ROLE OF PHARMACISTS IN STD PREVENTION

TUESDAY, FEBRUARY 11:
WELCOME

Anthony Pudlo, PharmD, MBA
Vice President, Professional Affairs
Iowa Pharmacy Association
PRESENTERS

Helen Eddy, RPh, MBA
Director
Polk County Health Department

Anthony Pudlo, PharmD, MBA
VP, Prof. Affairs
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Upon successful completion of this knowledge-based course, pharmacists and pharmacy technicians should be able to:

1. Describe the current trends in sexually transmitted infections in Iowa and the need for the profession to intervene.
2. Explain the barriers to appropriate intervention with this growing public health concern.
3. Describe how to appropriately provide expedited partner therapy through the new Iowa Board of Pharmacy regulations.
4. Explain how provision of expedited partner therapy would occur in your practice setting.
STD EPIDEMIC
OCTOBER 2019: CDC STATES RECORD HIGH STD’S THREATEN MILLIONS OF AMERICANS

STDs IN THE UNITED STATES

CHLAMYDIA 1,758,668
TOTAL CASES IN 2018
2.9% INCREASE SINCE 2017

GONORRHEA 583,405
TOTAL CASES IN 2018
5.0% INCREASE SINCE 2017

SYphilIS 115,045
TOTAL CASES IN 2018
13.3% INCREASE SINCE 2017

CONGENITAL SYphilIS 1,306
TOTAL CASES IN 2018
39.7% INCREASE SINCE 2017

PRIMARY AND SECONDARY SYphilIS 35,063
TOTAL CASES IN 2018
14.4% INCREASE SINCE 2017

STDs tighten their grip on the nation’s health as rates increase for a fifth year.

Source: U.S. Centers for Disease Control and Prevention
STD EPIDEMIC IN IOWA

Chlamydia Cases in Iowa 2008-2018

Source: Iowa Department of Public Health
STD EPIDEMIC IN IOWA

Gonorrhea Cases in Iowa 2008-2018

Source: Iowa Department of Public Health
STD EPIDEMIC IN IOWA

Syphilis Cases in Iowa 2008-2018
(All stages/Non-Congenital)

Source: Iowa Department of Public Health
HIV Disease in Iowa 2008-2018*

*Diagnoses reflect all persons diagnosed with HIV disease (including AIDS) for the first time who were residents of Iowa at time of diagnosis.

Source: Iowa Department of Public Health
STD EPIDEMIC IN POLK COUNTY

Source: Polk County Health Department
ALL POLK COUNTY STD’S, 2012-2018

<table>
<thead>
<tr>
<th>Year</th>
<th>HIV Diagnoses</th>
<th>Syphilis Cases</th>
<th>Gonorrhea Cases</th>
<th>Chlamydia Cases</th>
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</thead>
<tbody>
<tr>
<td>2018</td>
<td>34</td>
<td>71</td>
<td>1,260</td>
<td>2,835</td>
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<td>2017</td>
<td>29</td>
<td>107</td>
<td>1,200</td>
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<td>2016</td>
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<td>2014</td>
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<td>2013</td>
<td>30</td>
<td>67</td>
<td>1,000</td>
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</tr>
<tr>
<td>2012</td>
<td>37</td>
<td>61</td>
<td>950</td>
<td>1,950</td>
</tr>
</tbody>
</table>

Source: Polk County Health Department
WHO IS AT RISK? EVERYONE.

