

A Pilot Study of Self-collected Pharyngeal Testing for Chlamydia and Gonorrhea in the Setting of COVID19 Restrictions

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Background

Given that many youth and young adults utilize multiple orifices during sexual activity, testing for STIs from multiple anatomical sites can increase rates of diagnosis. However, during the COVID pandemic, obtaining oral swabs by clinical staff was deemed an unacceptable COVID transmission risk and was discontinued in our clinic. To circumvent this obstacle to diagnosis, clinic staff developed a workaround of obtaining patient-collected pharyngeal swabs for STI testing. This abstract reviews the results of this pilot intervention.

Methods

Patients presenting to an urban youth family planning/STI clinic who desired STI testing and ever engaged in oral sex were offered pharyngeal testing for chlamydia (CT) and gonorrhea (GC). Patients were instructed on how to obtain an oral sample, and subsequently sent outside of the clinic to obtain their individual sample. Chart review was conducted by clinic staff of a four month period during which this protocol was in place, and the following variables were collected: gender, sexual orientation, race/ethnicity, and STI testing results by anatomic site. Simple descriptive statistical analyses were used.

Results

- 417 patients received a GC/CT test from ≥ 1 anatomical site, with 83 patients having ≥ 1 positive result.
- All pharyngeal samples were self-collected.
- 10 patients were positive for GC/CT from throat samples only (12% of positive tests).
Patient demographics:
 - 6 (60%) female, 3 (30%) male, 1 (10%) transgender FTM;
 - 4 (40%) "straight", 3 (30%) "bisexual", 2 (20%) "gay", 1 (10%) did not disclose;
 - 4 (40%) African-American, 4 (40%) white, 1 (10%) multiracial, 1 (10%) "Filipino"; and 3 (30%) Hispanic.
- For comparison, of the overall subsample of patients with positive GC/CT results, patient demographics were:
 - 58% female, 41% male, and 1% transgender (FTM);
 - 65% "straight", 11% "bisexual", 19% "gay", 5% did not disclose;
 - 45% African-American, 34% white, 12% unknown/other, 8% multiracial, 1% "Filipino"; and 30% Hispanic.
- 19 patients were positive for GC/CT from the throat *and* either rectum and/or urine/vagina/endocervix (23% of positive tests).

Conclusion

Our experience demonstrates that obstacles created by the COVID crisis can be circumvented with creative strategies. We were able to pick up 12% and 23% of total infections by self-collected pharyngeal swabs in throat only and throat plus other sites, respectively.

