

epiConnections

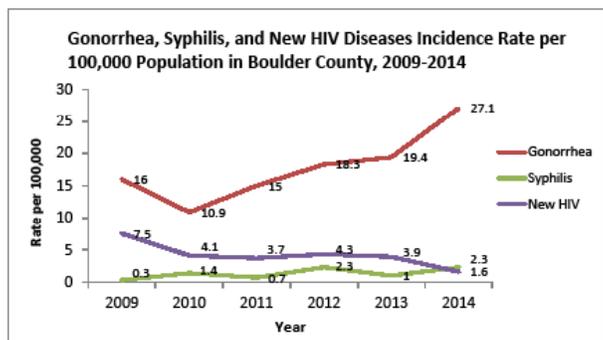
A BIMONTHLY NEWSLETTER OF THE COMMUNICABLE DISEASE DIVISION OF BOULDER COUNTY PUBLIC HEALTH

Some Sexually Transmitted Disease (STD) Rates on the Rise in Boulder County

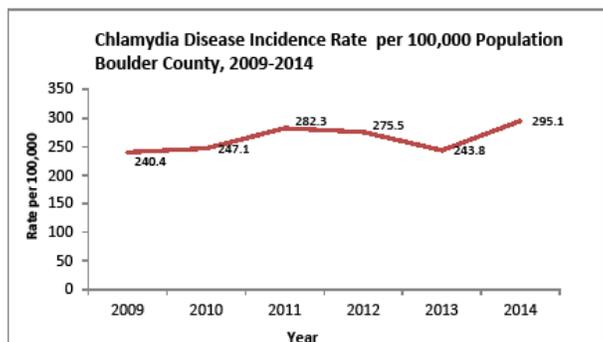
Surveillance Summary, 2014

Trends in reportable STD's, including chlamydia and gonorrhea, have been increasing nationally, in Colorado, and in Boulder County since 2009. In Boulder County, rates of gonorrhea per 100,000 population almost doubled; from 16 in 2009 to 27 in 2014 (see Figure 1). Nationally, rates of syphilis have remained flat, although this trend masks a decrease in cases among women, along with a concurrent increase among men who have sex with men. In Boulder County, syphilis rates increased from 0.3 in 2009 to 2.3 per 100,000 in 2014. Figure 2 shows rising chlamydia rates in Boulder County. Between 2009 and 2014, rates of chlamydia increased from 240 to 295 per 100,000. The increase may be due, in part, to improved reporting, more sensitive tests, and increased screening.

2014 marked the lowest rate of reported HIV infections in Boulder County since the HIV/AIDS epidemic began; five new cases were reported last year.



This decrease does not mirror national and state trends, which have remained flat. Some of this declining trend may be attributed to successful prevention efforts that target people who inject drugs and men who have sex with men (see adjacent article). Although these programs are successful in reaching risk groups and reducing transmission, HIV infections in Boulder County disproportionately affect minority groups. In 2013 in Boulder County, non-



Hispanic black individuals were affected at a much higher rate than the rest of the population (74.3 per 100,000); Hispanics were affected at a rate of 9.4 per 100,000; and non-Hispanic whites had the lowest rate at 2.5 per 100,000. In 2014, infections continued to disproportionately affect minority groups, with non-Hispanic blacks impacted at a rate of 37.2 per 100,000, compared to a rate of 1.6 among white, non-Hispanics. No cases were identified among Hispanics in 2014, but this may be due, in part, to poor detection of cases due to lack of funding for targeted testing services.

STD Summary, continued page 2

Services and Strategies Available to Improve Sexually Transmitted Disease Outcomes

The Atlas Program at Boulder County AIDS Project (BCAP) provides services to gay and bisexual men. Visit atlas.bcap.org or call 303-444-6121. Show your support of HIV awareness and prevention at its variety show, "Big Top: A Springtime Circus Extravaganza" on Sunday, April 26, from 5:00-7:30 p.m. at eTown Hall, 1535 Spuce St., Boulder.

People who inject drugs can get harm reduction education and supplies to prevent the transmission of HIV and viral hepatitis from the Boulder County Public Health Works Program. The program also offers training to prevent overdose with naloxone. To refer a patient call 303.413.7500. For more information, visit www.BoulderCountyWorks.org.

The Centers for Disease Control and Prevention (CDC) website www.cdc.gov/std/treatment/ contains many resources, including the 2010 Sexually Transmitted Disease (STD) Treatment Guidelines and an STD treatment guideline app for mobile devices, which includes a guide to taking a sexual history. A valuable resource for reducing the burden of chlamydia and gonorrhea is Expedited Partner Therapy (EPT). EPT is a practice in which prescriptions or medications are provided to patients to take to their partners without a health care provider first examining the partners. This strategy has been found to prevent reinfection and is supported by the Colorado Board of Medical Examiners and is considered permissible in the Colorado.

