February 20, 2014

Dear Colleagues,

We are only two months into the year, and CDC’s Division of STD Prevention (DSTDP) has already released several major reports and products, including the 2012 STD Surveillance Report and worked with partners to develop The Insurance Billing for Sensitive Health Services: Statutory and Regulatory Analysis using LawAtlas. This year is guaranteed to be a busy and productive one for DSTDP. But before I give you a peek into what is in store for 2014, I would like to take this opportunity to reflect on successes from 2013.

Program Accomplishments in 2013:

Published: Four Five-Year Funding Opportunity Announcements

The STD Assessment, Assurance, Policy Development and Prevention Services Funding Opportunity Announcement (STD AAPPS FOA) was published last June and awarded at the beginning of this year. The FOA is divided into two parts. Part A, STD AAPPS, emphasizes the core public health functions of assessment, assurance, and policy development and focuses on STD prevention strategies for implementing high impact, cost-effective, and sustainable STD prevention services. STD AAPPS offers greater flexibility to programs to direct resources to areas based on local needs. For example, resources can be used to support workforce development activities to create more efficient and effective STD prevention programs that can better respond to changing priorities and emerging threats. Part B of the FOA focuses on the Gonococcal Isolate Surveillance Project, or GISP. This is a collaborative project involving CDC, regional GISP laboratories, and local or state STD programs and their affiliated STD clinic(s) and local public health laboratories, which collects and analyzes strains of gonorrhea. GISP is critically important given the current state of increasing signs of antibiotic resistance in gonorrhea.

The STD Laboratory-Based Surveillance and Gonococcal Isolate Surveillance Project FOA was announced last May and awarded recently. The FOA establishes a network of regional laboratories to provide timely antimicrobial susceptibility testing by agar dilution of gonorrhea isolates. The FOA supports surveillance of antimicrobial susceptibilities and provides a scientific basis for selection of gonorrhea treatments. Emory University, The University of Alabama at Birmingham, Johns Hopkins University, The University of Washington, and The Texas Department of State Health Services were awarded for this project.

The STD Surveillance Network (SSuN) was published last February and awarded in September. This cycle of SSuN expands the Part A sentinel facility component to include family planning/reproductive health and primary healthcare clinics, in addition to categorical STD clinics to better understand chlamydia screening in these settings. Enhanced surveillance of gonorrhea cases in funded sites will continue with renewed focus on obtaining treatment information, anatomical site of infection, and care-seeking patterns on a representative sample of reported cases. Part A awardees include Baltimore, California, Florida, Massachusetts, New York City, Minnesota, Multnomah County Oregon, Philadelphia, San Francisco, and Washington State. Part B activities are projects of inherent national significance utilizing electronic health records, electronic laboratory records, or large administrative data sources such...
as Medicaid, to enhance and improve STD surveillance and outcome monitoring. Part B awardees include: California, Massachusetts, Utah, and Washington State.

Toward the end of the year, DSTDP along with CDC’s Division of HIV/AIDS Prevention published the STD/HIV Disease Intervention Services Training Centers FOA, which is designed to increase training capacity to strengthen the skills of Disease Intervention Specialists and other partner services provider staff working in or with state/local health department STD/HIV prevention programs. Awards for this FOA will be made this Spring.

*Convened: The 2014 STD Treatment Guidelines Consultation Meeting*

DSTDP hosted the STD Treatment Guidelines Expert Consultation meeting last April. More than 30 experts in the fields of STD, infectious disease, epidemiology, and medicine came together to discuss the latest developments in STD clinical preventive services for the upcoming 2014 STD Treatment Guidelines. This intense three-day meeting is just one step in developing the Guidelines. The insight and expertise provided by meeting attendees will help inform the next iteration of the Guidelines, which will be published later this year.

*Developed: The STD Treatment Guidelines Mobile App*

DSTDP had physicians, clinicians, and other healthcare providers in mind when developing the *STD Treatment (Tx) Guide*. We know that many doctors use mobile devices as part of treatment and patient care, and the STD Tx Guide app helps healthcare providers easily identify the recommended treatment for patients with STDs. STD Tx Guide combines information from the 2010 STD Treatment Guidelines as well as MMWR updates and is available for free on both Apple and Android devices.

