

## Minnesota STD cases decline in 2009 according to health department

Written by Sunny  
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### **Chlamydia cases remain stable, syphilis and gonorrhea cases drop.**

The total number of reportable sexually transmitted diseases (STDs) in Minnesota dropped slightly to 16,702 in 2009, a 5 percent drop from the previous year, state health officials reported today.

According to a new report from the Minnesota Department of Health (MDH), there were 17,649 cases reported in 2008 and 17,057 cases in 2007. Reportable STDs in Minnesota include chlamydia, gonorrhea, syphilis, and chancroid. □□

"Chlamydia was Minnesota's number one reported STD this past year with 14,186 cases," said Peter Carr, manager of the STD and HIV Section at MDH. "This is almost identical to last year's totals where we saw 14,350 chlamydia cases reported." □□

MDH data show that geographically, chlamydia occurs statewide with about 1 in 3 cases occurring in the Greater Minnesota areas. Nearly 70 percent of cases occurred in teens and young adults aged 15 to 24. □□

Untreated chlamydia can lead to infertility in some women and, in rarer cases, even among men. An infected woman can pass the infection to her newborn child, causing premature delivery, infant pneumonia and serious eye infections leading to blindness. About 3 of 4 females and 1 of 2 males will show no symptoms once infected. Routine testing, even in the absence of symptoms, is the only way to detect these cases. □□

Chlamydia screening guidelines from the Centers for Disease Control and Prevention (CDC) call for health providers to provide annual screenings of all sexually active women aged 25 and younger and for women older than 25 that have risk factors such as a new sexual partner. Some clinics have incorporated these screening guidelines into their electronic patient records so clinicians are alerted when it is time to provide the screenings.

Gonorrhea remained the second most commonly reported STD in Minnesota with 2,302 cases reported in 2009 representing a 24 percent decrease compared to 2008. Nationally, preliminary reports are showing a 21 percent drop in gonorrhea cases in 2009. □□"

The drop in gonorrhea cases may be a positive sign that screening, partner follow-up and treatment strategies are making an impact," said Carr.

Health officials emphasize that it is important to remain diligent in identifying and treating gonorrhea cases. Untreated gonorrhea can also lead to infertility in both men and women. Gonorrhea can spread to organs and joints and these conditions can be life threatening. Gonorrhea can be passed to newborns during childbirth causing blindness if the infant is not treated.

There was a 28 percent decrease in the number of early syphilis cases reported in 2009, while the percentage of those co-infected with syphilis and HIV rose by 5 percent in 2009. There is a two- to five-fold increased risk of getting HIV infection when syphilis is present.

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For syphilis, MDH data show that 117 early syphilis cases were reported in 2009 compared to 163 cases in 2008. New infections continued to be centered within the Twin Cities metropolitan area. The percentage of those co-infected with syphilis and HIV rose from 40.1 percent in 2008 to 45.3 percent in 2009. □□

Among the early syphilis cases, nearly 91 percent (106 cases) were males with a vast majority of cases occurring among men who have sex with men (MSM). Nearly 72 percent (84 cases) were among whites, 17 percent (20 cases) were among African Americans and about 7 percent (8 cases) were among Latinos. There was one case among American Indians and one case among Asians.

Untreated syphilis can lead to blindness, mental illness, dementia and death. Testing and diagnosing the disease in its early stages is critical.

Health officials noted that it is important for health providers to provide more syphilis screenings to their sexually at-risk clients. Early syphilis—infection of less than one year—is the most infectious stage of the disease. CDC recommends that MSM patients be tested at least annually. For those at highest risk with multiple partners, especially if they are HIV positive, they recommend testing as often as every three months.

"STDs are preventable," said Carr. "To help prevent getting or spreading STDs, consider delaying the start of sexual activity and limiting the number of sexual partners; get tested, know your STD status and that of your partners, practice safer sex at all times, and don't share needles for drug use, piercing or tattooing. Getting tested for STDs each year is very important for sexually active persons - even without symptoms. And, if infected, get their partners in for testing."

Health providers are responsible for making reasonable attempts to ensure treatment of the sex partners of their STD infected patients. A new approach called expedited partner therapy (EPT) allows physicians in Minnesota to dispense prescriptions or medications through their patients who have tested positive for chlamydia or gonorrhea to treat their sexual partners who are uninsured, unwilling or unable to get to a clinic.

The MDH Partner Services Program provides follow-up for people with HIV, syphilis, and those with untreated chlamydia and gonorrhea as well as for their sexual partners who may need examination and treatment. The program also provides follow-up to chlamydia and gonorrhea infected patients referred from clinics who have not been treated. Partner referral cards are available to clinics from the MDH to help clients notify their partners anonymously.

To help create awareness about STDs in Minnesota, MDH has made available educational resources online on behalf of National STD Awareness Month (April). MDH will continue to support chlamydia and gonorrhea screening clinics serving areas with the highest rates of infection.

The complete STD Surveillance Report – 2009, STD fact sheets, and information about National STD Awareness Month (April) can be found on the MDH Web site at: <http://www.heal>

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[th.state.mn.us/std](http://th.state.mn.us/std)

To learn more about EPT in Minnesota, visit the MDH Web site at: <http://www.health.state.mn.us/ept/>

The new CDC treatment guidelines for STDs are available online at:  
<http://www.cdc.gov/STD/treatment/default.htm>

*For confidential information about the prevention, testing locations and treatment of STDs, call the Minnesota Family Planning & STD Hotline, toll free, at 1-800-78-FACTS (voice or TTY), 651-645-9360 (Metro area).*