Improving STD Outcomes, continued page 2



BOULDER COUNTY
PUBLIC
HEALTH

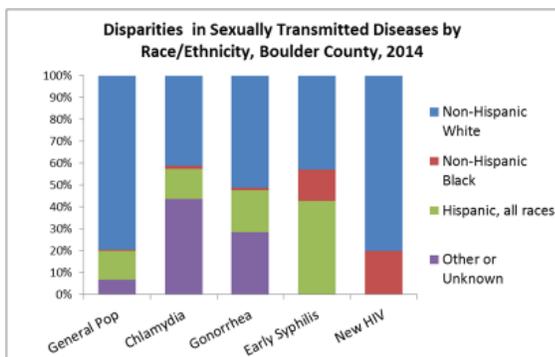


Business Hours 303.413.7500 | After Hours 303.413.7517
Fax 303.413.7526 | BoulderCountyHealth.org
3450 Broadway, Boulder, CO 80304

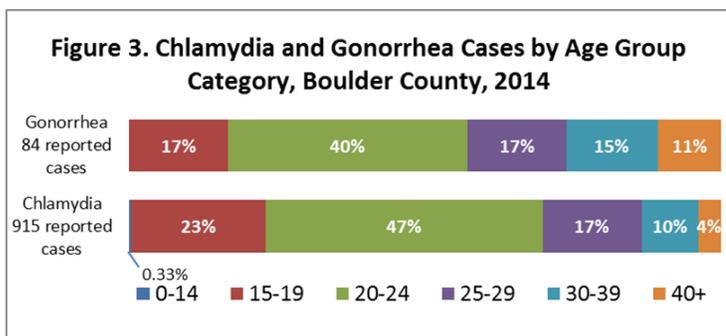
Communicable Disease Epidemiology Program
Emergency Management Program
HIV/STI Outreach Program
Immunization Program
TB Program

STD Summary, continued from page 1

As seen in Figure 2, health disparities exist by race/ethnicity for all reportable STDs. While the majority of the Boulder County population (80%) is non-Hispanic white, the majority of chlamydia, gonorrhea, and syphilis infections are among the Hispanic and Other/Unknown race/ethnicity categories. Over 50% of syphilis cases affected black and Hispanic individuals, yet they represent only about 15% of the population. Identified HIV cases disproportionately impacted the non-Hispanic black population.



As seen in Figure 3, the majority of reported chlamydia and gonorrhea infections occur among young people, with the largest percentage of cases occurring among people ages 20-24 years.



Submitted by: Carol Helwig, MPH
 Communicable Disease Epidemiology Coordinator
chelwig@BoulderCounty.org

Practicum for Health Care Providers

TB Update and Tuberculin Skin Testing

Thursday, June 4, 2015
12:30 – 5:00 p.m.

Denver Health, 2nd Floor Auditorium
 Corner of 6th Ave. & Bannock St., Denver

Cost is \$30

Register at: <http://goo.gl/j6NNRe>

For More Information
 Kerri McClory: 303-692-2638 or kerri.mcclory@state.co.us,
 Carolyn Bargman: 303-602-7243 or cbargman@dhha.org,
 303-413-7516 or cbargman@bouldercounty.org

epiEye

A Look Outside Our Community
 and Around the World

Think Measles When Evaluating Rash

The U.S. is currently experiencing the most widespread outbreak of measles since it was eliminated in this country in 2000. As of March 13, 2015, the CDC reports that 176 people from 17 states (including 1 case from Colorado) were reported to have measles. Most of these cases (74%) are part of an outbreak related to a California amusement park, although 3 other unrelated outbreaks are occurring in Illinois, Nevada, and Washington.

Measles is still common in many parts of the world, including countries in Europe, Asia, the Pacific, and Africa. Measles continues to rapidly spread in communities in the U.S. where groups of people are unvaccinated. Providers should ensure that all patients are up-to-date on measles, mumps and rubella (MMR) vaccine, as well as all other vaccines, especially for those who travel internationally.

Public health officials recommend that health care professionals consider measles when evaluating patients with febrile rash and ask about a patient's vaccine status, recent travel history, and contact with individuals who have febrile rash illness.

To report suspect or confirmed cases of measles, contact the BCPH Communicable Disease Epidemiology Program at 303-413-7500, or after hours at 303-413-7517.

Kylie Chilton, MPH, CHES
 Communicable Disease Epidemiologist

Improving STD Outcomes, continued from page 1

The CDC website www.cdc.gov/hiv/prevention/research/prep/ contains information and guidelines for prescribing Pre-Exposure Prophylaxis (PrEP) to prevent HIV infection. When taken consistently, PrEP can reduce the risk of HIV infection in people who are at high risk by up to 92%.

Save the Date: On Thursday, October 1, 2015, Dr. Mark Thrun, Director, HIV/STD Prevention and Control, Denver Public Health; and Associate Professor, Division of Infectious Diseases, University of Colorado Denver, will be the keynote speaker for the BCPH Communicable Disease Seminar and Supper. Registration information will become available closer to the date.

Submitted by: Carol Helwig, MPH
 Communicable Disease Epidemiology Coordinator
chelwig@BoulderCounty.org