

# PREVENT STDs AMONG MSM

## IDENTIFICATION OF MSM (MEN WHO HAVE SEX WITH MEN)

Assess sexual risk for all male patients, including routinely asking about the gender of patient's sex partners.

## STD SCREENING FOR ALL SEXUALLY ACTIVE MSM<sup>1</sup>

The following tests are recommended annually<sup>2</sup>:

- HIV serology, if HIV–negative or not previously tested
- Syphilis serology
- Urethral culture or nucleic acid amplification test for gonorrhea
- Urethral or urine test (culture or nucleic acid amplification) for chlamydia in men with oral-genital exposures
- Pharyngeal culture for gonorrhea in men with oral-genital exposure
- Rectal gonorrhea and chlamydia culture in men who have had receptive anal intercourse

<sup>1</sup>If signs or symptoms of STDs are present (e.g., urethral discharge, dysuria, anorectal symptoms [e.g., pain, pruritis, discharge, and bleeding], genital or anorectal ulcers, other mucocutaneous lesions, lymphadenopathy, and skin rash), appropriate diagnostic tests should also be done.

## PREVENTION COUNSELING

- Prevention messages should be tailored to the patient, with consideration given to patient's specific risk factors for STDs.
- Messages should include a description of specific actions the patient can take to avoid acquiring or transmitting STDs.
- The most reliable way to avoid transmission of STDs is to abstain from sexual intercourse or to be in a long-term, mutually monogamous relationship with an uninfected partner.
- If a person chooses to have sexual intercourse with a partner whose infection status is unknown or who has an STD, a new condom should be used.

### FOR ADDITIONAL INFORMATION

#### STD Treatment Guidelines:

[www.cdc.gov/mmwr/PDF/RR/RR5106.pdf](http://www.cdc.gov/mmwr/PDF/RR/RR5106.pdf)

PDA Download: [www.cdcnpin.org/scripts/std/pda.asp](http://www.cdcnpin.org/scripts/std/pda.asp)

#### Hepatitis Vaccination:

[www.cdc.gov/hepatitis](http://www.cdc.gov/hepatitis)

#### Male Latex Condoms and Sexually Transmitted Diseases:

[www.cdc.gov/nchstp/od/latex.htm](http://www.cdc.gov/nchstp/od/latex.htm)



Persons depicted in these materials are models and used for illustrative purposes only.

## HEPATITIS A VACCINATION

- Recommended for all MSM
- Doses and schedules ( $\geq 19$  years)

Vaccine	Dose	Volume (mL)	Schedule (months)
HAVRIX® <sup>1</sup>	1,440 EL.U.	1.0	0, 6-12
VAQTA® <sup>2</sup>	50 U	1.0	0, 6-12
Twinrix® <sup>3</sup>	**	1.0	0, 1-2, 6-12

<sup>1</sup>inactivated hepatitis A vaccine, GlaxoSmithKline; EL.U.=Enzyme-linked immunosorbent assay units; 2-dose schedule

<sup>2</sup>inactivated hepatitis A vaccine, Merck & Co., Inc.; U=Units; 2-dose schedule

<sup>3</sup>combined hepatitis A-hepatitis B vaccine, GlaxoSmithKline; 3-dose schedule

\*\*720 EL.U. hepatitis A vaccine, 20 mcg hepatitis B vaccine

### Prevaccination susceptibility testing

- May be cost-effective, but should not be a barrier to vaccination of susceptible persons
- Vaccination of immune persons is not harmful
- If done, first vaccine dose should be given at same time serologic testing is done
- Antibody to hepatitis A virus is test of choice

### Post-vaccination testing for response

- Not recommended

## HEPATITIS B VACCINATION

- Recommended for all MSM
- Doses and schedules ( $\geq 20$  yrs)

Vaccine	Dose	Volume (mL)	Schedule (months)
ENGERIX-B® <sup>1</sup>	20 mcg	1.0	0, 1-2, 4-6
Recombivax® <sup>2</sup>	10 mcg	1.0	0, 1-2, 4-6
Twinrix® <sup>3</sup>	**	1.0	0, 1-2, 6-12

<sup>1</sup>recombinant hepatitis B vaccine, GlaxoSmithKline; 3-dose schedule

<sup>2</sup>recombinant hepatitis B vaccine, Merck & Co., Inc.; 3-dose schedule

<sup>3</sup>combined hepatitis A-hepatitis B vaccine, GlaxoSmithKline; 3-dose schedule

\*\*720 EL.U. hepatitis A vaccine, 20 mcg hepatitis B vaccine

### Pre-vaccination susceptibility testing

- May be cost-effective, but should not be a barrier to vaccination of susceptible persons
- Vaccination of immune persons is not harmful
- If done, first dose of vaccine should be administered at same time serologic testing is done
- Antibody to hepatitis B core antigen is test of choice

### Post-vaccination testing for response

- Recommended only for immunocompromised persons and for sex partners of persons with chronic hepatitis B virus infection
- Antibody to hepatitis B surface antigen is test of choice ( $\geq 10$  MIU/mL indicates protection)
- 1-2 months after 3<sup>rd</sup> dose