



**To:** Sexual Health Providers, Local Health Departments, Family Planning Providers, Hospitals, Emergency Rooms, Community Health Centers, College Health Centers, Community-Based Organizations, and Internal Medicine, Family Medicine, Infectious Disease, OB/GYN, and Primary Care Providers

**From:** New York State Department of Health, AIDS Institute

**Date:** February 5, 2021

**HEALTH ADVISORY: GONORRHEA INCREASES IN NEW YORK STATE COUNTIES OUTSIDE OF NEW YORK CITY**

- Reported gonorrhea diagnoses increased by 40% from 2019 to 2020.
- Increases are higher among females than males (54% increase among females compared to 29% among males from 2019 to 2020).
- Increases have occurred among all racial and ethnic groups. Of reported diagnoses in 2020, 47% were among non-Hispanic Black individuals (Age-adjusted rate: 673.2 per 100,000 population), while 22% were among non-Hispanic White individuals (Age-adjusted rate: 52.1 per 100,000 population), and 8% were among Hispanic individuals (Age-adjusted rate: 94.4 per 100,000 population).
- Among age groups, the highest proportion of diagnoses in 2020 was seen in individuals aged: 20-29 (49%), 30-39 (22%), and 15-19 (16%).

While the statewide increases have been noteworthy, counties listed below (in descending order of 2020 diagnoses) have either seen a larger percentage increase in 2020 diagnoses compared to 2019 or diagnoses that have not declined since 2019.

County*	2019	2020**	%Increase
Monroe	2,302	4,073	77%
Erie	1,950	3,042	56%
Onondaga	1,039	1,406	35%
Suffolk	807	1013	26%
Albany	742	775	4%
Niagara	339	504	49%
Schenectady	246	421	71%
Rensselaer	277	366	32%
Orange	291	352	21%
Oneida	162	326	101%
Broome	208	314	51%
Dutchess	212	303	43%
Jefferson	96	225	134%
Wayne	51	161	216%
Saratoga	88	106	20%
Chautauqua	141	142	1%

County*	2019	2020**	%Increase
Chemung	112	113	1%
Sullivan	47	105	123%
Cayuga	62	101	63%
Fulton	28	86	207%
Montgomery	30	77	157%
Ontario	61	76	25%
Oswego	39	52	33%
Columbia	30	48	60%
Cattaraugus	37	48	30%
Orleans	20	47	135%

\*Highlighted counties have the highest case rates (greater than 136.94 per 100,000 population) in the state (see attached state map).

\*\*2020 data are considered preliminary and are subject to change.

## What Providers Can Do to Support Sexual Health and Prevent Gonorrhea and other STIs

- **Please note, where facility-based services and in-person patient-clinician contact is limited during COVID-19, providers should follow the CDC guidance on therapeutic options for symptomatic patients and their partners when in-person clinical evaluation is not feasible.** Visit [https://www.cdc.gov/std/dstdp/DCL-STDTreatment-COVID19-04062020.pdf?deliveryName=USCDCNPIN\\_252-DM25769](https://www.cdc.gov/std/dstdp/DCL-STDTreatment-COVID19-04062020.pdf?deliveryName=USCDCNPIN_252-DM25769) for more information.
  - **Guidance and resources on preventing COVID-19 while maintaining sexual health care:**  
[https://www.health.ny.gov/diseases/aids/general/prep/docs/dear\\_colleague\\_12-2020.pdf](https://www.health.ny.gov/diseases/aids/general/prep/docs/dear_colleague_12-2020.pdf)
- **Conduct a complete sexual health history**, risk, and drug use assessment for *every* patient. Ask about specific behaviors, such as the number of partners, type of sex (i.e., vaginal, anal, oral), sex of partners, drugs used, and route of drug ingestion, to help guide laboratory testing. Visit [www.ncshguide.org/providers](http://www.ncshguide.org/providers) or GOALS Framework for Sexual History taking in Primary Care - [https://www.hivguidelines.org/prep-for-prevention/for-care-providers/#tab\\_3](https://www.hivguidelines.org/prep-for-prevention/for-care-providers/#tab_3) for guidance and additional resources.
- **Screen** for STIs in:
  - Sexually active MSM, at least annually; every 3 to 6 months if at increased risk
  - Sexually active persons with HIV, at least annually
  - All persons with newly diagnosed HIV
  - Persons presenting with evidence of active injection or other drug use
  - Persons previously and/or currently diagnosed with STIs
  - Sex or needle sharing partners of individual(s) known to have diagnosed HIV or an STI

- Pregnant people at their first prenatal visit and during the third trimester
- All sexually active persons; all sexually active women younger than 25 years should be tested for gonorrhea and chlamydia every year
- **Test at the anatomic site(s) of sexual exposure and offer three-site testing** for gonorrhea and chlamydia.
- **Treat promptly and/or link patients immediately to care and treatment.** Follow the latest treatment guidelines for gonorrhea:  
[https://www.cdc.gov/mmwr/volumes/69/wr/mm6950a6.htm?s\\_cid=mm6950a6\\_w](https://www.cdc.gov/mmwr/volumes/69/wr/mm6950a6.htm?s_cid=mm6950a6_w)
- **Facilitate partner management by:**
  - Offering and providing [Expedited Partner Therapy \(EPT\) for gonorrhea](#), and
  - Encouraging patients to refer their sex or needle sharing partners to medical care for STI screening and treatment including HIV testing.
- **Offer and perform HIV testing** for every patient age 13 years and older.
- **Offer** Pre-Exposure Prophylaxis (PrEP) and Post-Exposure Prophylaxis (PEP), as indicated.
- **Collaborate** with State and County public health personnel on partner notification efforts.
- **Refer** consenting patients to community-based organizations (CBOs) for support services, as needed.
- **Report** all suspected and confirmed STI cases promptly to your local county health department. Information is available at [www.health.ny.gov/forms/doh-389.pdf](http://www.health.ny.gov/forms/doh-389.pdf) and [www.health.ny.gov/forms/instructions/doh-389\\_instructions.pdf](http://www.health.ny.gov/forms/instructions/doh-389_instructions.pdf).
- **Ensure** your employees and colleagues have access to current information and tools to promote health equity. Please see <https://www.cdc.gov/std/health-disparities/default.htm> for more information.