*Created: #1 Site on CDC.gov*

Our Division’s website continues to be an important resource for people who are seeking information about STDs. With nearly 58 million page views last year, www.cdc.gov/std was the number one section on all of cdc.gov. Our Spanish home page and herpes fact sheet were among the most visited pages on the site. @CDCSTD, the Division’s Twitter feed, was also quite successful, with nearly 20,000 followers. These metrics point to how frequently people count on DSTDP for accurate, up to date information on STDs and STD prevention.

**Scientific Accomplishments in 2013:**

*Identified: Two New Gonorrhea Treatment Combinations*

Last summer, CDC and The National Institutes of Health concluded a successful clinical trial aimed at identifying new gonorrhea treatment options. The trial investigated the efficacy of injectable gentamicin in combination with oral azithromycin, and oral gemifloxacin in combination with oral azithromycin. All of these medications are approved by the U.S. Food and Drug Administration and are available in the U.S.; however, this is the first clinical trial to evaluate them as combination therapy for gonorrhea.

*Coordinated: Human Papillomavirus (HPV) Initiatives*
A DSTDP-led HPV study published in the June 2013 issue of The Journal of Infectious Diseases revealed that since the HPV vaccine was introduced in 2006, vaccine-type HPV prevalence has decreased 56 percent among female teenagers 14-19 years of age—a significant reduction. The promising study results have public health experts and clinicians looking forward to improving HPV vaccine uptake.

The Division participated in CDC’s Public Health Grand Rounds: *Reducing the Burden of HPV-associated Cancer and Disease through Vaccination in the U.S.* This session of Grand Rounds explored the burden of HPV-associated cancer and disease in the U.S. and prevention through HPV vaccination. The session also provided more insight about the HPV vaccination program and how CDC, state and local health departments, and health care providers are working together to achieve high vaccination levels and reduce the substantial burden of HPV-associated disease. A recording of the session can be viewed on CDC’s Public Health Grand Rounds Archive.

**Collaborated: Initiatives to Reduce Global Congenital Syphilis Rates**

Along with the World Health Organization, the Division co-authored the *Investment Case for the Elimination of Mother-to-Child Transmission of Syphilis: Promotion Better Maternal and Child Health and Stronger Health Systems*. The document was released last May and outlines specific actions to achieve global congenital syphilis elimination. This guidance is needed to accomplish the CDC Global Winnable Battle of preventing mother-to-child transmission of HIV and congenital syphilis as well as CDC’s Global Goal of reducing maternal and perinatal mortality.

**2014 Division Senior Leadership**

Last year, the Division welcomed three new Branch Chiefs to our Senior Leadership Staff: Jill Huppert, Kevin Karem, and Hillard Weinstock. Our current Senior Leadership comprises of the following people:

<table>
<thead>
<tr>
<th>Position</th>
<th>Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>Division Director</td>
<td>Gail Bolan</td>
</tr>
<tr>
<td>Division Deputy Director</td>
<td>Darien Ogburn</td>
</tr>
<tr>
<td>Associate Director for Global Activities</td>
<td>Mary Kamb</td>
</tr>
<tr>
<td>Associate Director for Health Equity</td>
<td>Jo Valentine</td>
</tr>
<tr>
<td>Associate Director for Management and Operations</td>
<td>Russell Cantrell</td>
</tr>
<tr>
<td>Associate Director for Policy, Planning, and External Relations</td>
<td>Raul Romaguera</td>
</tr>
<tr>
<td>Associate Director for Science</td>
<td>Sevgi Aral</td>
</tr>
<tr>
<td>Senior Advisor for Program Coordination</td>
<td>Kevin O’Connor</td>
</tr>
<tr>
<td>Epidemiology and Statistics Branch Chief</td>
<td>Gail Bolan (Acting)</td>
</tr>
<tr>
<td>Field Services Branch Chief</td>
<td>Norm Fikes</td>
</tr>
<tr>
<td>Health Services Research &amp; Evaluation Branch Chief</td>
<td>Tom Gift (Acting)</td>
</tr>
<tr>
<td>Laboratory, Reference &amp; Research Branch Chief</td>
<td>Kevin Karem</td>
</tr>
<tr>
<td>Program Development and Quality Improvement Branch Chief</td>
<td>Jill Huppert</td>
</tr>
<tr>
<td>Social &amp; Behavioral Research &amp; Evaluation Branch Chief</td>
<td>Matthew Hogben</td>
</tr>
<tr>
<td>Surveillance and Data Management Branch Chief</td>
<td>Hillard Weinstock</td>
</tr>
</tbody>
</table>