- STD’s are present in all age groups and demographics
- Some groups are at higher risk
  - Youth ages 15-24
    - Account for 55-60% of chlamydia and gonorrhea cases.
    - Young women are biologically susceptible to STD’s
  - Communities of color
    - African Americans, Native Americans, Hispanics
  - Men Who Have Sex with Men (MSM)
INFLUENCES ON STD EPIDEMIC

• Sex is a Taboo Topic
  • Lack of sex education, open dialog

• Sexual culture in media

• Risky sexual behavior
  • Drug and alcohol use
  • Hook-up apps and anonymous partners
  • Unforeseen PReP impacts

• Health Inequity: poverty, racism, transportation, access to services
CONSEQUENCES OF UNTREATED STD’S

• Pelvic Inflammatory Disease
• Infertility
  • CDC estimates of over 20,000 cases per year due to undiagnosed STD’s
• Stillborn or developmentally-delayed babies (syphilis)
• Brain damage, blindness, joint and organ damage (syphilis)
• Death

Source: US Centers for Disease Control and Prevention
ADDRESSING THE STD EPIDEMIC

• Increase testing by all providers
  • “I don’t see STD’s in my practice.”

• Increase use of sexual history to determine testing
  • Ask about sexual practices: oral or anal sex

• Increase use of extra-genital testing and self-collection
  • Use pharyngeal and rectal swabs based upon sexual history
  • With instructions, patients can effectively swab themselves
    • Reduces stigma and fear
ADDRESSING THE STD EPIDEMIC

- Improve reporting by providers
  - Iowa is a dual-reporting state: test results and treatment
- Treat STD’s per CDC guidelines
  - Download the **CDC STD Tx App**
- Insist on re-testing in 90 days
- Promote safe sex practices: condoms, PReP, PEP
ACTION ITEM: CDC TX APP (APPLE STORE/GOOGLE PLAY)
CDC TREATMENT GUIDELINES

• Chlamydia
  • 1 gram of azithromycin, orally (preferred)
  • 100 mg of doxycycline twice daily for 7 days –or–
  • 200 mg of doxycycline once daily for 7 days

• Gonorrhea
  • 250mg of IM ceftriaxone AND 1 gram of azithromycin, orally

Source: US Centers for Disease Control and Prevention
PHARMACIST’S ROLE

• Knowledge of the epidemic and influences
• Knowledge of local STD testing locations
• Free condom locations and availability in your community
  • https://www.myiacondoms.org/
• Evaluate the accessibility of condoms in your pharmacy
• Enhance your counseling for chlamydia
  • Standard treatment is 1 gram of Azithromycin
HOW DO YOU HAVE THIS CONVERSATION?

• Think about how the patient feels
  • Embarrassed
  • Worried about confidentiality, cost

• Find a truly private location to have the conversation.

• Turn on the empathy, set aside your bias.
  • Did your doctor tell you what this medication is for?
  • This medication is commonly used to treat a very common infection, chlamydia
  • I care about your health. There are some things that I need you to do to make sure that you get better and do not get the infection again.
CHLAMYDIA COUNSELING

• It is important that all of your sexual partners in the prior 60 days are tested and treated.
• Do not have sex of any kind for 7 days.
• If your sexual partners have tested positive for a STI, you must not have sex with them until 7 days after they have been treated or you could be re-infected.

• You need to be re-tested for chlamydia in 90 days.
• Low cost STD testing is available at: [fill in the blank]
IT’S VERY HARD TO GET PARTNERS IN TO BE TEST AND TREATED

• Time is a factor for partners.
• Patients don’t want to have that conversation with their partners.
• Patients may not know the names or want to share the names of their partners.
• Health departments, because of the volume of cases, primarily follow up with partners for HIV, syphilis and some gonorrhea.
• Abstaining from sex for 7 days can be difficult.

Reinfection rate is 20%.
THERE’S A SOLUTION: EXPEDITED PARTNER THERAPY (EPT)

- EPT is the clinical practice of treating the sex partners of patients diagnosed with chlamydia or gonorrhea by providing prescriptions or medications to the patient to take to his/her partner without the health care provider first examining the partner.
THERE’S A SOLUTION:
EXPEDITED PARTNER THERAPY (EPT)

Source: US Centers for Disease Control and Prevention
HISTORY OF EPT IN IOWA

• Iowa Code 139A.41 (effective 7/1/2008)