### **What Community-Based Organizations Can Do to Support Sexual Health and Prevent Gonorrhea and other STIs**

- **Assess risk:** conduct a comprehensive behavioral sexual risk assessment for program participants/clients. Ask about specific behaviors, such as the number of partners, type of sex (i.e., vaginal, anal, oral), sex of partners, drugs used, and route of drug ingestion to help guide lab testing.
- **Implement targeted client recruitment:** prioritize agency services to identify individuals who do not access health care services or who may not otherwise have access to HIV and STI testing in clinical settings. These persons may benefit most from HIV and STI testing services in nonclinical settings.
- **Conduct venue based and/or mobile HIV/STI testing activities to key priority populations:** test key populations consistent with those identified in this advisory (see above) and the needs in your local community. ***Provide HIV Self-Test kits when venue based and/or mobile based testing activities are not available and/or possible.***

- **Conduct HIV/STI testing activities with people under 18:** People under 18 can consent to STI testing, treatment and prevention regardless of their insurance status. Partner services and other supportive services are encouraged to support minors to navigate healthcare systems. For more information please see: [https://www.health.ny.gov/diseases/communicable/std/docs/faq\\_billing\\_consent.pdf](https://www.health.ny.gov/diseases/communicable/std/docs/faq_billing_consent.pdf) and [https://www.health.ny.gov/diseases/communicable/std/docs/letter\\_minor\\_consent.pdf](https://www.health.ny.gov/diseases/communicable/std/docs/letter_minor_consent.pdf)
- **Provide harm reduction services:** facilitate access to clean syringes and essential support services for people who inject drugs.
- **Offer linkage and navigation services:** assist persons with HIV, or persons who are HIV negative and at risk, to obtain timely, essential, and appropriate medical, prevention, and support services (including PrEP/PEP) to optimize health and prevent HIV/STI/HCV transmission and acquisition.
- **Provide effective behavioral interventions:** implement prevention activities that are culturally relevant and have been shown to be successful by evaluation or research.
- **Engage in condom promotion, education, and distribution:** make condoms available at no cost and increase access to condoms in ways that reduce embarrassment or discomfort when acknowledging sexual activity. Information about the New York State Condom Program is available at <https://www.health.ny.gov/diseases/aids/consumers/condoms/nyscondom.htm>
- **Work with existing coordinating and community planning bodies** such as NYS Ending the Epidemic regional steering committees, the [NYS HIV Advisory Body](#), and [NY Links](#) to plan, promote, and conduct community education events/activities, foster dialogue, and share resources.
- **Develop and disseminate messages** on topics such as HIV/STI/HCV prevention, the availability and importance of HIV/STI screening and viral hepatitis screening, the availability of local behavioral health and social services, and pre-exposure (PrEP) and post-exposure (PEP) services using a wide variety of materials/mediums including social media (e.g. Facebook, Grindr, Tindr, Twitter, Instagram, etc.) and traditional media (e.g. radio, TV, newspapers). Create new educational materials and/or update existing materials as needed. Reach out to local media (e.g. newspapers, radio stations, TV stations) to encourage them to report on the issue (issue press releases).

## Resources

- New York State Department of Health – Gonorrhea Case Report Form: <https://commerce.health.state.ny.us/hpn/ctrldocs/cdess/CdessHelp/BlankForms/Gonorrhea.pdf>
  - Free and confidential HIV and STI testing is available at local health department STD clinics. For clinic locations and hours, please visit: <https://providerdirectory.aidsinstituteny.org/>
  - Clinical Education Initiative Sexual Health Center of Excellence: 866-637-2342 to access expert medical consultation on diagnosis, treatment and management of STI infections. Training calendar and archived webinars are available at [www.ceitraining.org](http://www.ceitraining.org)
  - EPT health educational materials for chlamydia are available here: <https://www.health.ny.gov/diseases/communicable/std/ept/index.htm> (EPT educational materials specific for gonorrhea and trichomoniasis are currently being developed).
  - National STD Curriculum – CDC-supported web-based training for clinicians. <https://www.std.uw.edu/>.
  - Update to CDC's Treatment Guidelines for Gonococcal Infection, 2020: -- [https://www.cdc.gov/mmwr/volumes/69/wr/mm6950a6.htm?s\\_cid=mm6950a6\\_w](https://www.cdc.gov/mmwr/volumes/69/wr/mm6950a6.htm?s_cid=mm6950a6_w)
    - The STD Treatment (Tx) Guidelines mobile app is free and available for [Apple devices](#) and [Android devices](#)
  - Guidance for obtaining a sexual history is available on the CDC Division of STD Prevention resource page: <https://www.cdc.gov/std/treatment/resources.htm>
  - National Network of STD Clinical Prevention Training Centers STD Clinical Consultation Network <https://www.stdccn.org/>
  - Recommendations for the Laboratory-Based Detection of *C. trachomatis* and *N. gonorrhoeae* – 2014 <https://www.cdc.gov/std/laboratory/2014labrec/default.htm>
  - STD Prevention Resources [https://www.cdc.gov/std/publications/STDPreventionResources\\_WEB.pdf](https://www.cdc.gov/std/publications/STDPreventionResources_WEB.pdf)
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