

## New Cost Effectiveness Study Shows:

# A Chlamydia Opt-Out Screening Strategy is Effective and Improves Health Outcomes at a Lower Net Cost than Current Testing

A 2016 study by researchers from the Centers for Disease Control and Prevention states that only **about 38% of sexually active women (15-24) that should be screened for chlamydia actually get tested**. A risk-based screening approach presents a barrier to improving screening rates.



### BARRIER TO SCREENING

The risk-based screening approach requires taking the patient's sexual history. Yet patients are often hesitant to disclose sexual history.

The study suggests a universal screening approach could be both more effective and less costly than risk-based screening. Universal screening could lead to:

**↓55%** Reduction in CT prevalence

**↓37%** Reduction in CT sequelae\*

**↓20%** Reduction in total cost\*\*

***"...this study suggests that implementation of an Opt-Out Testing Strategy to screen young women for chlamydia during clinical encounters might substantially increase screening coverage of sexually active young women, and be cost saving."***

Owusu-Edusei K, et al. Cost-Effectiveness of Opt-Out Chlamydia Testing for High-Risk Young Women in the U.S. Am J Prev Med. 2016;51(2):216-24. doi: 10.1016/j.amepre.2016.01.007.

\*Sequelae refers to Pelvic Inflammatory Disease in women and epididymitis in men.

\*\*All costs were calculated from the societal perspective and included direct medical costs for testing, treatment, and indirect costs for lost productivity.