“...a physician, physician assistant, or advanced registered nurse practitioner who diagnoses a sexually transmitted chlamydia or gonorrhea infection in an individual patient may prescribe, dispense, furnish, or otherwise provide prescription oral antibiotic drugs to that patient’s sexual partner or partners without examination of that patient’s partner or partners.”
HISTORY OF EPT IN IOWA

• IPA Policy 18-U2
  • IPA supports pharmacist-provided expedited partner therapy as a method of preventing and treating sexually transmitted infections when a patient’s partner(s) are unable or unwilling to seek medical care.
  • IPA supports collaboration with the department of public health and the board of pharmacy to provide regulatory guidance on expedited partner therapy for a pharmacy to dispense medication, provide appropriate counseling, and recommend monitoring.
HISTORY OF EPT IN IOWA


• BOP Approves Notice for Intended Action – Sept. 10, 2019

• BOP Approves to Adopt & File – Jan. 8, 2020

• Next Steps: ARRC Approval – early March 2020
PROPOSED BOP REGULATIONS

• 6.10(1): Required Information on Rx Label – Name of Patient
  • EPT prescriptions would be exempt
• 6.13(4): Only required to maintain information about the patient who is known to the pharmacy
• 7.12: Drugs in the Emergency Department
  • Name of patient is exempt for EPT prescriptions
• 8.19(1)a: Written, electronic, and faxed prescriptions
  • EPT prescriptions exempt (similar to issuing epi and naloxone)
• 8.19(9): New subrule
  • Describes intent of EPT
  • Follows definition used in Iowa Code

• 8.21: Prospective drug use review
  • Pharmacist is exempt from this process for EPT patients

• 18.3(4): Central fill label requirements
  • EPT prescriptions would be exempt
HOW DOES EPT WORK IN PRACTICE

- EPT Rx issued by phone, electronic, or paper media
- Rx is legal with or without the partner demographic or insurance information
- Rx without partner identifiers
  - First name: “Expedited”
  - Last name: “Partner”
  - Gender: use available values
  - Date of Birth: if known, use actual DOB, or use 1/1/1901
  - Street: “Pharmacy Should Request Address”
  - City, State, Zip: default to City, State, Zip of prescriber or the pharmacy
HOW DOES EPT WORK IN PRACTICE

• Insurance billing
  • If no partner identification, billed as cash or discount card
    • Consider SafeNetRx’s Medication Discount Card
      • [https://safenetrx.org/medication-discount-card/](https://safenetrx.org/medication-discount-card/)
  • If partner identification, billed through third party insurance if available

• Pharmacy workflow
  • Where do you place the EPT prescription when ready?
  • What if the EPT prescription is never filled/picked up?
DO YOUR DUE DILIGENCE

- Potentially inappropriate regimens
  - No need for refills on these prescriptions
  - Excessive quantities
  - EPT prescription written under the index patient’s name

- Appropriate counseling
  - Successful use of treatment regimen
  - Abstain from sexual intercourse for seven days
  - Provision of medication information to index patient
OTHER CONSIDERATIONS

• Understand free testing locations
  • Community-based pharmacy initiative with IDPH

• Free condom distribution
  • https://www.myiacondoms.org/

• TelePrEP program
  • https://www.prepiowa.org/teleprep

• Vaccinations
  • HPV
  • Hepatitis A/B
RESOURCES

• CDC Youth STI Infographic

• CDC STD 2019 Report

• Polk County Health Department Youth Sexual Health Education
  • YouTube Channel: [Sex n’ Stuff](https://www.youtube.com/channel/UCd2G8QZ-x3z0GvXiQxJl1gQ)

[Polk County Health Department logo]
[IPA logo]
QUESTIONS

Helen Eddy, RPh, MBA
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Polk County Health Department

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Iowa Pharmacy Association
THANKS FOR ATTENDING!

JOIN US TUESDAY, MARCH 10: TBD

Questions? Contact IPA at IPA@iarx.org or 515-270-0713