Additionally, the Division now has Special Populations Liaisons within its Office of Health Equity to assist the Division Director and other DSTDP staff in planning, implementing, and monitoring DSTDP activities aimed at reducing STD disparities among adolescent, MSM, and American Indian/Alaska Native (AI/AN) populations. These Special Populations Liaisons will also serve as DSTDP representatives on relevant workgroups and committees within the Center and Agency. The liaisons are
responsible for providing technical advice and assistance, and for facilitating intra-and inter-agency communications, as well as coordinating with external stakeholders and partners. Norman Hayes is the Division’s Adolescent liaison; David Johnson is the MSM liaison; and Scott Tulloch is the AI/AN liaison.

**DSTDP Looking Forward in 2014**

This year we are preparing for several publications and events.

*STD Awareness Month*

April is STD Awareness Month, an opportunity for individuals, doctors, and community-based organizations to address ways to prevent some of the nearly 20 million new STDs that occur in the U.S. each year. Stay tuned for ways you can participate.

*The 2014 STD Prevention Conference*

The [2014 STD Prevention Conference](#) will be held in collaboration with the 15th IUSTI World Congress and 2nd Latin American IUSTI-ALACITS Congress in Atlanta June 9-12. The conference is presented by CDC, the American Sexual Health Association, the American Sexually Transmitted Diseases Association, the International Union Against Sexually Transmitted Infections, the National Coalition of STD Directors, the Pan American Health Organization, and the Public Health Agency of Canada. This will be the first time the conference will have an international focus. Presentations, symposia, and debates will promote an interdisciplinary dialogue on best practices to enhance the quality of STD/HIV prevention and care. Registration and sponsored participant applications are available on the [2014 STD Prevention Conference Registration page](#).

*Guidelines & Recommendations*

The *Guidelines for the Treatment of Persons who Have or are at Risk for Sexually Transmitted Diseases* are being updated with the latest research and will be released later this year.

The information in the upcoming *Recommendations for the Laboratory-Based Detection of Chlamydia trachomatis and Neisseria gonorrhoeae* will replace the *Screening Tests to Detect Chlamydia trachomatis and Neisseria gonorrhoeae Infections* recommendations that were published in 2002.

*Disease Intervention Specialists (DIS) Certification Project*

In collaboration with DSTDP and NCHHSTP, NACCHO and the International Credentialing Associates completed a feasibility study exploring the development of a standardized national certification program for DIS. We hope to launch the certification project this year.

*STD Prevention Services in Primary Care Settings*

DSTDP is working with the National Association of Community Health Centers on two projects to improve STD prevention services in primary care settings. The first project is a collaboration of three Health Center Controlled Networks to demonstrate the potential for using evidence-based guidelines to present point of care clinical decision support through electronic health records to improve adherence of public health recommendations and improve population health outcomes. The second is a partnership with Fenway to increase provider provision of appropriate LGBT health services particularly for MSM.
and other sexual and gender minorities seeking care at community health centers through training, capacity building, and technical assistance.

Webinars and Learning Opportunities

Throughout the year, the Division will continue to host webinars on topics ranging from program evaluation to useful information about third party billing; and has partnered with the American Sexually Transmitted Diseases Association to host the quarterly STD Prevention Science Series. Information about these webinars is available at the DSTDP Webinars Page.

As you can see, the Division has a lot planned for this year. I will keep you abreast of these activities, and hope to see you in Atlanta for the 2014 STD Prevention Conference this summer!

Sincerely,

Gail Bolan, MD
Director, Division of STD Prevention
National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention
U.S. Centers for Disease Control and Prevention