

CSI-Netherlands 2007 - 2010

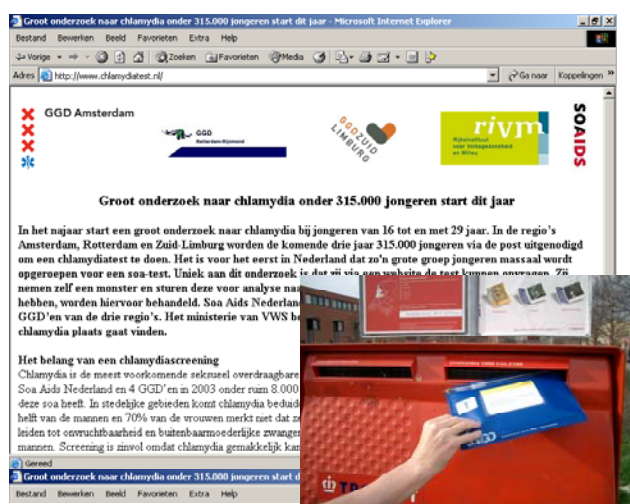
A large scale internet-based Chlamydia Screening Implementation Programme

The CSI project group: JEAM van Bergen¹, EM de Feijter², HM Götz³, O de Zwart⁴, HSA Fennema⁵, JA van den Hoek⁶, CJP A Hoebe⁷, E Brouwers⁸, ELM op de Coul⁹, IVF van den Broek¹⁰

^{1,2}STI AIDS Netherlands, ^{3,4}Rotterdam Public Health Service, ^{5,6}Health Service Amsterdam, ^{7,8}Public Health Service South Limburg, ^{9,10}National Institute for Public Health and the Environment (RIVM)

Objectives: Chlamydia trachomatis (Ct) is the most prevalent bacterial STI in the Netherlands. Previous research (PILOT Ct) showed that Ct prevalence was highest in very high urban areas (3,2%) and low in rural areas (0,6%). It is estimated that 60.000 Ct infections annually occur in the Netherlands and only about 1/3 of these infections are detected and treated. The increase in Ct infections seen in the last 5 years indicate the need for a more active approach. The Ministry decided to start a screening intervention in 3 regions.

Methods: The Chlamydia Screening Implementation (CSI) Project is a large-scale intervention, piloting sustainable, selective, systematic and internet-based Chlamydia screening during 2007-2010. All 16-29yr citizens of Amsterdam, Rotterdam and a selection in region South-Limburg (in total 315.000 persons) are invited two times to participate in home-based screenings if they are sexually active and match a certain risk-profile (in lower prevalence area S-Limburg). Eligible persons are retrieved from the population register and receive a letter either from the Municipal Health Service or from the GP. Via the internet site www.chlamydiatest.nl they will be able to get information, do pre-test interviews on-line, order test materials (postal test-kits using urine/vaginal swabs to be send for NAAT-testing), view instruction video's, get results and download treatment-guidelines for their healthcare provider. Also partner treatment and counselling will be included at the website. The Municipal Public Health Services (MHS) implement the screening; STI AIDS Netherlands coordinates the project. The screening will be operational from 2008 onwards.



Results: the large scale design of this programme makes it possible to offer systematic selective screening to the total eligible population in the region. It provides not only individual benefits (early detection and treatment to prevent complications) but also enables studying impact of screening on population prevalence (network effect).

Conclusion: the results will be leading for the decision if and how a national roll-out of Ct screening in the Netherlands will be offered in the near future. Elaborate evaluation of

this implementation project will be done by the Dutch Infectious Disease Centre (see oral presentation).

The project is funded by Ministry of Health/ZonMw.

