIES. Stockholm; 2008.
2. Goulet V, de Barbeyrac B, Raheison S, Prudhomme M, Velter A, Semaille C, Warszawski J, et le groupe CSF : **Enquête nationale de prévalence de l'infection à Chlamydia trachomatis (volet NatChla de l'enquête CSF 2006). À quelles personnes proposer un dépistage? Bulletin épidémiologique hebdomadaire 2011, 12;160.**