

# Increasing Annual Syphilis and Rectal Gonorrhea Screening in Men Who Have Sex With Men (MSM) at a Federally Qualified Health Center with an LGBT Focus in Illinois, 2015

Marguerite Smith<sup>1</sup>, Richard Zimmerman<sup>1</sup>, Danucha Brikshavana<sup>1</sup>, Daniel Pohl<sup>2</sup>, Kristin Keglovitz<sup>2</sup>, Chad Hendry<sup>2</sup>, Laura Rusie<sup>2</sup>

<sup>1</sup>Illinois Department of Public Health, Springfield, IL; <sup>2</sup>Howard Brown Health, Chicago, IL

## Background

Current screening recommendations state that men who have sex with men (MSM) should be screened annually for syphilis and for rectal gonorrhea if they have receptive anal intercourse.<sup>3</sup> As part of a Centers for Disease Control and Prevention Targeted Evaluation Plan, the Illinois Department of Public Health STD Program collaborated with Howard Brown Health (HBH) to increase annual syphilis and rectal gonorrhea screening among MSM.

### CDC Recommended Annual Screenings for Men Who Have Sex With Men<sup>3</sup>

- HIV serology, if HIV status is unknown or negative
- Syphilis serology
- Urethral testing for *N. gonorrhoeae* and *C. trachomatis* in men who have had insertive intercourse during the preceding year
- Rectal testing for *N. gonorrhoeae* and *C. trachomatis* in men who have had receptive anal intercourse during the preceding year
- Pharyngeal testing for *N. gonorrhoeae* in men who have had receptive oral intercourse during the preceding year

## Methods

We surveyed ten primary health care providers at HBH to determine facilitators and barriers to annual screening for syphilis and rectal gonorrhea in MSM clients. Qualitative analyses of survey results were performed to identify common themes. HBH staff presented screening recommendations and screening data to providers at staff meetings. Descriptive statistics were used to compare screening data among gay, bisexual, and queer (GBQ) cis-men from 2014 compared to 2015.

## Results

From the survey we found that 50.0% of providers suggested adding a prompt in their electronic medical record system or include syphilis screening when ordering annual labs to increase annual syphilis screening. Providers stated the best ways to increase annual rectal gonorrhea screening were to educate patients about rectal testing and to have better methods to ask patients about their sexual practices (n=5). Other low cost solutions were found to increase screening practices, such as, ensuring testing supplies and labels were in each patient exam room. There was a 20.2% increase in GBQ cis-men that were seen at HBH from 2014 to 2015 (n=4,086 and n=4,911). Screening increased from 2014 to 2015 for both annual syphilis (61.6% to 73.7%) and annual rectal gonorrhea (29.2% to 46.0%).

### Most Common Survey Responses of Select Questions by Primary Care Providers at Howard Brown Health, 2015

Question	Most Common Responses
What barriers for annual syphilis screening in your MSM clients have you encountered?	Patients feel they are not at risk or not having symptoms (n=3)
Do you have any ideas on how to make annual syphilis screening in MSM clients you see easier?	Normalize syphilis testing by making it part of annual labs (n=2)
What would help you increase annual syphilis screening in MSM clients you see?	EMR changes (n=3) and include syphilis testing as part of annual labs (n=2)
What barriers for rectal gonorrhea screening in your MSM clients have you encountered?	Patients reluctant to have invasive swab collected or not prepared for an exam "there" (n=5)
Do you have any ideas on how to make rectal gonorrhea screening in MSM clients you see easier?	Self-collected swabs (n=3) and normalize rectal testing (n=3)
What would help you increase rectal gonorrhea screening in MSM clients you see?	Patient education about rectal testing (n=3) and best ways to ask about sexual practices (n=2)

### Annual Syphilis and Rectal Gonorrhea Screening at HBH among cis-gendered Men Who Have Sex With Men, 2014-2015

	2014		2015	
	N	%	N	%
Patients annually screened for syphilis	2,517	61.6	3,620	73.7
Patients annually screened for rectal gonorrhea	1,195	29.2	2,257	46.0
Total cis-MSM Patients	4,086	---	4,911	---

## Conclusions

An increase in annual syphilis and rectal gonorrhea screening among MSM at HBH occurred from 2014 to 2015. Several factors may have contributed to this increase including the administration of a survey that identified ways to improve annual screening and raised awareness of current screening data at HBH. Additional activities that may have contributed to this increase in screening are HBH staff presentations to providers, providers brainstorming ideas on how to improve the Electronic Medical Record (EMR) to prompt for annual screening reminders, and ensuring patient rooms were set up with the appropriate supplies for syphilis and rectal gonorrhea screening.

### Reported Early Syphilis and Gonorrhea Cases by Year, Illinois, 2011-2015

