



May 24, 2007

Dear Colleague,

In March, 2006, CDC convened an external consultation addressing *Male Chlamydia Screening* to review the evidence and make recommendations to programs that are or will be conducting *Chlamydia trachomatis* (Ct) screening among men. The purpose of this letter is to alert STD prevention programs and their partners to the availability of the meeting report and to summarize key programmatic recommendations.

The consultation was held to respond to the need for evidence-based guidance for program areas that had decided to use a portion of their infertility prevention program resources for screening men for Ct. The consultation adopted as a premise that the primary focus of Ct screening efforts should continue to be women under the age of 26 in accordance with existing guidelines issued by CDC, US Preventive Services Task Force (USPSTF), and professional organizations such as the American College of Obstetricians and Gynecologists, the American Association of Family Physicians, and others. Consultants reviewed surveillance data on Ct in men; the literature on effectiveness, acceptability, and behavioral and demographic characteristics that could be used to target screening; cost-effectiveness; partner management; and the relative performance of nucleic acid amplification tests (NAATs) and the leukocyte esterase test (LET). Working groups examined the published evidence in these specific subject areas and compiled summary reviews, rating the quality of the evidence for various approaches and testing methodologies. The assembled consultants made recommendations from these summary reviews. A report of the meeting is posted on the CDC Web site at: <http://www.cdc.gov/std/chlamydia/ChlamydiaScreening-males.pdf>. A summary of the recommendations are below.

Summary of Recommendations

The consultants did not consider any recommendations pertaining to whether programs should adopt or expand male Ct screening programs. For state and local programs that have decided to screen, the following guidance is provided to assist with decisions about which populations of males to screen for Ct and how best to screen.

- Males attending STD clinics should be screened for Ct
- Males attending Job Corps should be screened for Ct
- Males <30 years of age entering jails should be screened for Ct
- Males with Ct infection should be re-screened at 3 months for repeat Ct
- Urine is the specimen of choice for screening asymptomatic men for Ct
- NAATs are the test of choice. LET is not recommended for screening males for Ct
- Pooling of urine specimens should be considered for Ct testing in low prevalence settings to conserve resources
- Partner services should be offered to partners of males with Ct

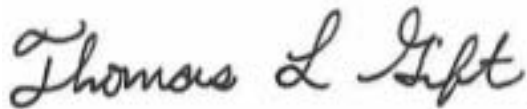
The meeting report contains additional recommendations, including those for screening in special programs, such as National Job Training Program and the military. Please review the complete report. In addition, our external consultants, in collaboration with CDC, plan to publish detailed articles surveying the evidence that was reviewed for the consultation. These publications will describe the evidence reviewed for this consultation, including information on venue-based prevalence, behavioral factors, cost-effectiveness, and testing strategies.

In summary, the Male Chlamydia Screening Meeting Report provides recommendations to guide targeted screening of males for programs that have already undertaken or are considering such an effort. These recommendations specifically do not address the broader issue of whether all sexually active men of certain ages should undergo annual screening for Ct, in parallel to efforts recommended for women, or how important it is to screen selected populations of high risk males. We realize that these are important issues for programs and practitioners that we plan to address in the future in the context of a variety of questions pertinent to Ct control in the United States. For the present, we hope that the more focused recommendations in this report will be useful to programs considering appropriate next steps for screening of males.

Sincerely,



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